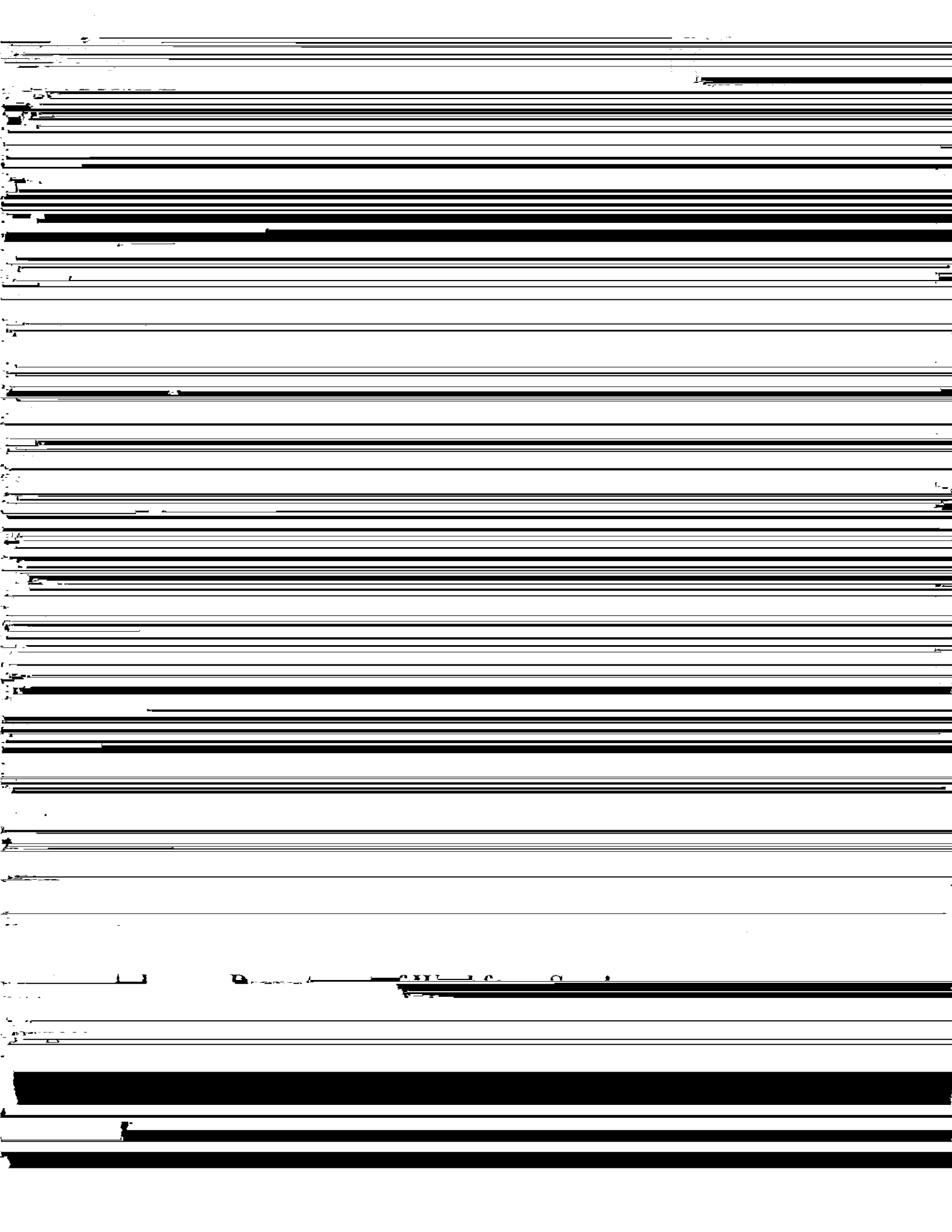
[redacted]

and

[redacted]

From: [redacted] Anton Williams, Director



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Good Cause

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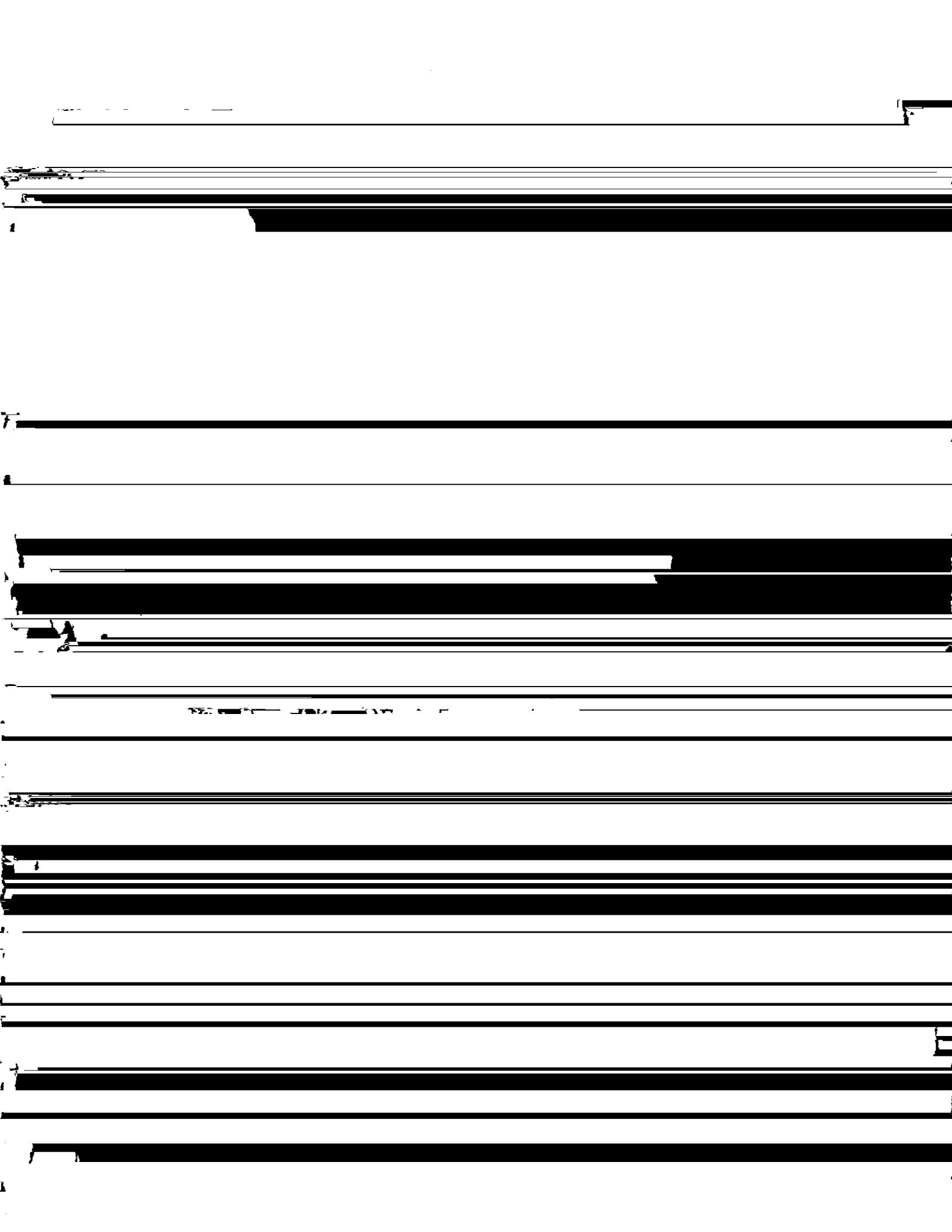
TO: DATE:

FROM:

SECTION III. YOUR RIGHT TO A HEARING

DWS/TEA-177



Instructions

DWS/TEA-178

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Purpose

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Date

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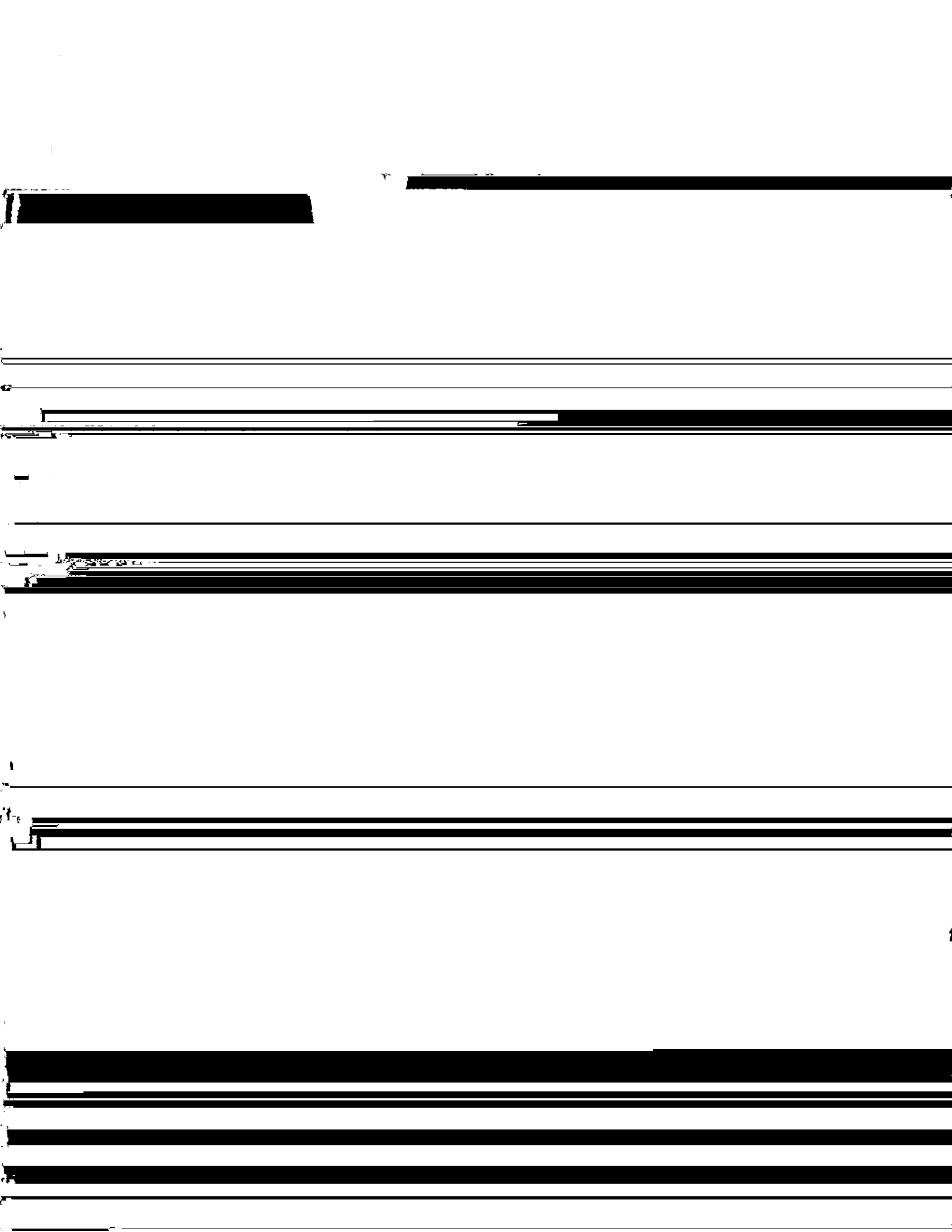
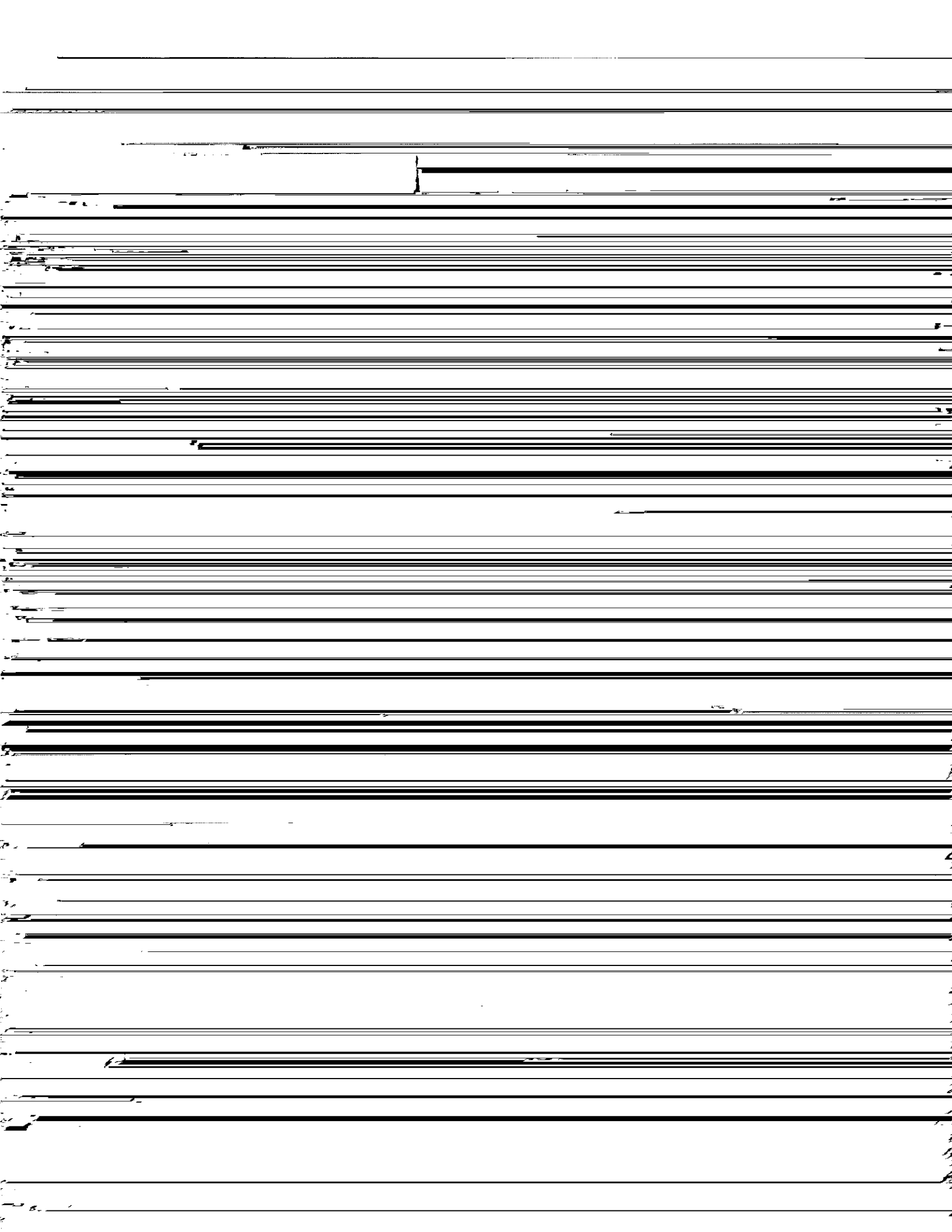
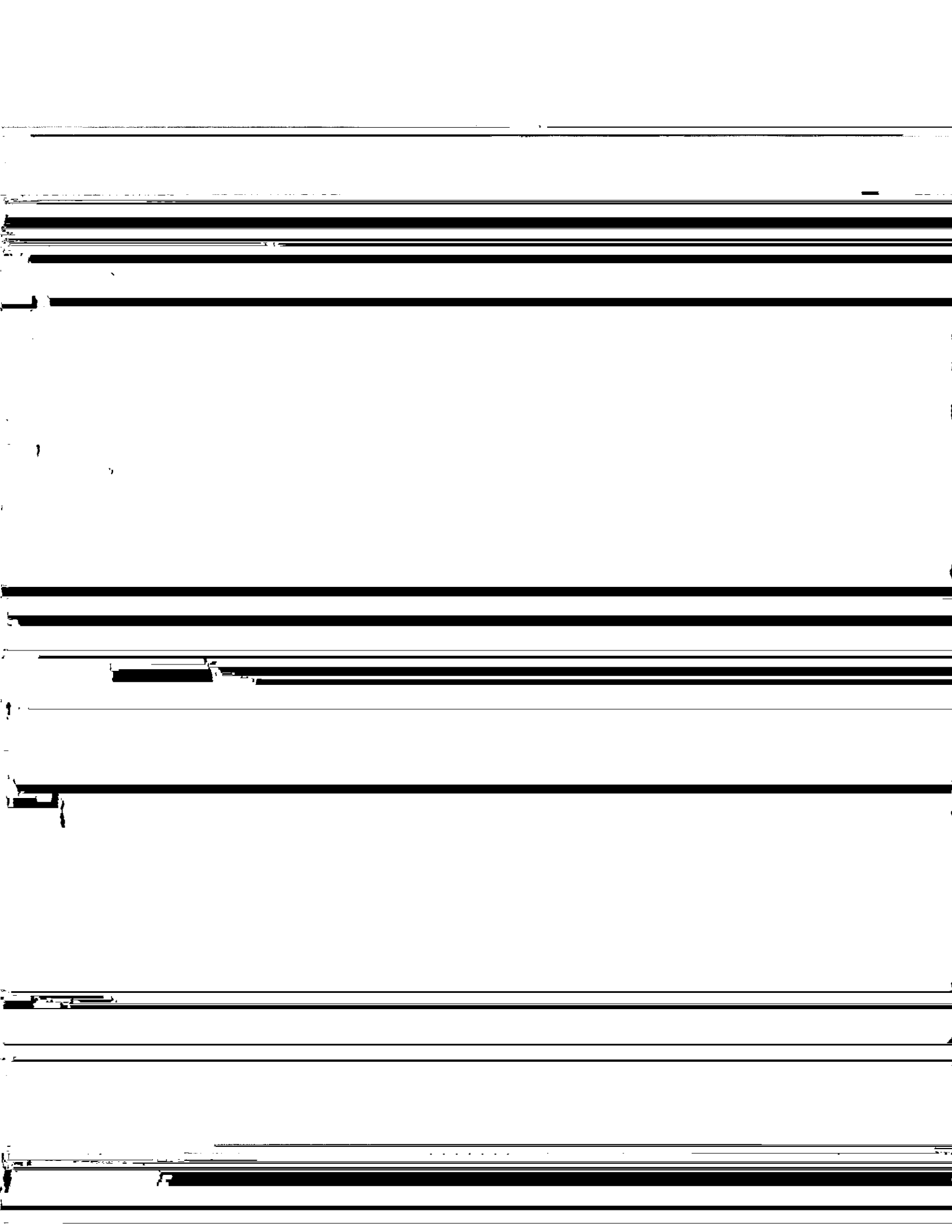
Instructions

