



CalJOBS Correction Form & TA Request

REQUESTOR INFORMATION			
Staff Requested By	Phone Number	Email Address	Date
WORKFORCE PARTNER	SOCIAL ENTERPRISE PARTNER		OTHER
<input type="checkbox"/> Sun Valley WSC (El Proyecto) <input type="checkbox"/> Hollywood WSC (MCS) <input type="checkbox"/> Northeast LA WSC (Goodwill) <input type="checkbox"/> Vernon Central WSC (CRCD) <input type="checkbox"/> West Los Angeles WSC (JVS) Transitional Employment Provider: <input type="checkbox"/> West Los Angeles – UCLA YSC <input type="checkbox"/> Catholic Charities AYE YSC <input type="checkbox"/> Sun Valley YSC	<input type="checkbox"/> Center for Employment Opportunities <input type="checkbox"/> Center for Living and Learning <input type="checkbox"/> Chrysalis Enterprises <input type="checkbox"/> CRCD Enterprise <input type="checkbox"/> Downtown Women’s Center <input type="checkbox"/> Goodwill Enterprise <input type="checkbox"/> GRID Alternatives <input type="checkbox"/> Homeboy Industries <input type="checkbox"/> LA Conservation Corps <input type="checkbox"/> LA LGBT Center <input type="checkbox"/> YWCA Digital Learning Academy		<input type="checkbox"/> Other: _____
PARTICIPANT INFORMATION			
Participant Name		User Name	
User ID		Last 4 Digits SSN	
REASON FOR CORRECTION / TECHNICAL ASSISTANCE REQUEST			
CITY MIS USE ONLY			
Analyst Assigned			Date
Status <input type="checkbox"/> Approve <input type="checkbox"/> Deny			
Notes			
SUBMISSION INFORMATION			
To: LA City MIS Section		Email: celene.heredia@lacity.org & emoli.mendez@lacity.org	
Subject: Correction Form		Fax: (213) 744-9326	