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| Today’s Date: | Click or tap to enter a date. |
|  Phone #: |  |
| Career Center: | Choose an item. |
| Type of Data Entry Issue/Error: | Choose an item. |
| Staff member who entered MOSES data: |  |
| Manager/Supervisor’s Name who has reviewed this form and MOSES data: |  |

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| Claimant’s Name: |  |
| Job Seeker ID #: |  |
| Claimant ID #: |  |

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| RESEA Enrollment Date: | Click or tap to enter a date. |
| CCS “Must Attend By” Date: | Click or tap to enter a date. |
| Actual CCS Attendance Date: | Click or tap to enter a date. |
| Date CCS Attendance was Entered in MOSES: | Click or tap to enter a date. |
| RESEA “Must Attend By” Date: | Click or tap to enter a date. |
| Actual RESEA Completion Date: | Click or tap to enter a date. |
| Date RESEA was Entered in MOSES: | Click or tap to enter a date. |

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| Are all the RESEA Cap Goals Up to Date? | Choose an item. |
| Are all General MOSES Notes Up to Date? | Choose an item. |

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| **Please provide a detailed explanation of this request. This explanation also needs to be entered as a General MOSES note.**  |

*When completed, please email this form to:* *REALMI@mass.gov*