Employment Plan

Purpose

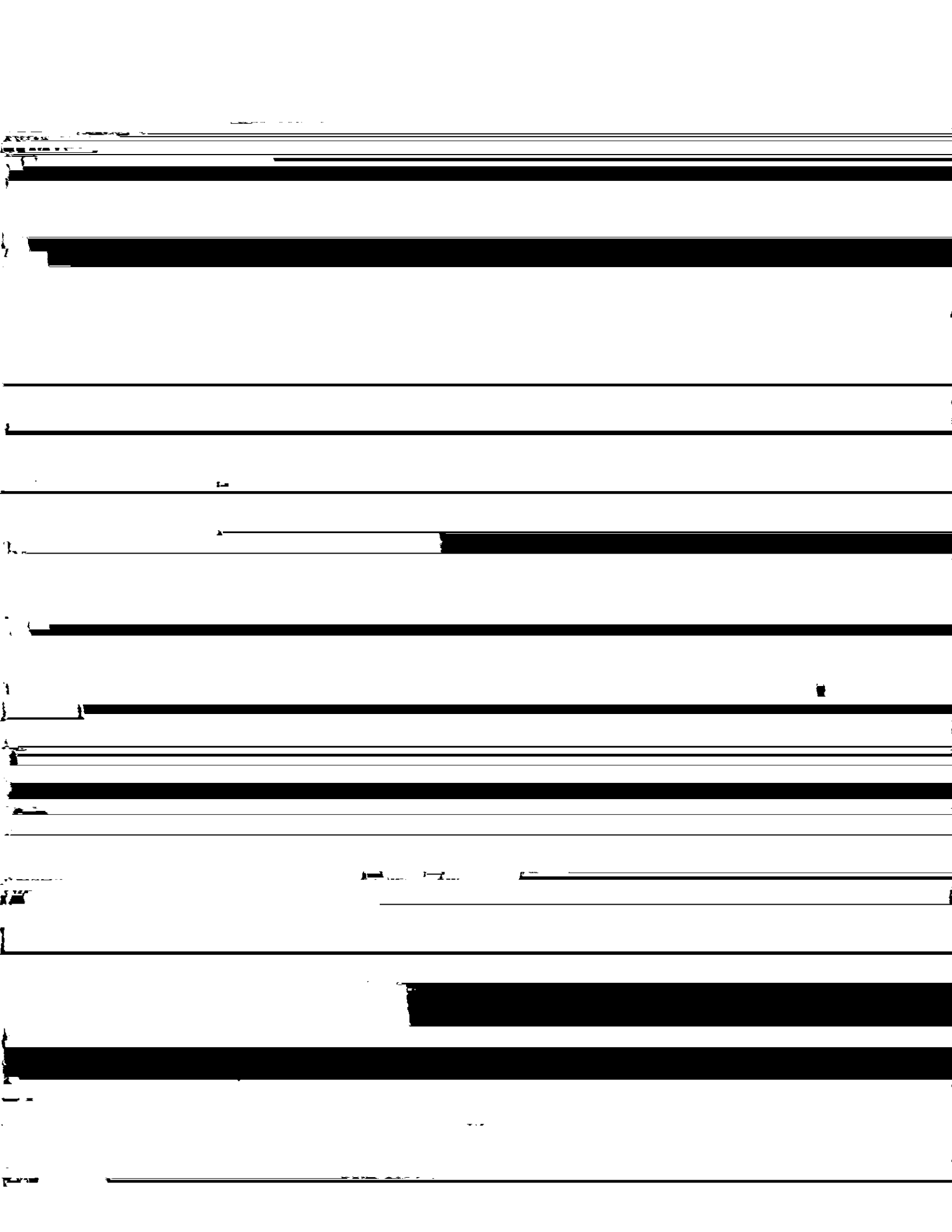






Of

PUR 380 TEA Support Services



Instructions

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Case head [redacted] Case# [redacted]

