



**Area 20/21**  
**Hocking - Fairfield**  
**Pickaway - Ross - Vinton**

Dependent Status Policy

The determination of dependent status is required for all individuals under 24 years of age as part of the determination of eligibility for WIOA program services. This determination shall be made prior to the application of federal definition of “family”.

The determination of dependent status is driven by the following factors:

- The amount of support provided to the applicant by his/her parent(s) or guardian(s); and

The applicant’s:

- Age
- Marital status
- Dependents (biological/adopted children, disabled adults, and others dependent on the applicant for more than 50% of their support\*); and
- Veteran status

The WIOA legislation requires for an individual to receive a WIOA adult-funded ITA the individual must be unable to obtain sufficient grant resources to cover the cost of training.

To be suitable for ITAs, adults, including dependent adults, must be below Area 20/21’s established income level set for family self-sufficiency.

Verification of dependent status must be maintained in the participant files for documentation and accountability purposes to ensure due diligence was conducted when determining family size and means of support. Documentation will include the checklist “Determination of WIOA Dependent Status” form (Attachment A).

Self-attestation may be accepted to document parental support when signed by parent or guardian.

The requirement for youth to meet low income criteria is determined when an individual received an income or is a member of a family which has received and income for the 6 month period prior to application for the program which in relation to the family size does not exceed the higher for the poverty line or the 70 percent of the lower living standard.

Applicants or participants age 22-23 who are determined dependent are not eligible for WIOA youth program as defined by WIOA.

## **Definitions**

**Dependent** (defined by the State of Ohio, ODJFS) is an applicant who falls in any one of the following categories:

- Under 18 years of age
- Age 18 – 23 and parent(s) or guardian(s) pay(s) for more than 50% of the applicant's support\*

Applicants who fall into any one of these categories are considered to be "independent".

- Age 24 or older
- Married (if separated but not divorced, applicant is legally married)
- Has children which receive more than half of their support\* from the applicant
- Has dependents other than a spouse or children who live with the applicant and receive more than half of their support\* from the applicant
- Lives in own residence or in a residence without financial or other support from parents or guardians
- Is on active duty in the U.S. Armed Forces for purposes other than training
- A veteran of the U.S. Armed Forces

**\*Support** as it relates to dependent includes financial assistance from parents or guardians to help pay for food, clothing, shelter, utilities, education, medical and dental care, recreation, transportation, and any other living expenses; as well as any government-provided cash public assistance and food assistance.

The issue of guardianship concerning dependent children may be determined by decree of court, or may be determined by a state or federal agency which has established or assumed guardianship.

An individual under 18 years of age is always considered to be a dependent child, unless the youth is not living with parents or guardians and is not receiving any support from them.

**Family** is two or more persons related by blood, marriage, or decree of court, who are living in a single residence, and are included in one or more of the following categories:


- A husband, wife, and dependent children
- A parent(s) or guardian(s) and dependent children
- A husband and wife

## Attachment A

### Determination of WIA Dependent Status Checklist

**If the answer of any of the below categories is "YES," the individual is considered to be independent.**

\*Support as it relates to dependent includes food, clothing, shelter, utilities, education, medical and dental care, recreation, and transportation; as well as cash public assistance and food assistance.

	Required Documentation	YES	NO	Documentation & comments on file
<input type="checkbox"/>	Are you 24 or older?	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	Do you provide more than 50% of your own <b>support</b> *?	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	Are you married? (Answer "Yes" if you are separated but not divorced)	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	Do you have children who receive more than half of their <b>support</b> * from you?	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	Do you have dependents (other than your children or spouse) who live with you and who receive more than half of their support from you?	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	Do you live in your own residence or in a residence <b>without</b> support from parents or guardians?	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	Are you currently serving on active duty in the U. S. armed forces for purposes other than training? (If you are a National Guard or Reserves enlistee, are you on active duty for other than state or training purposes?)	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	Are you a veteran of the U. S. armed forces?	<input type="checkbox"/>	<input type="checkbox"/>	

By signing this document, you attest that all information provided is true and valid.

X \_\_\_\_\_  
Signature Date