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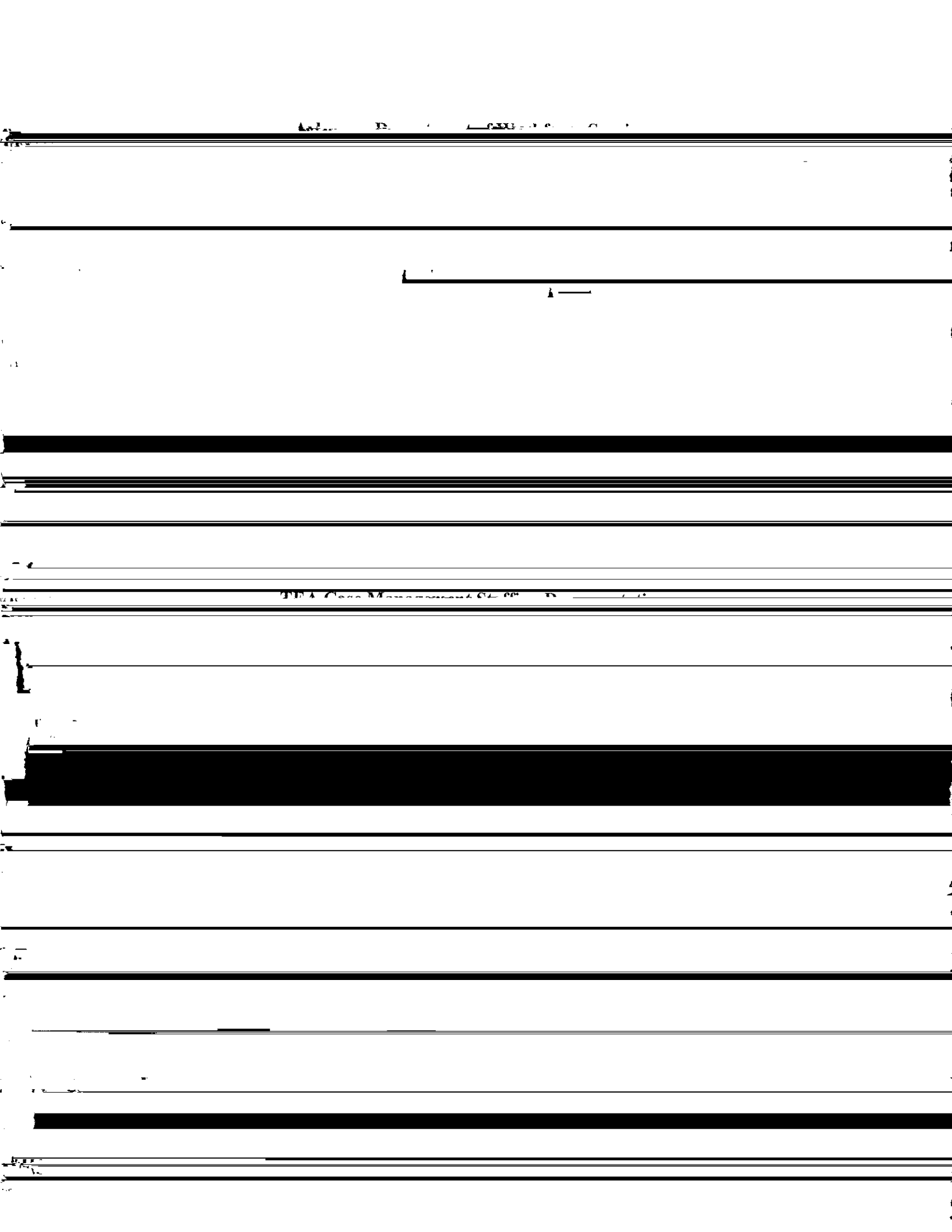
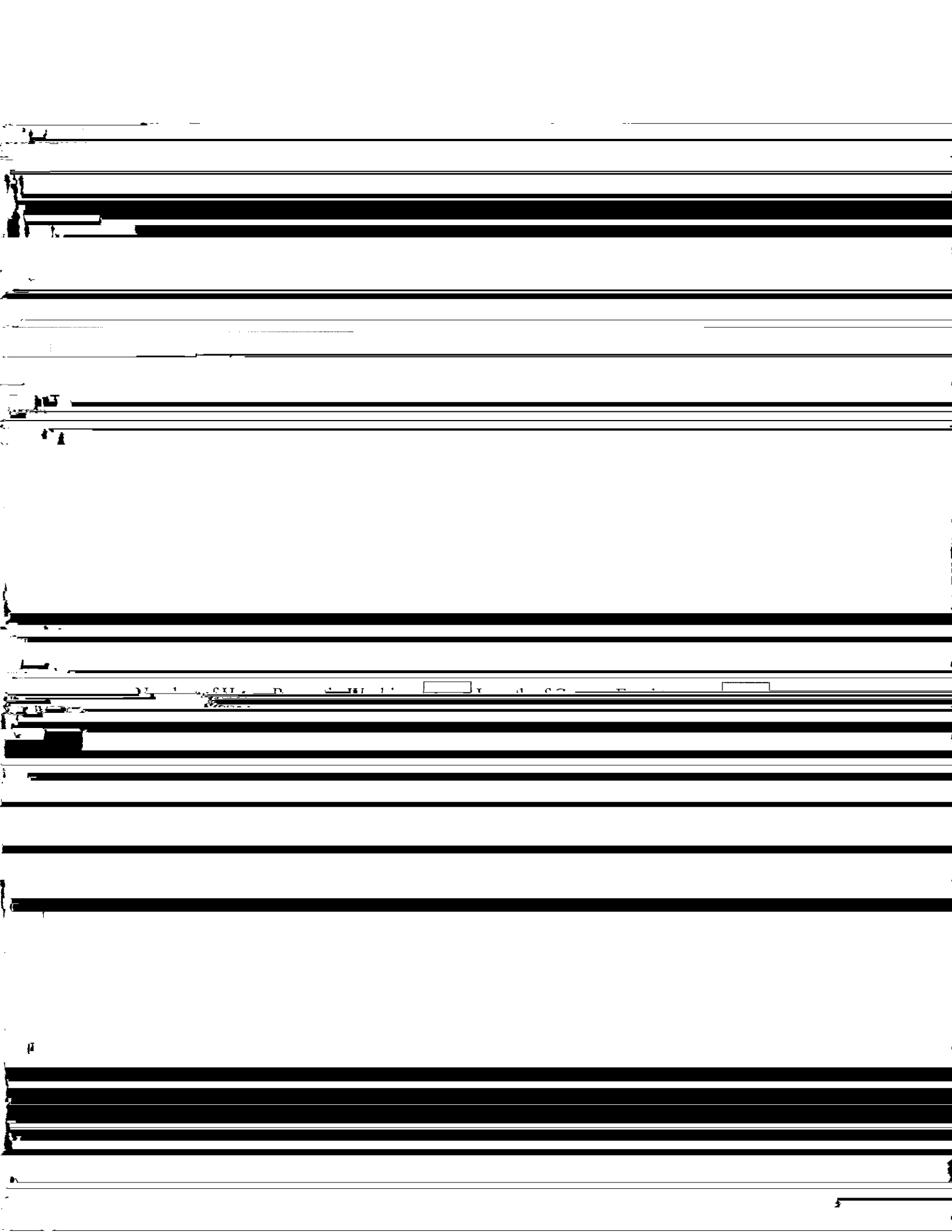
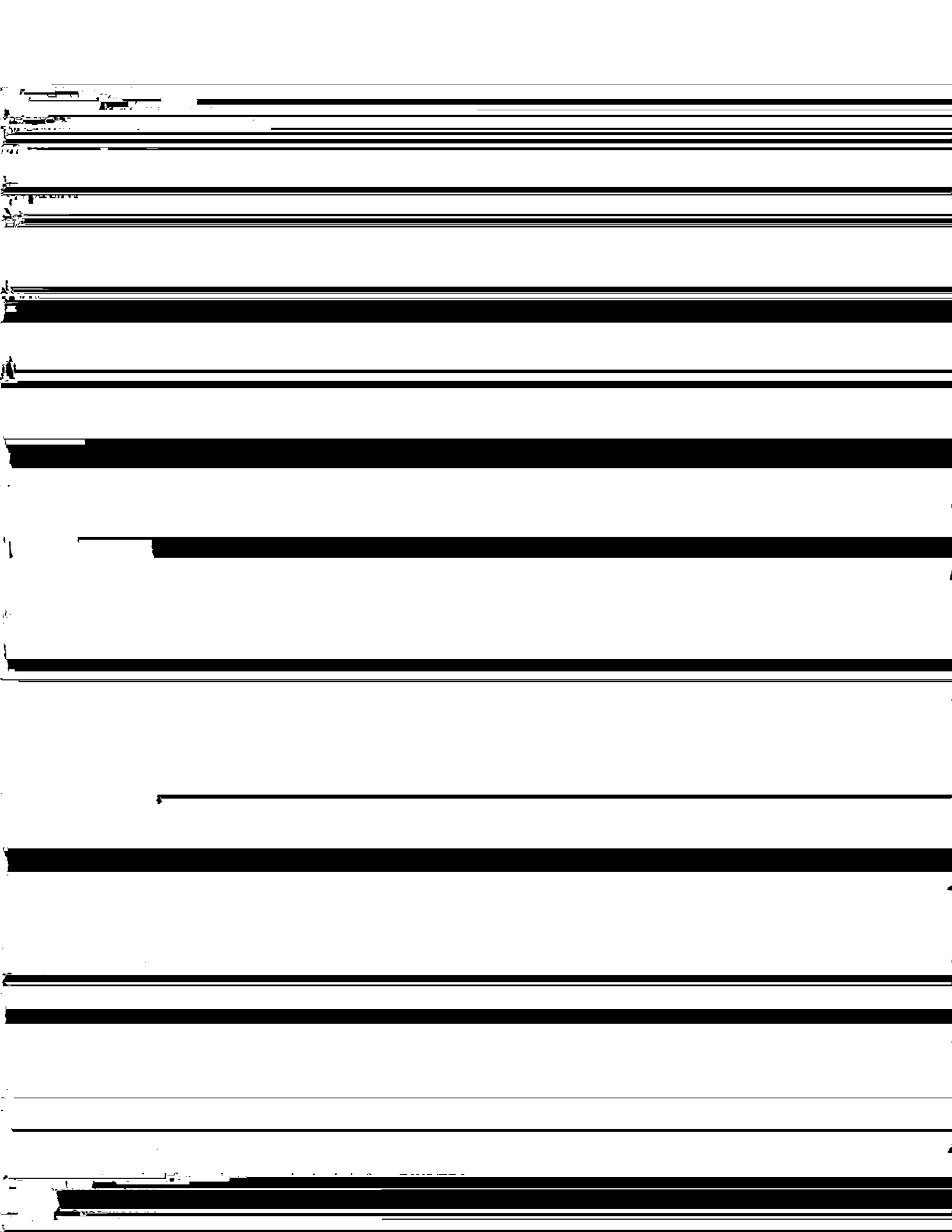
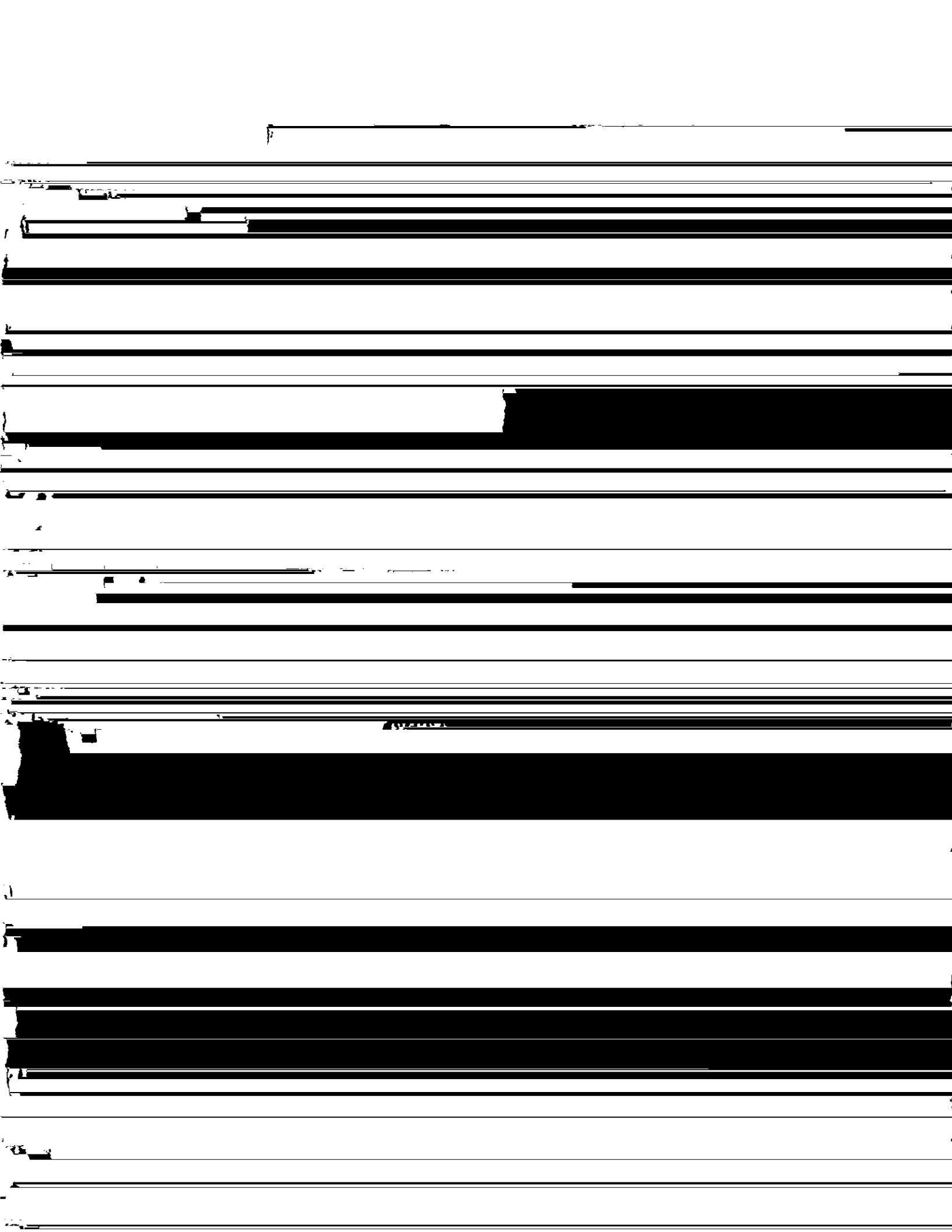
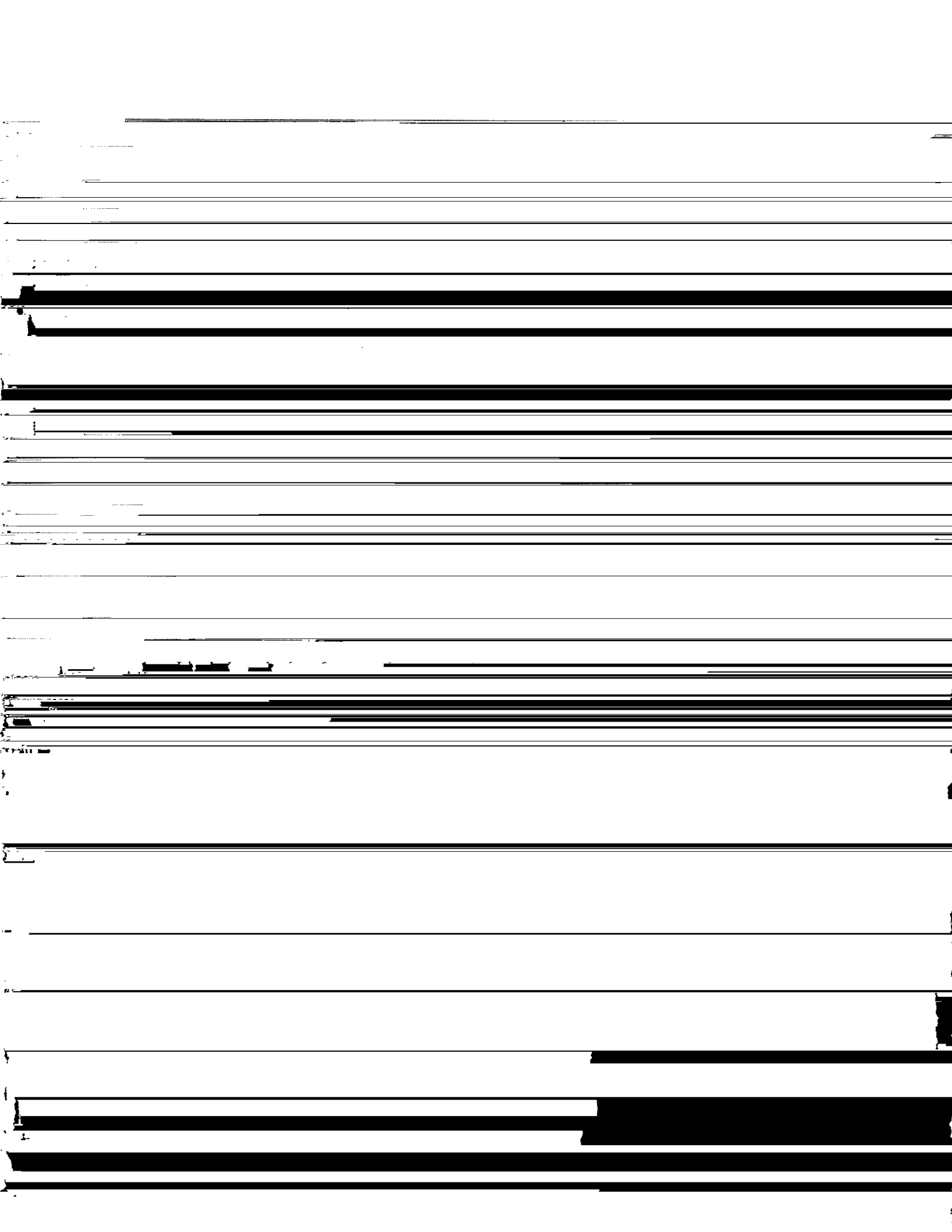


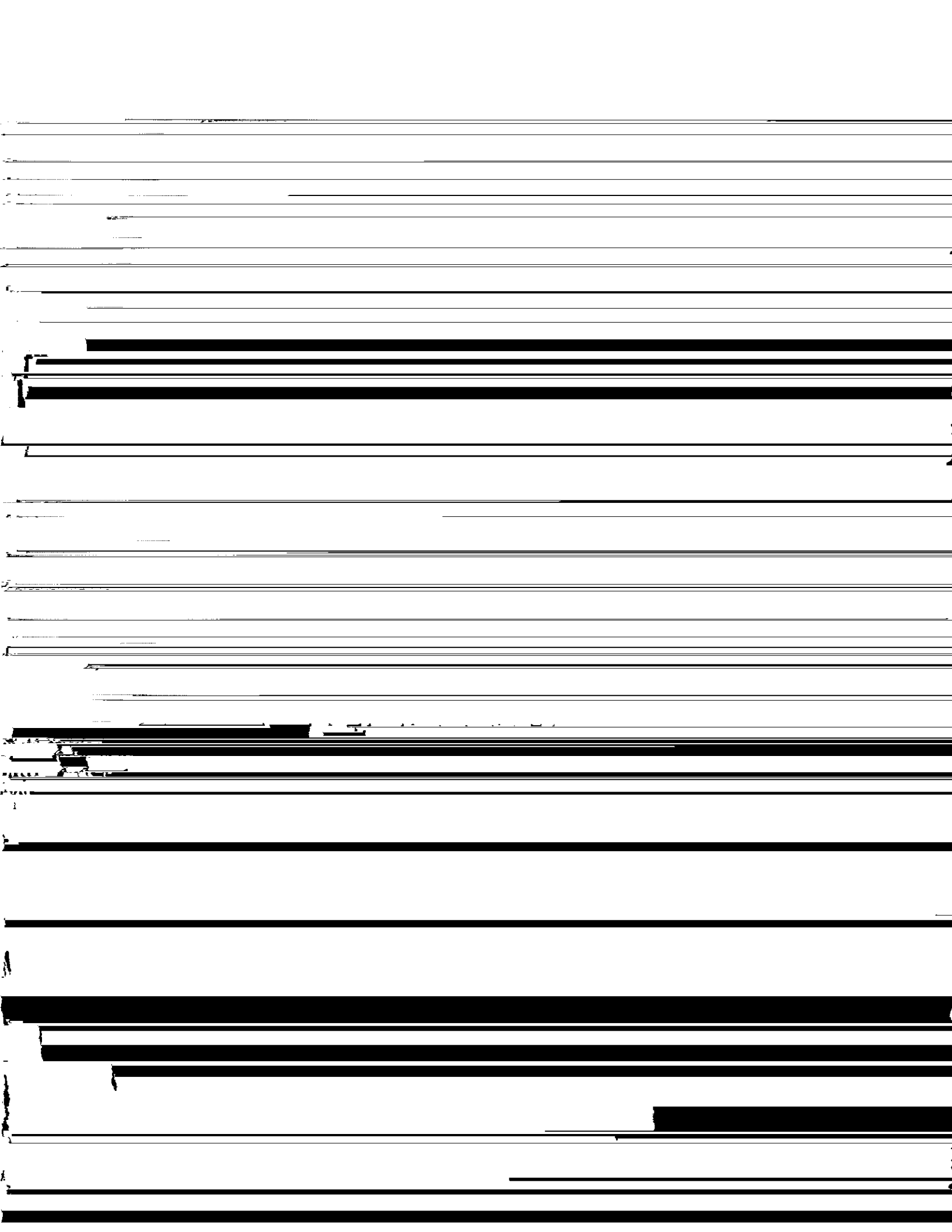


Instructions









TEA Skills, Employability, & Intake A... D...

Purpose

[redacted]

NOTIFICATION TO PROVIDER [redacted]

[redacted]

County [redacted]

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DWS/TEA-1404

Notification to Provider

Purpose

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Purpose

[redacted]

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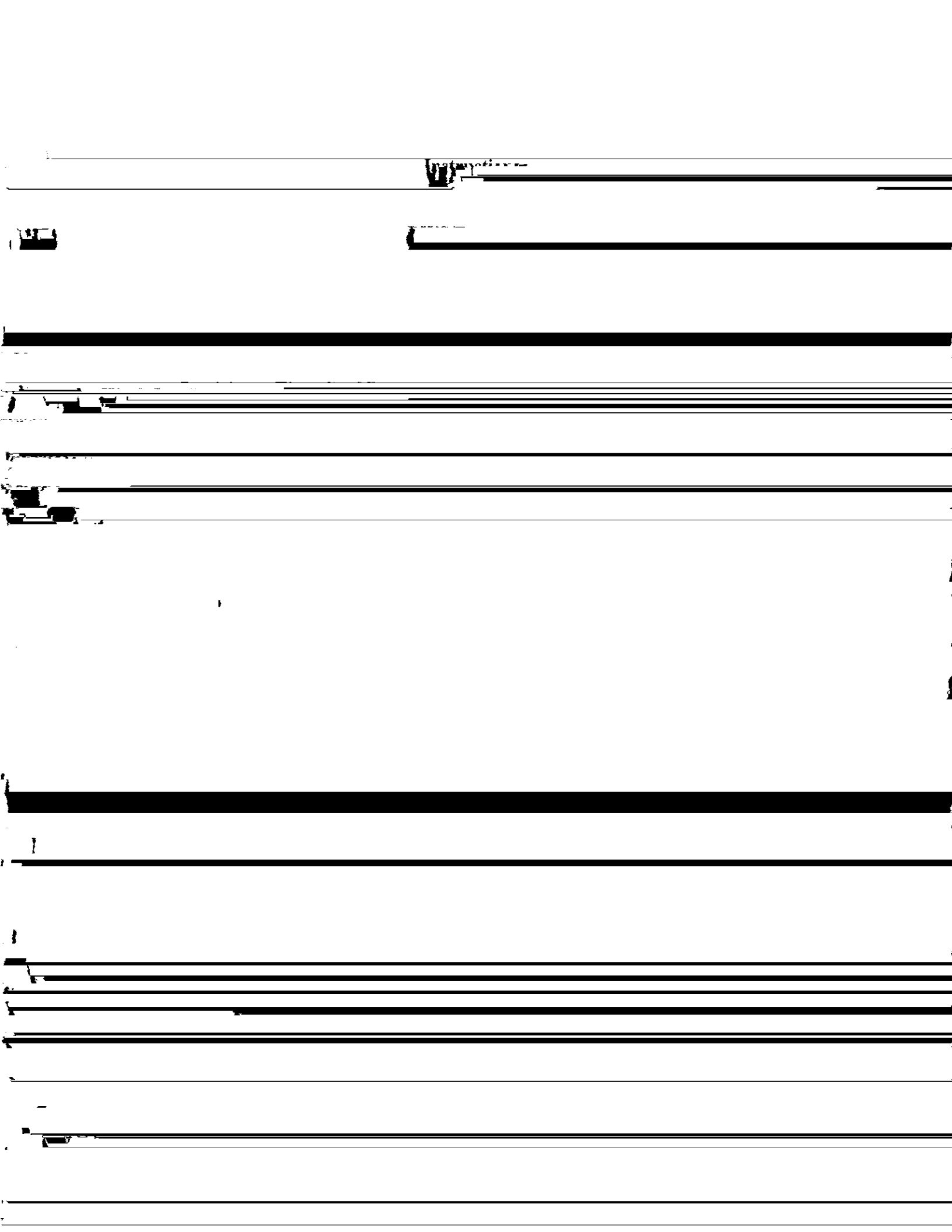
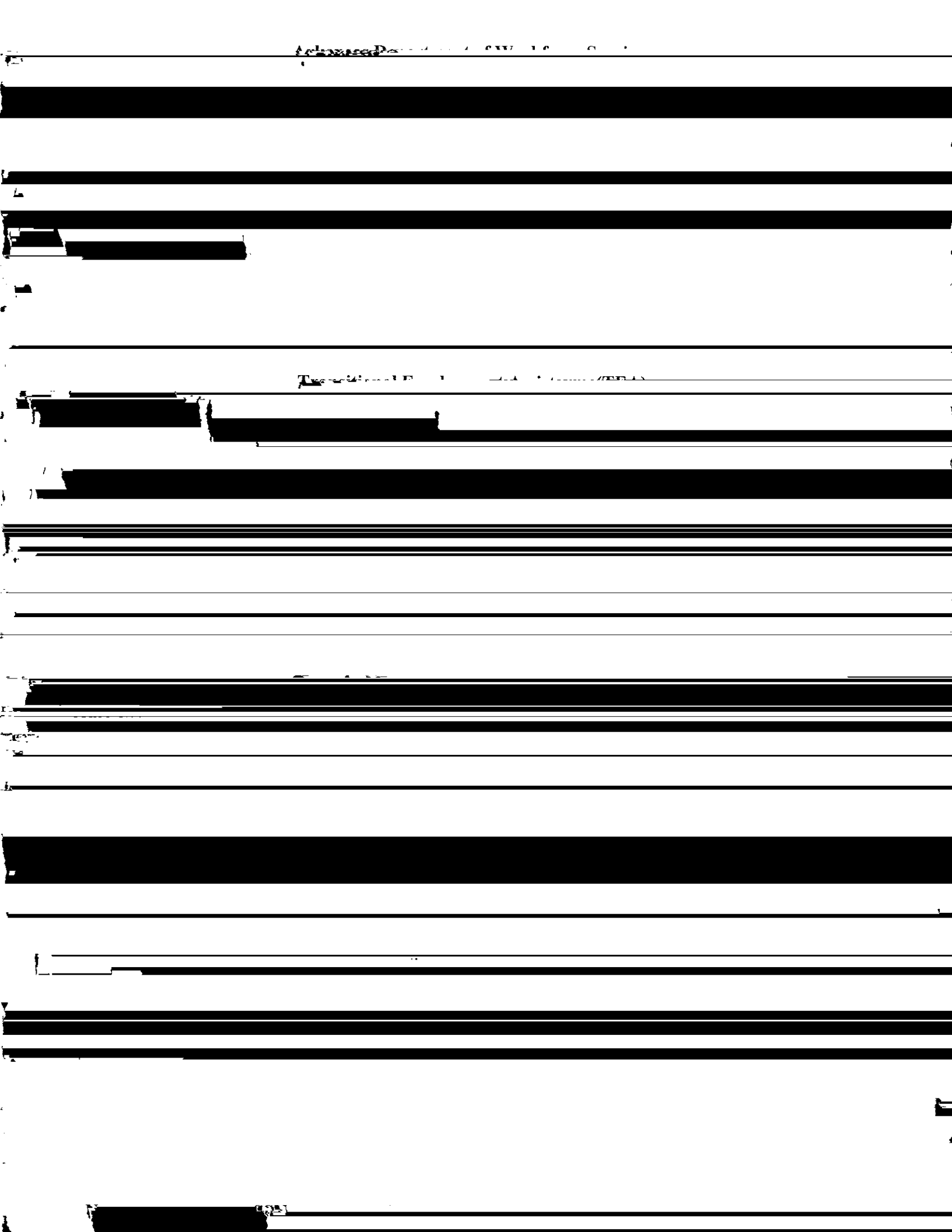


Training Site Assessment

Purpose



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Instructions

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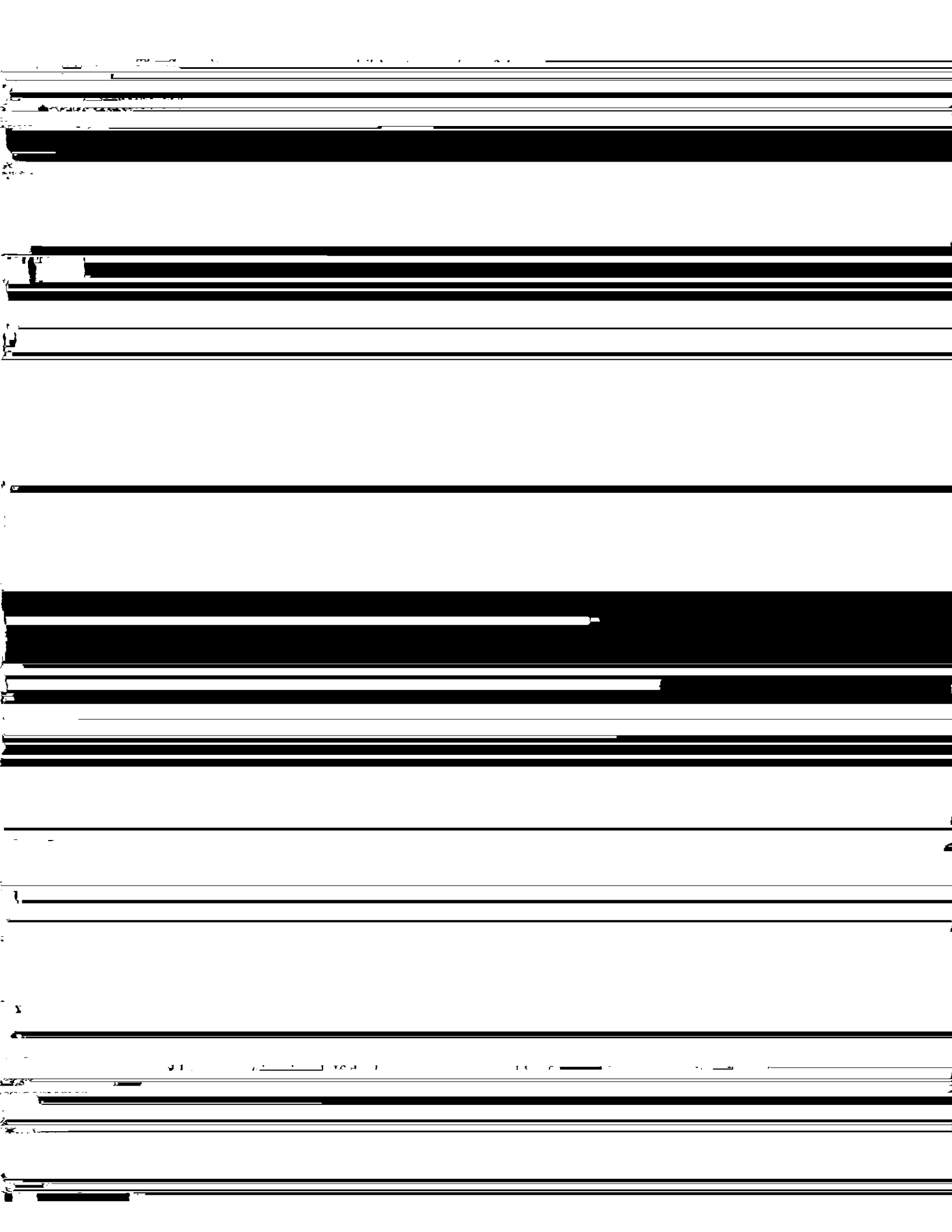

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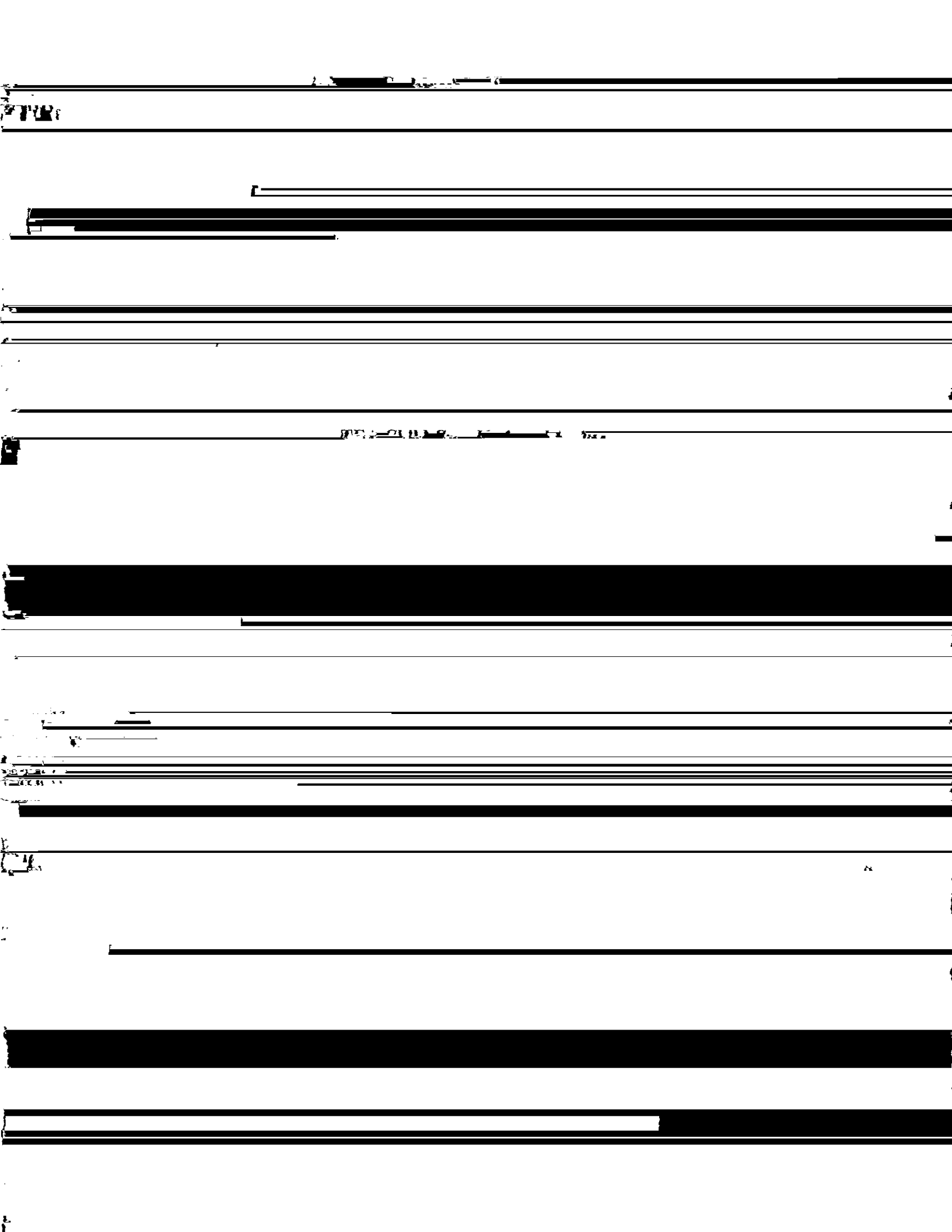

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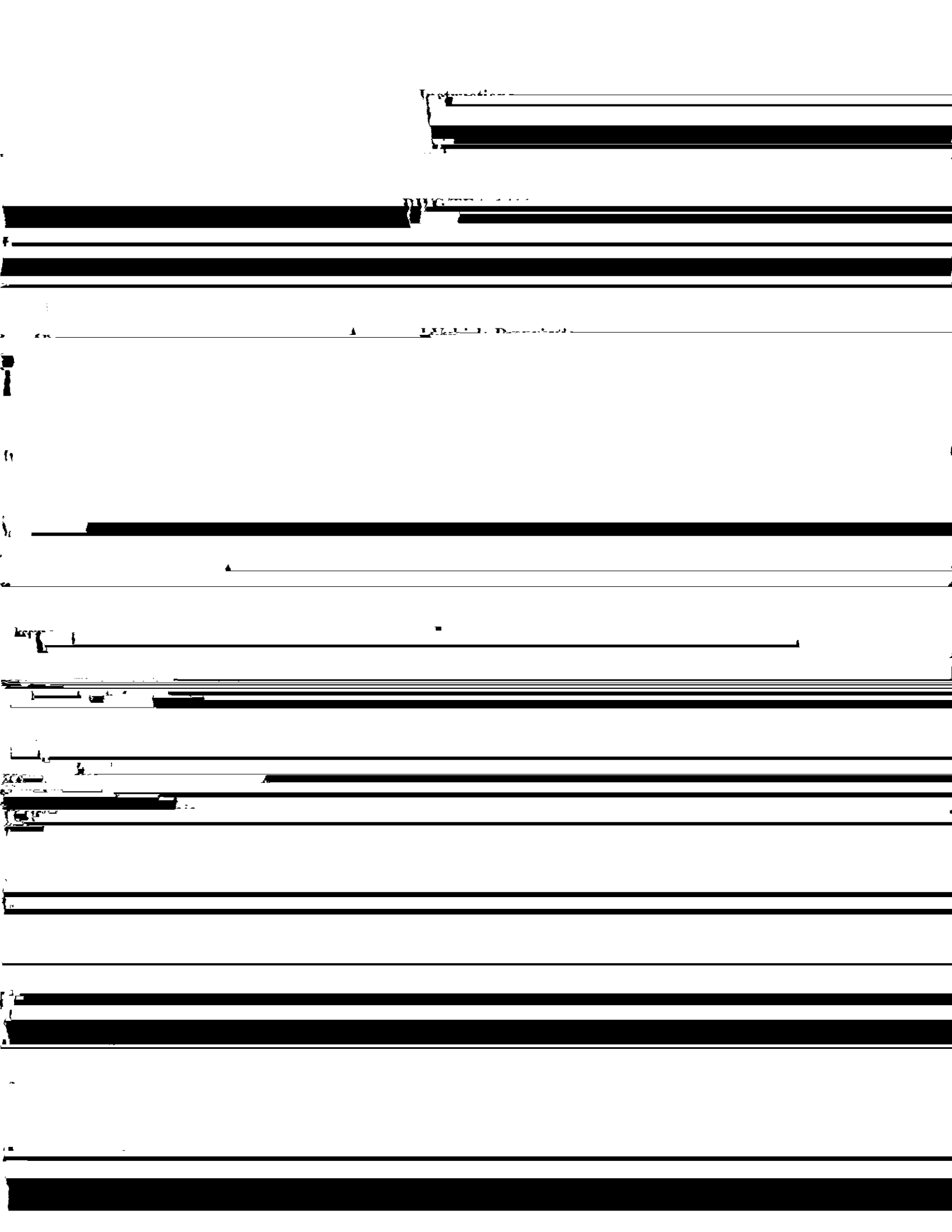

JOB ORDER

Instructions

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Client's Name [redacted] Case Number [redacted]

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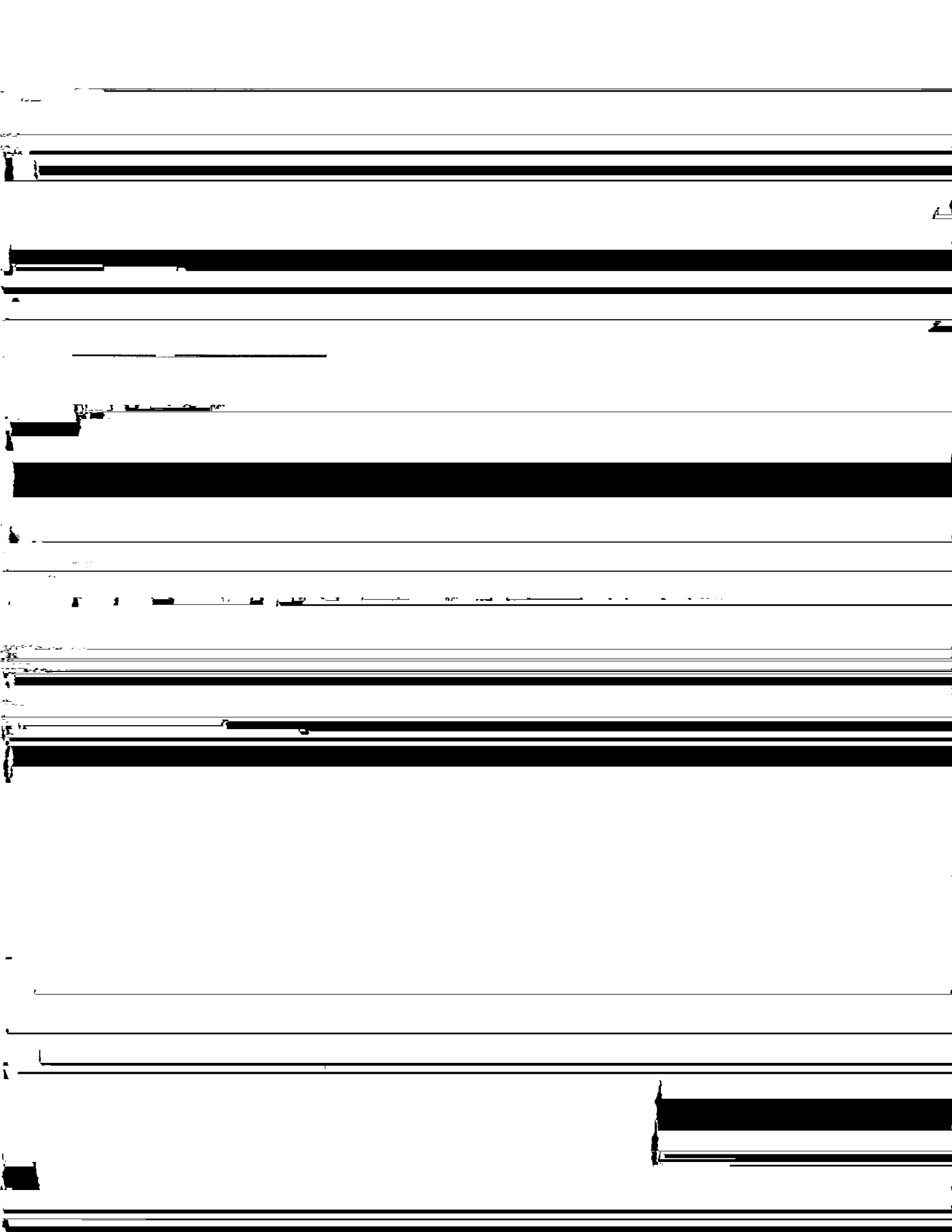

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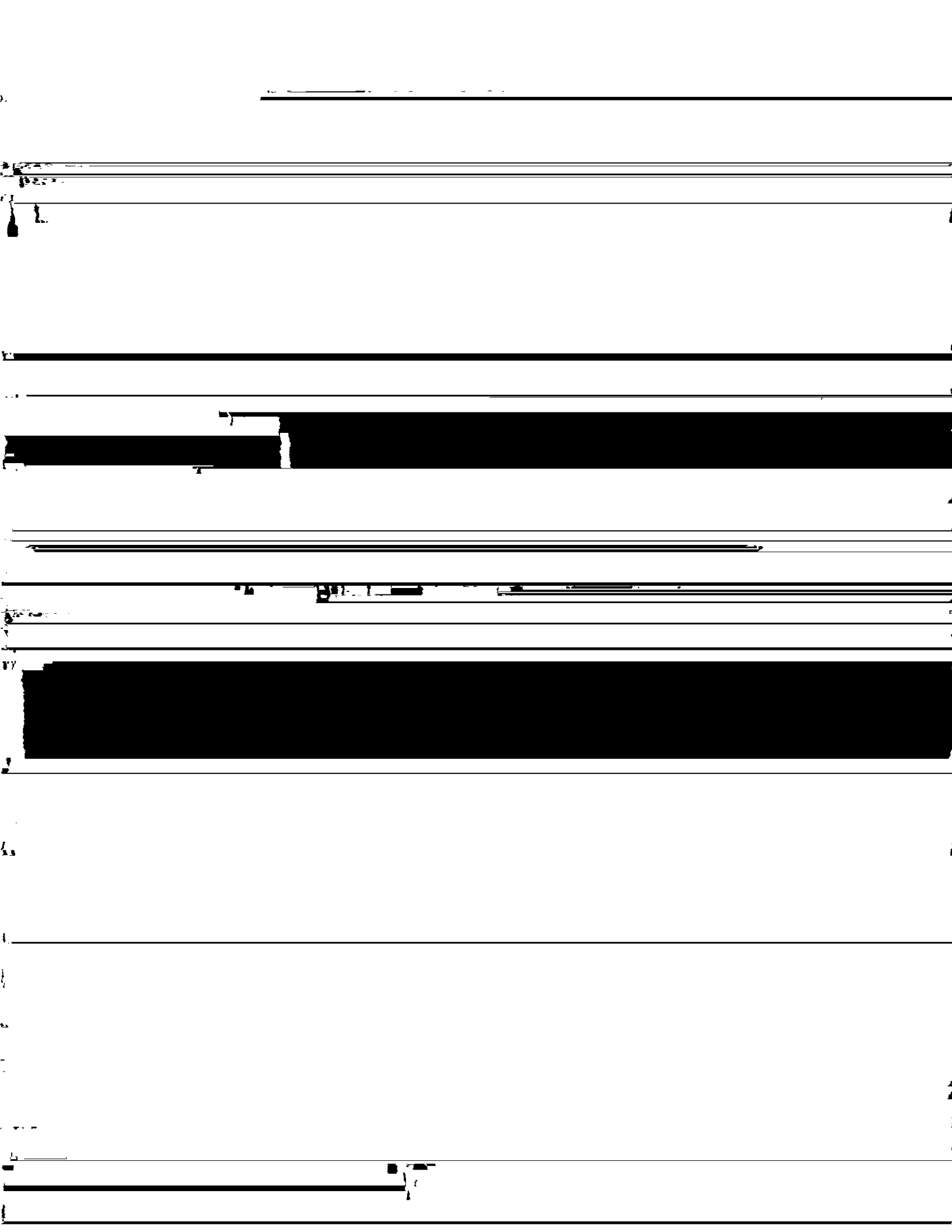

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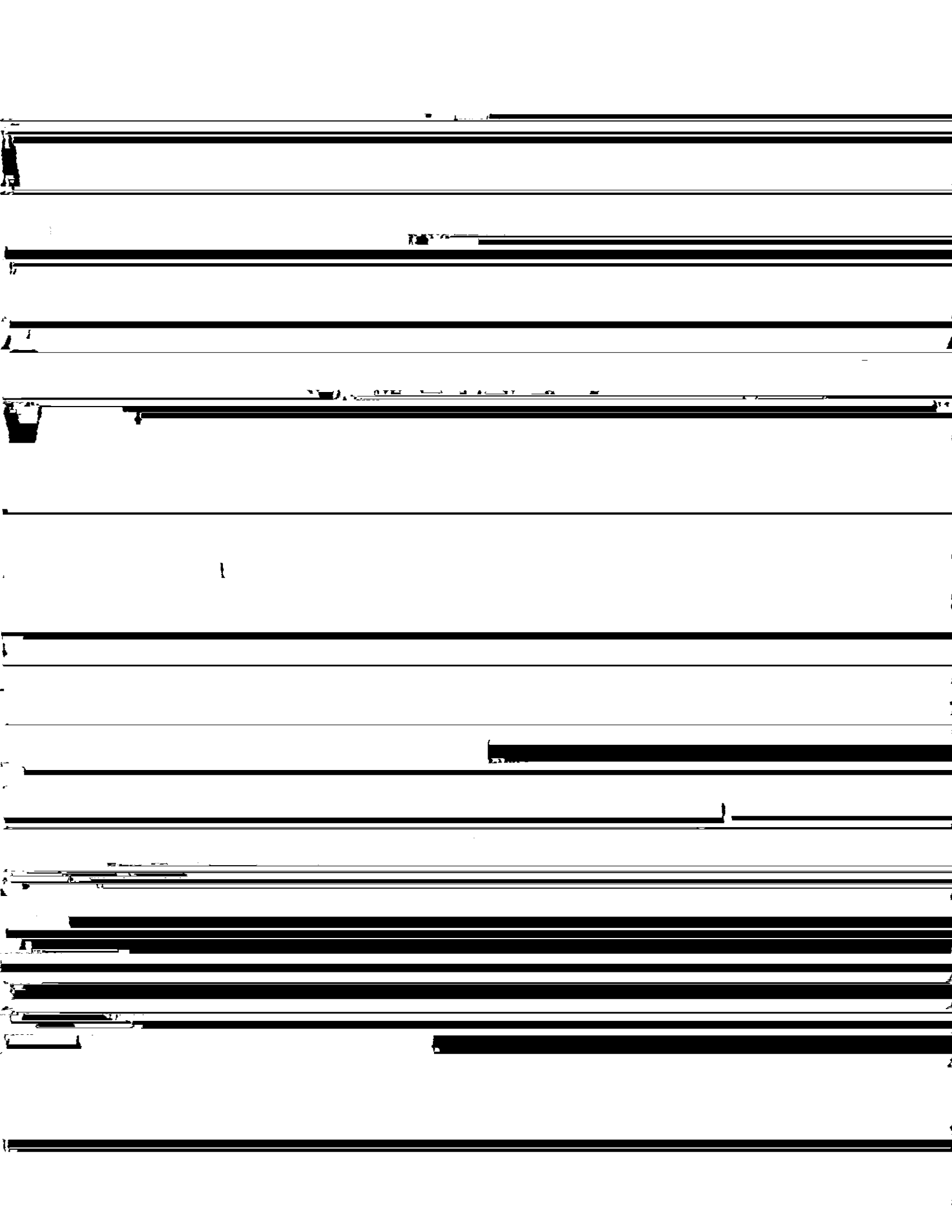

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care for the child(ren).

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Instructions

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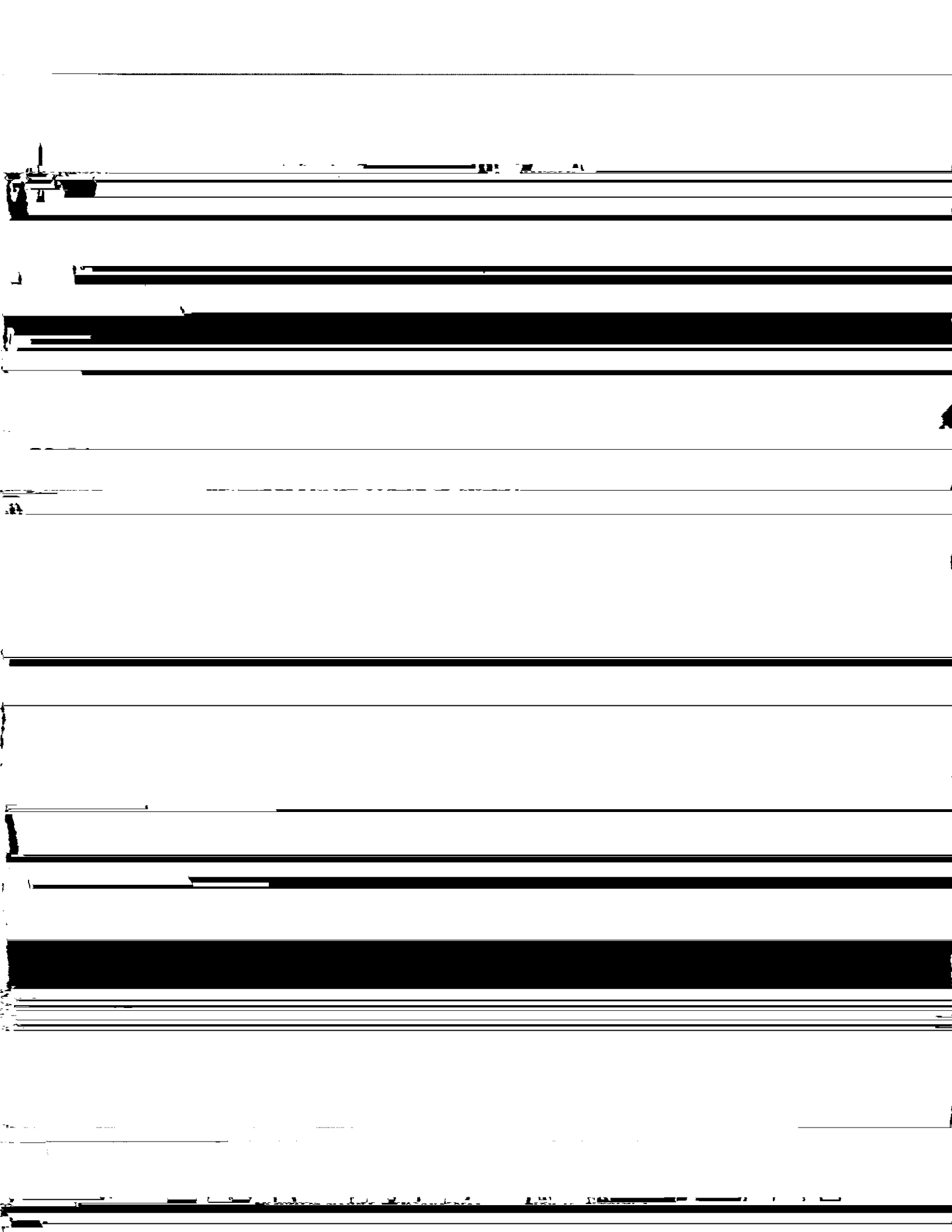

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Arkansas Department of Workforce Services

County _____

Applicant _____

SSN _____

Company Name _____

Address _____

_____

Phone Number _____

Instructions

DWS/TEA-1431

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Purpose

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Department.

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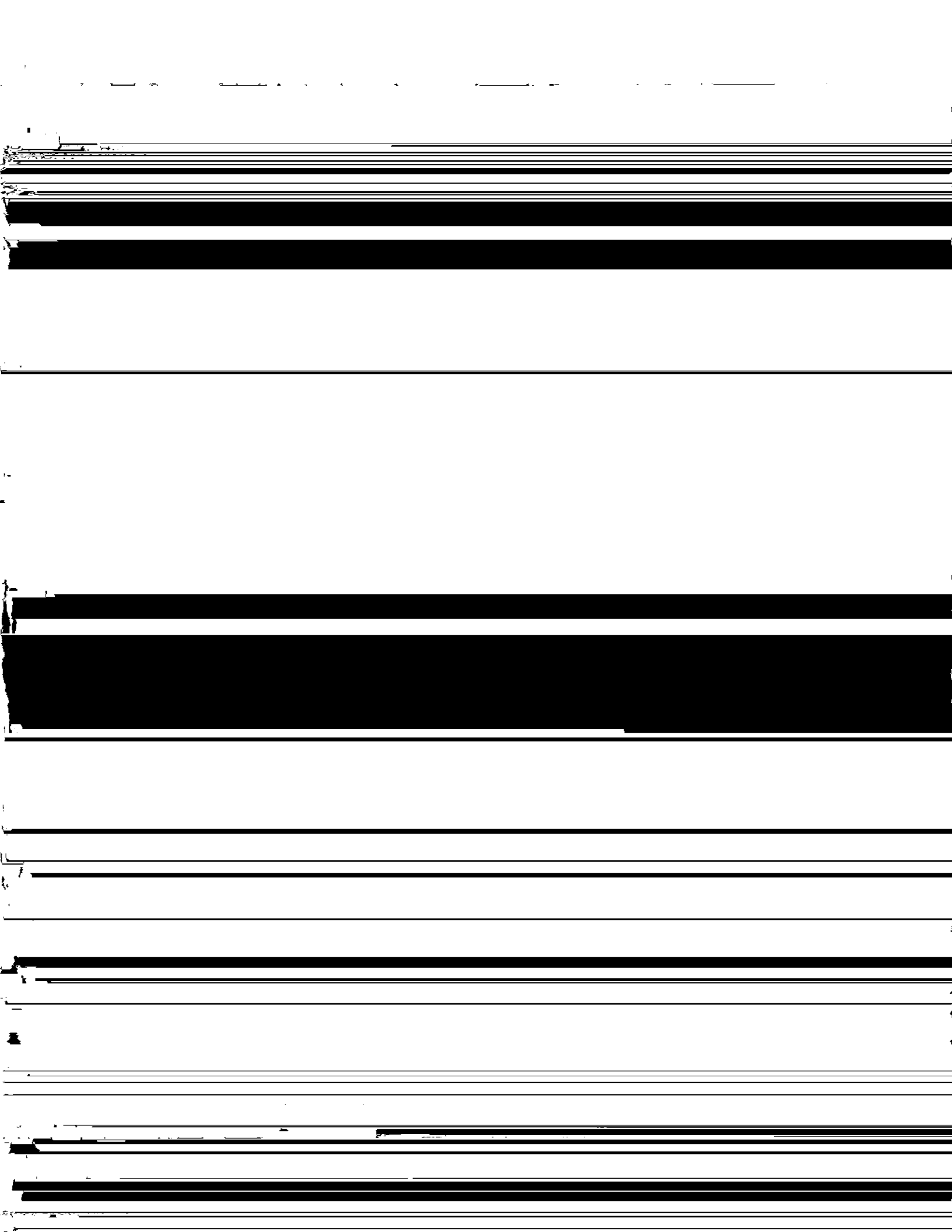

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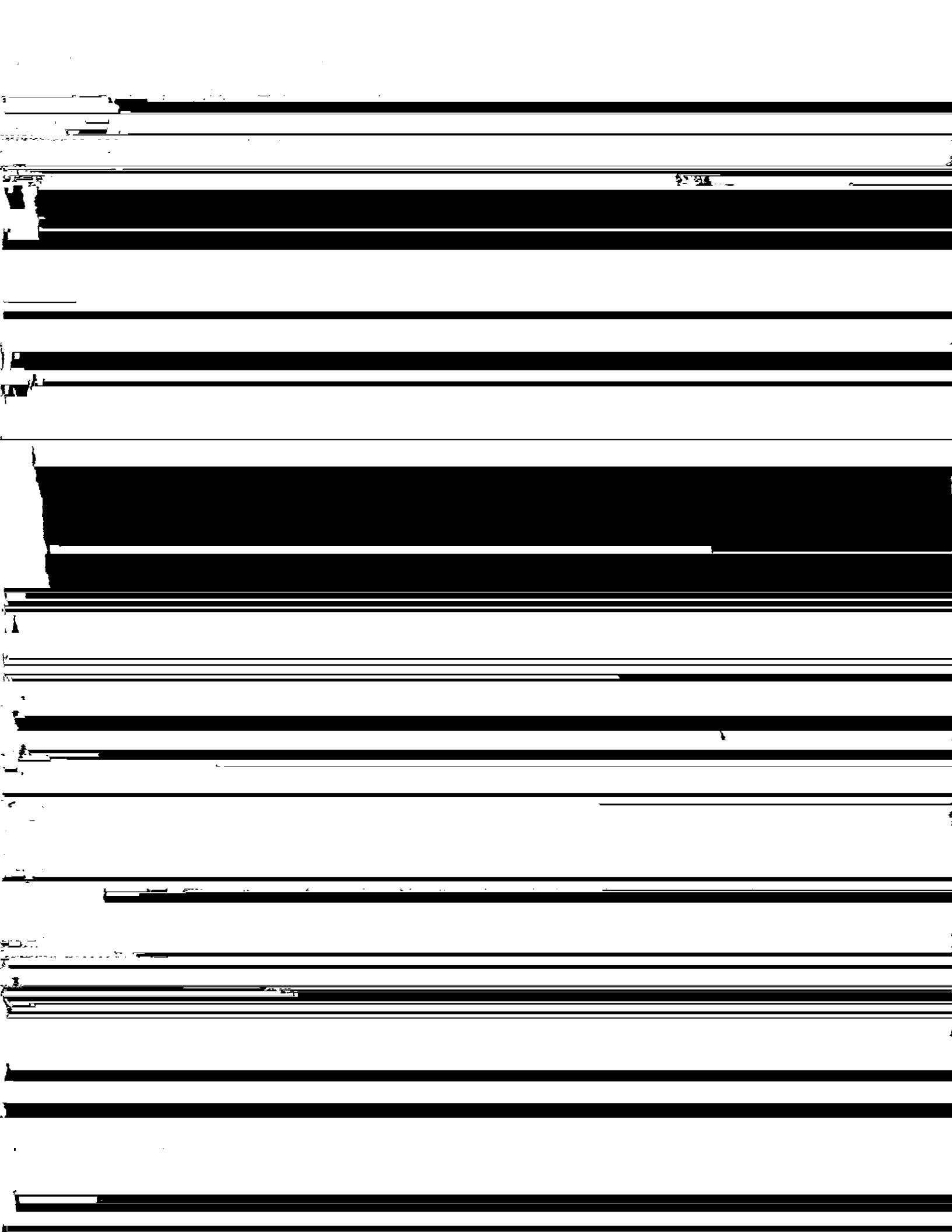
7. Date of Service

changes in plans, etc.

ATTACHMENT A



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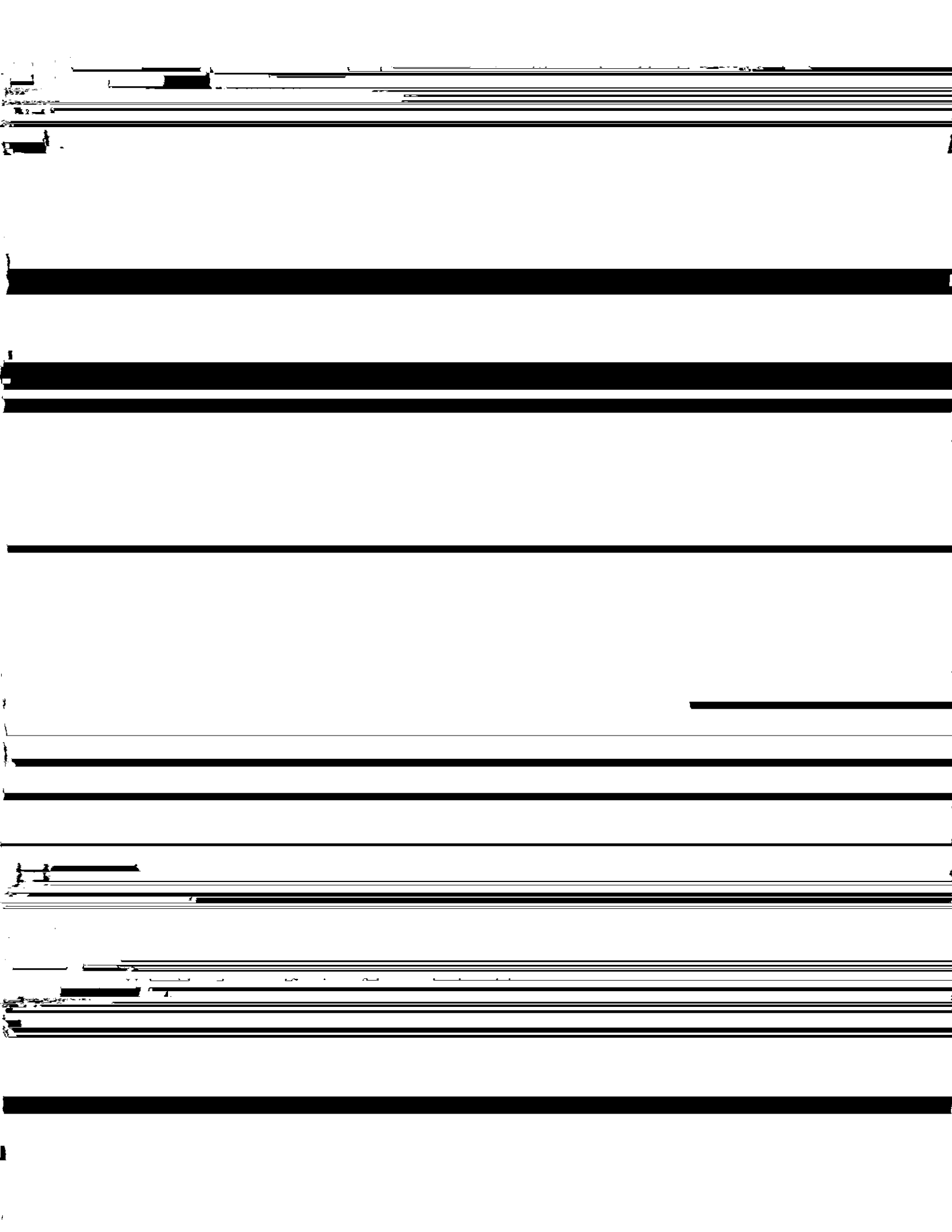

Section A

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Instructions

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Purpose

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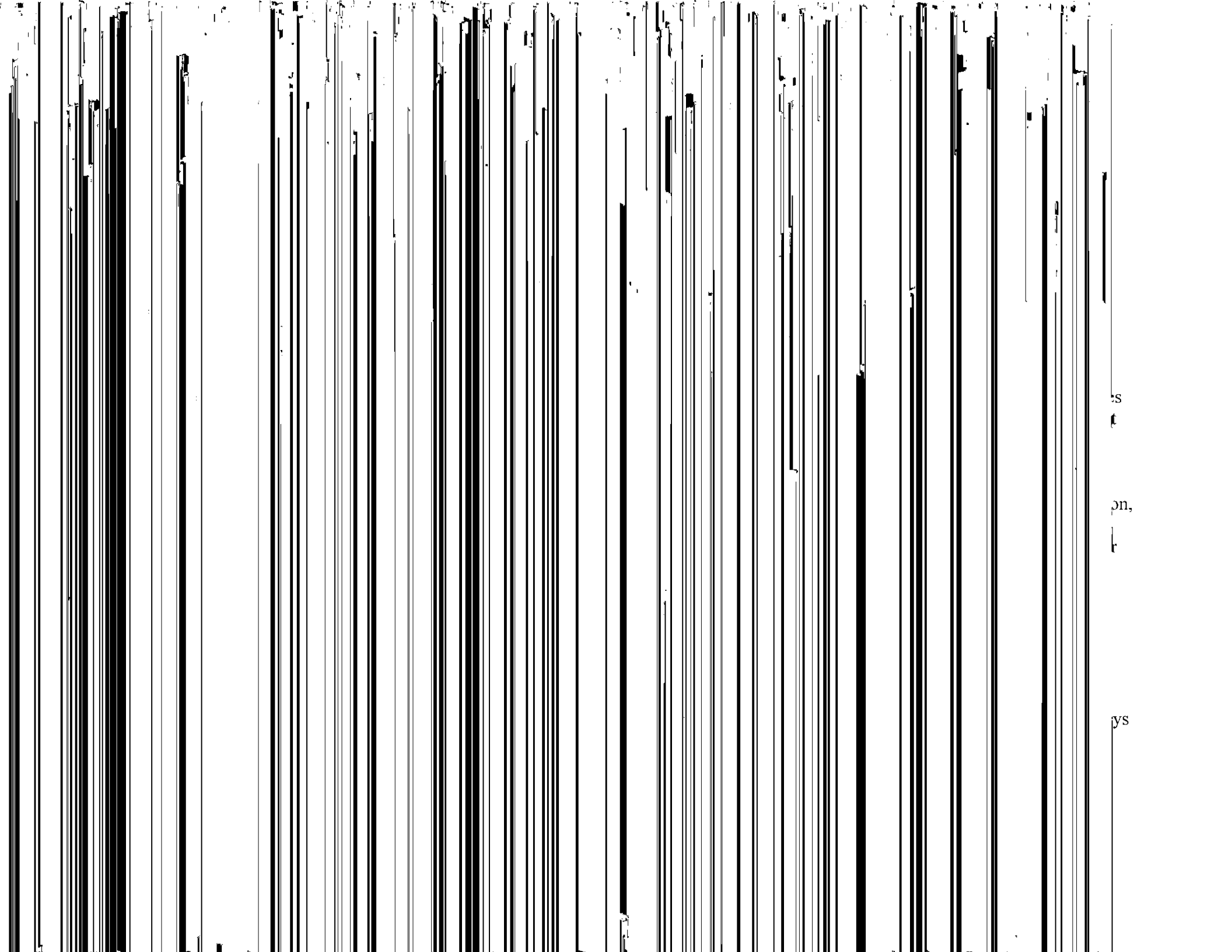
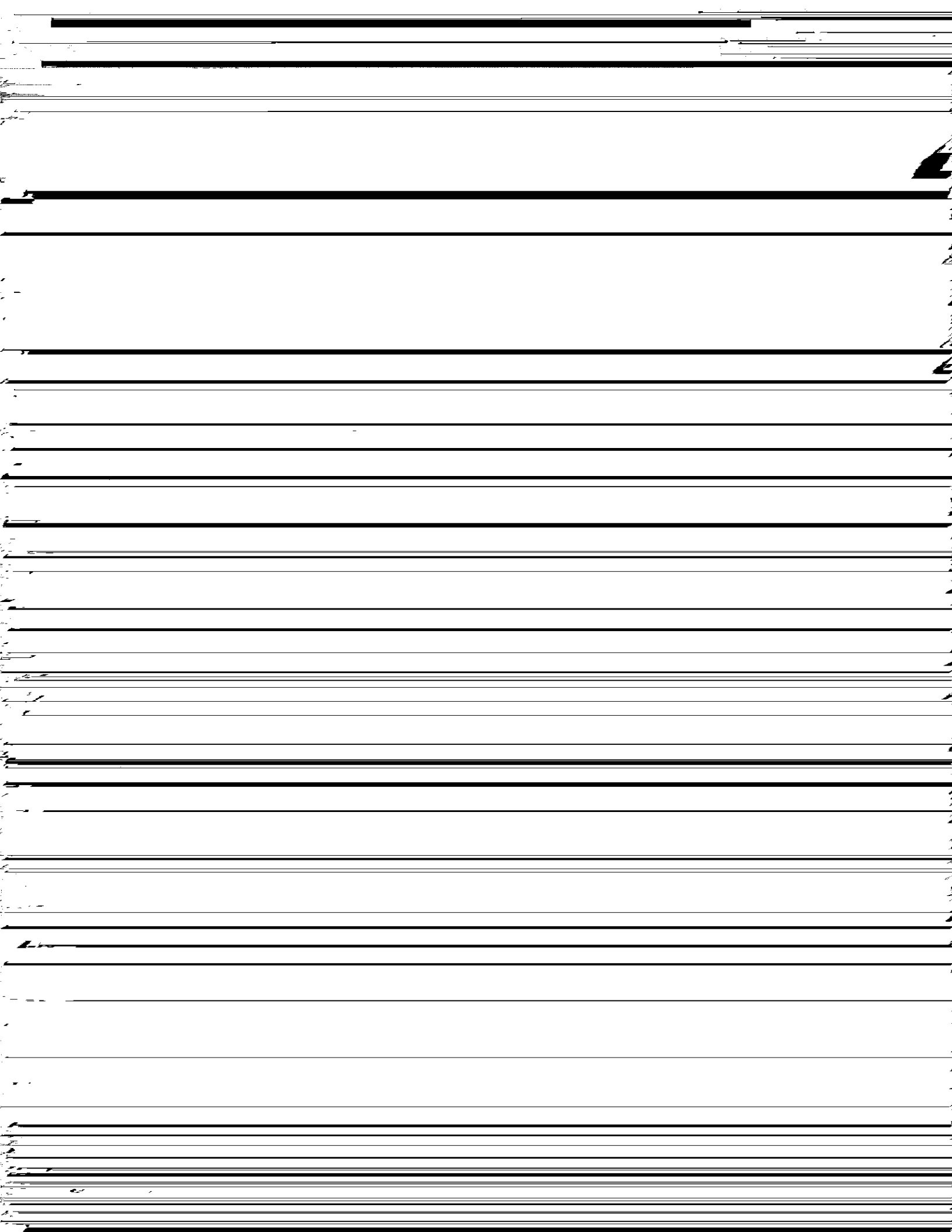
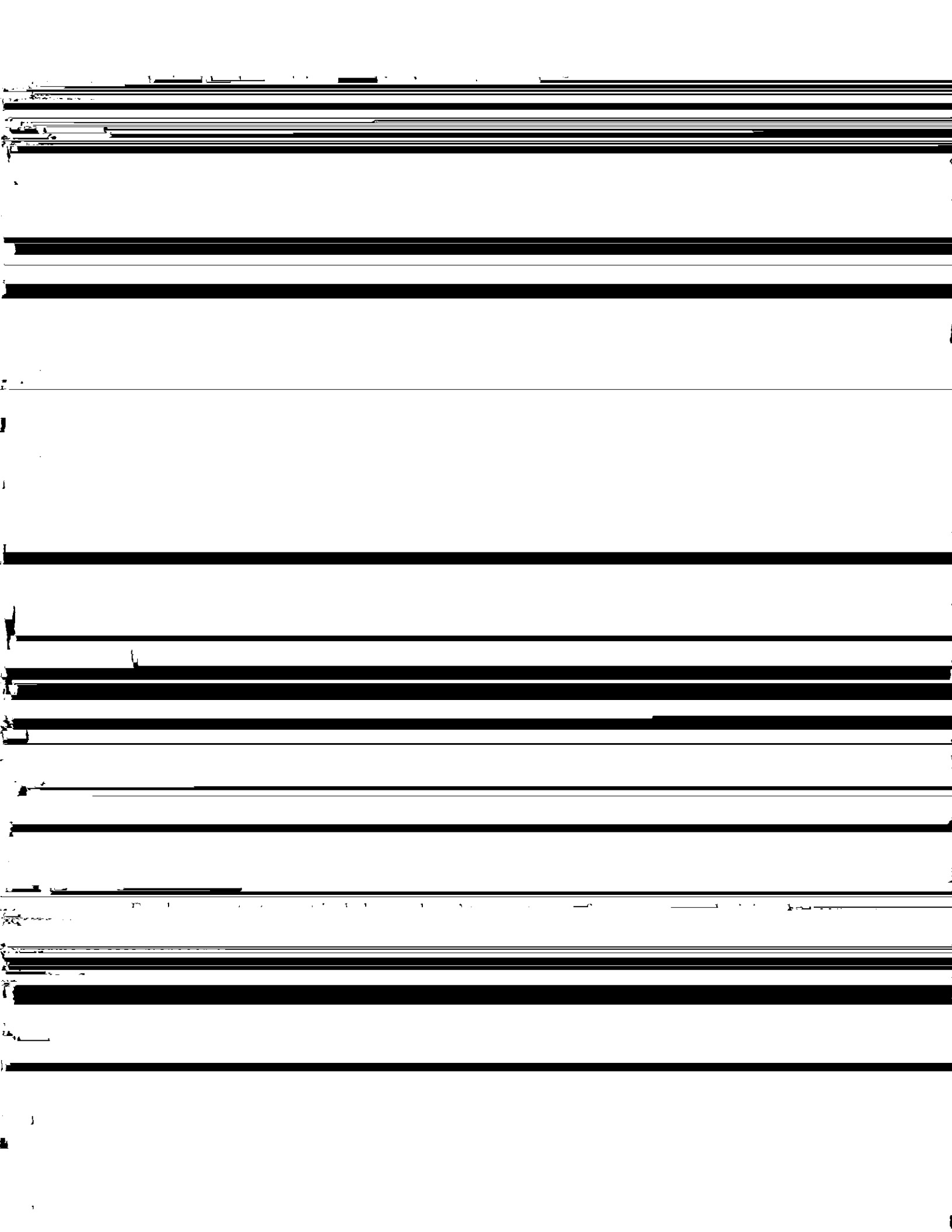




Topic

Number



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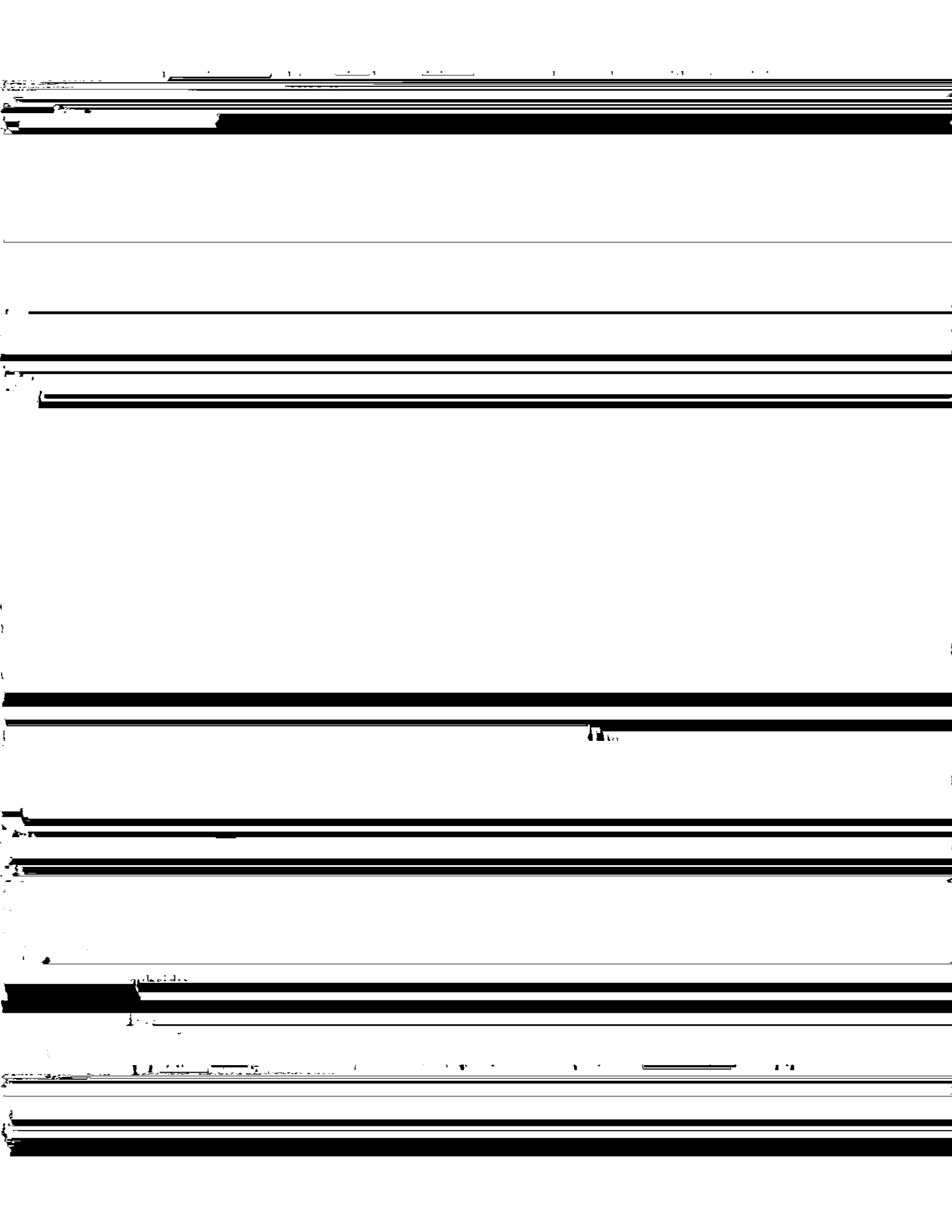

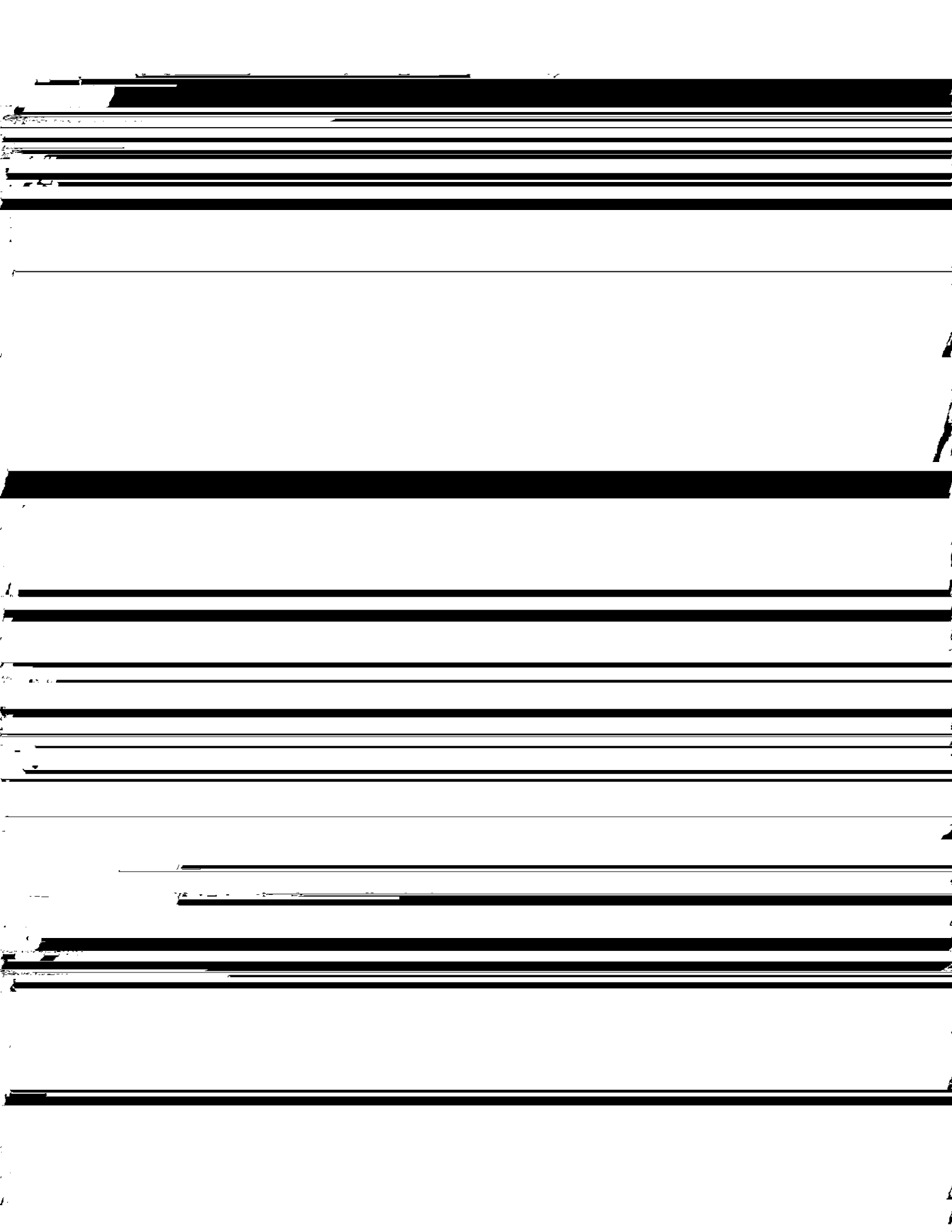

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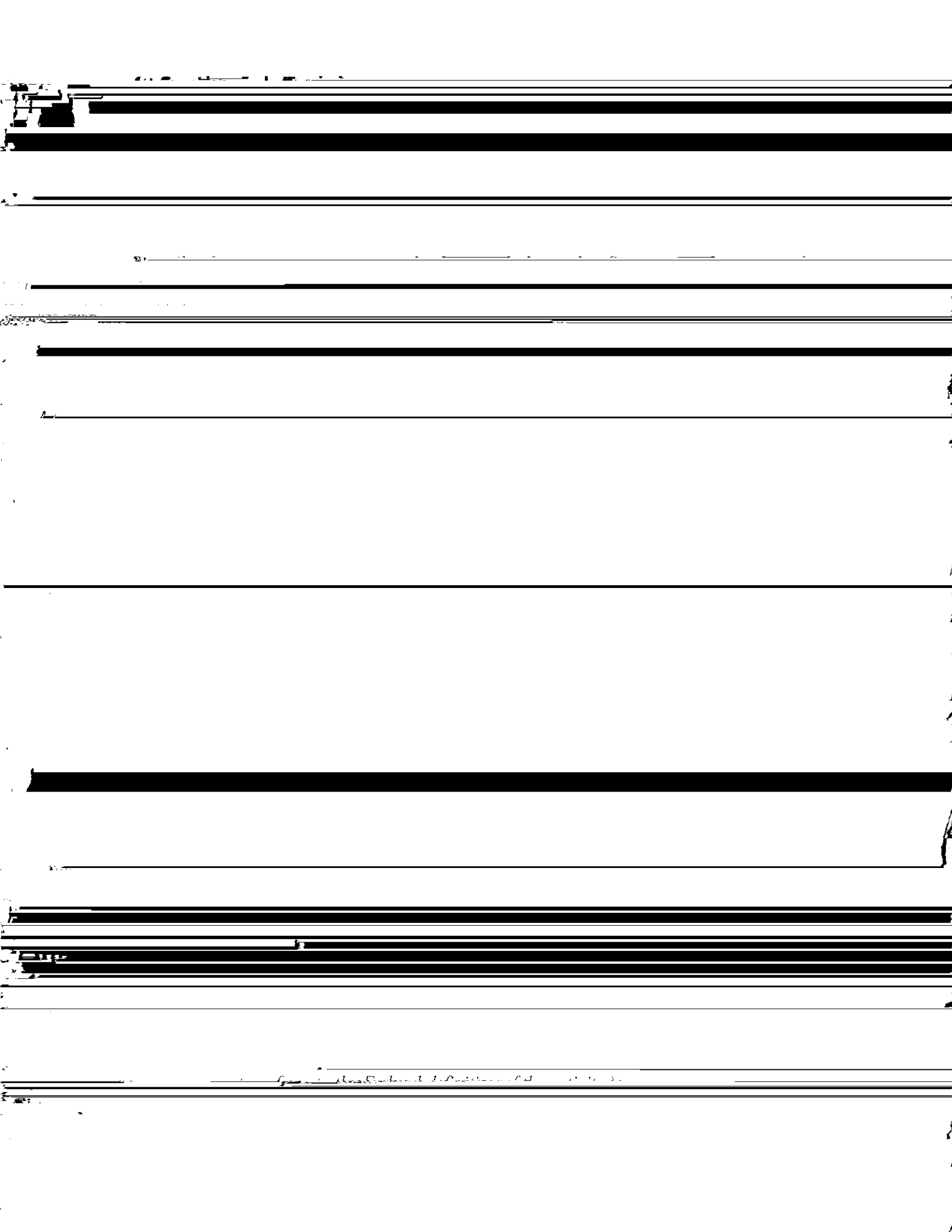

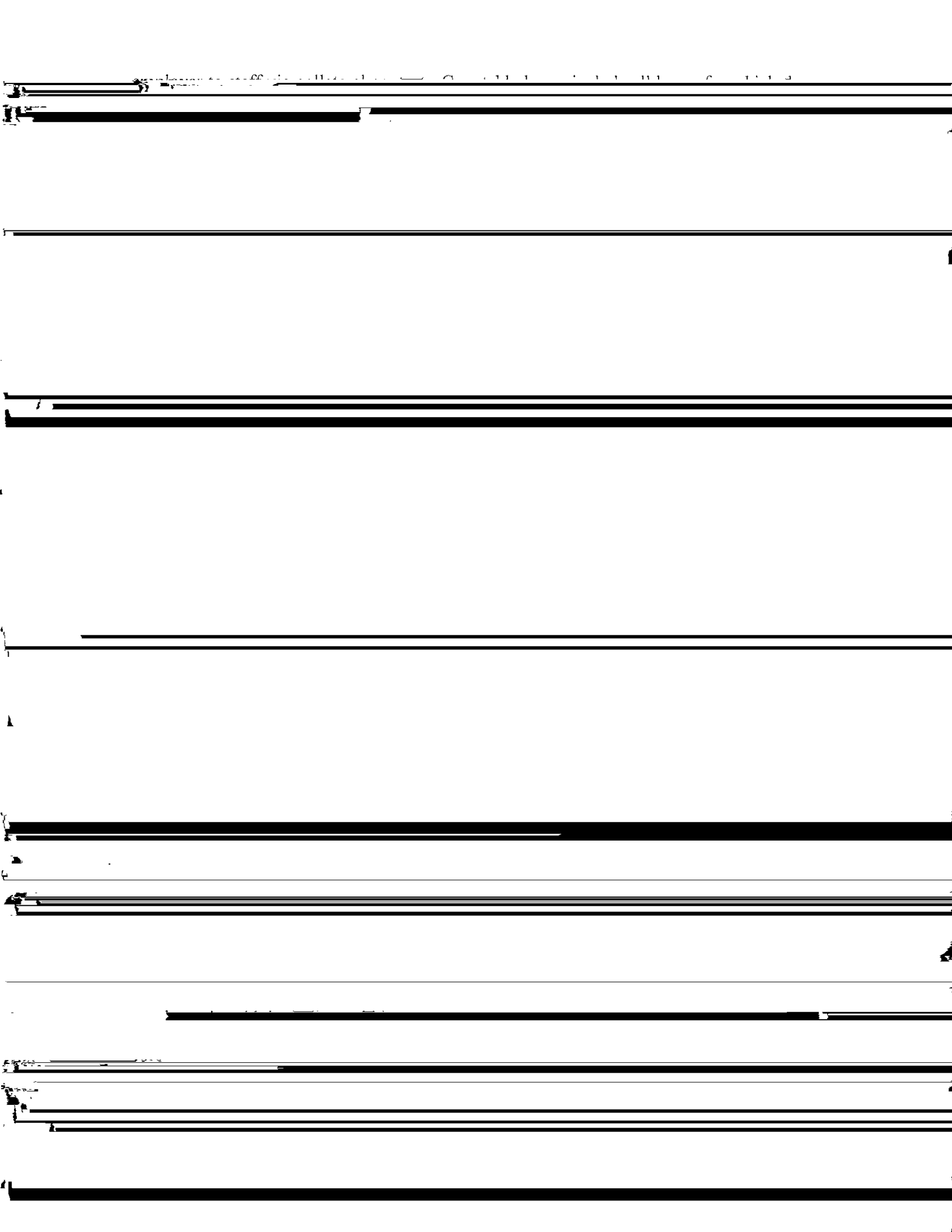

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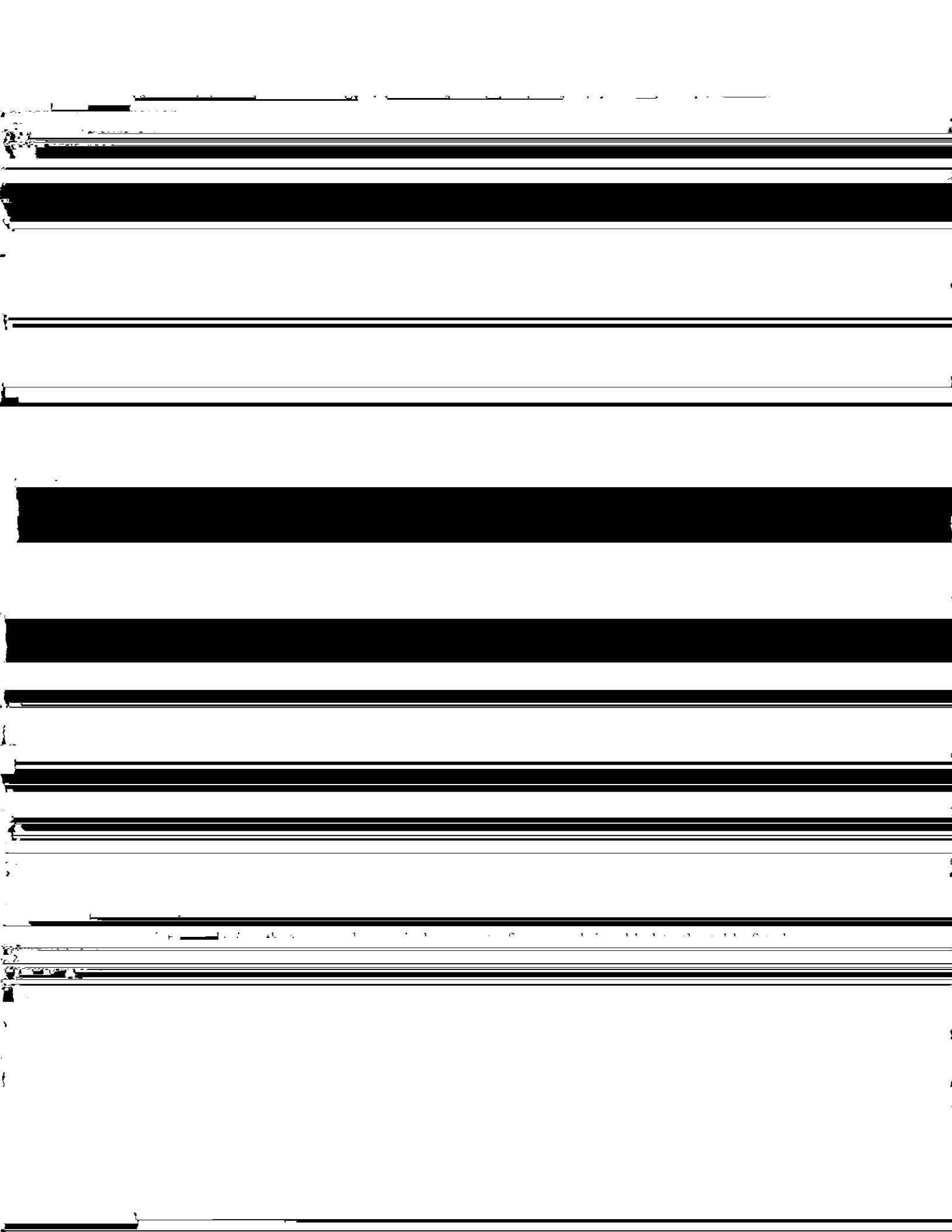

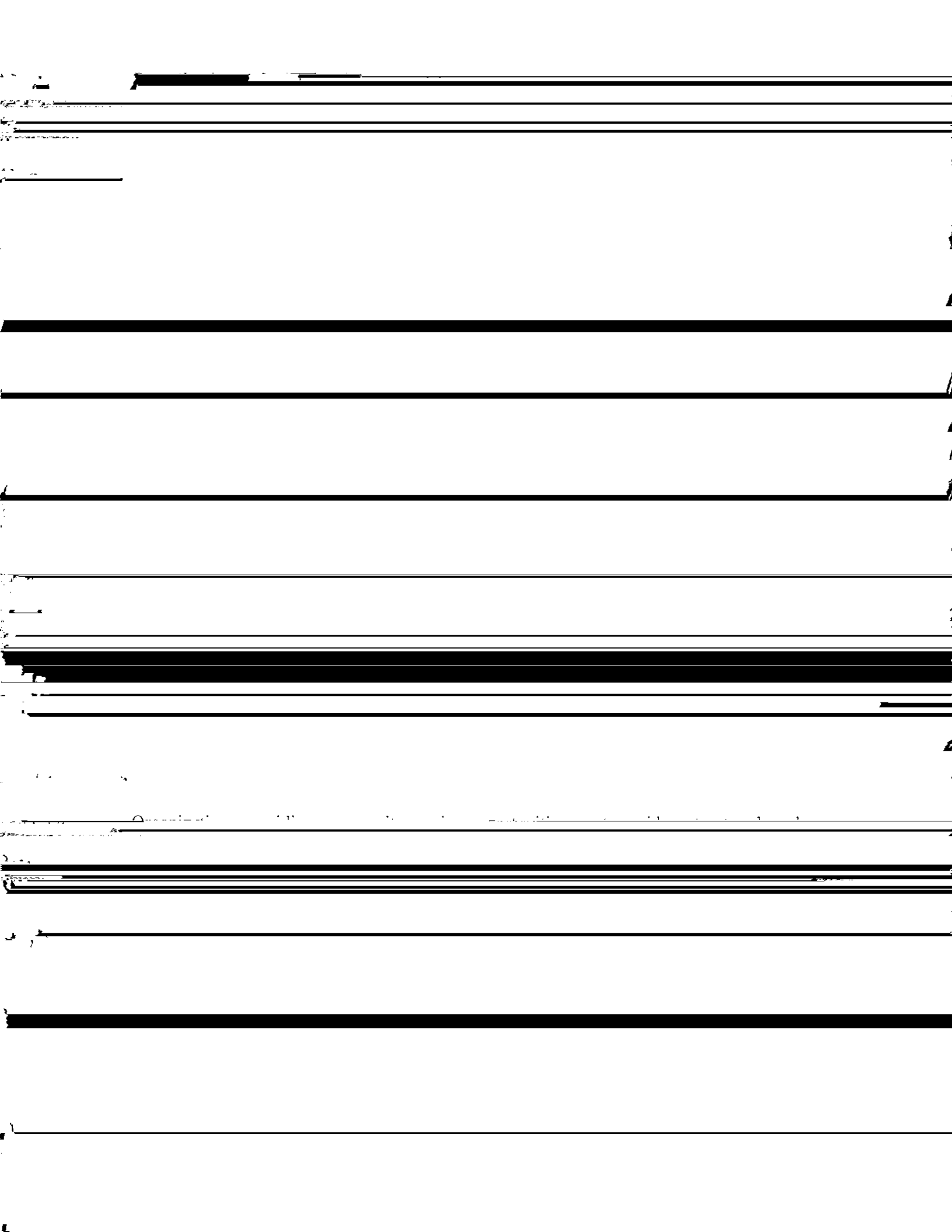

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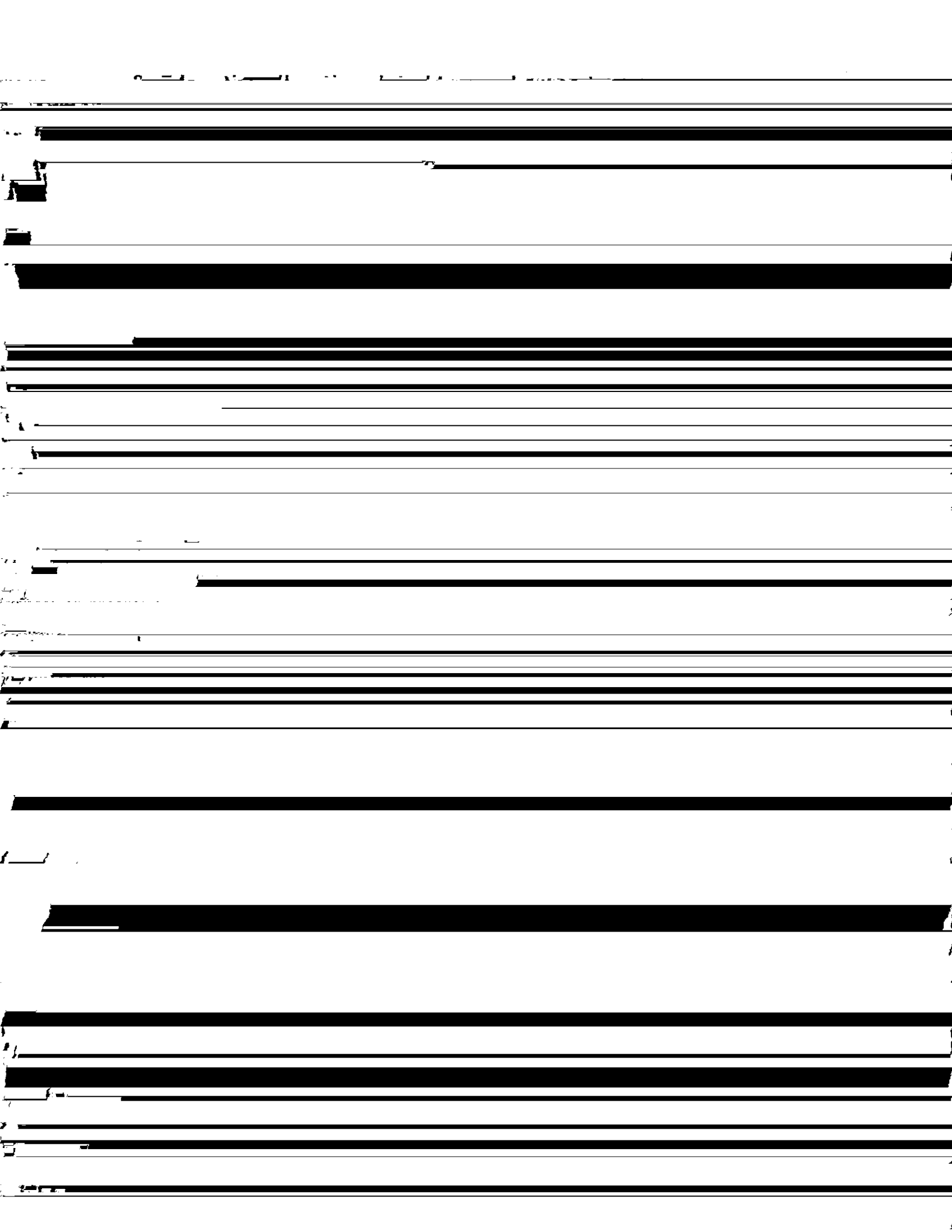

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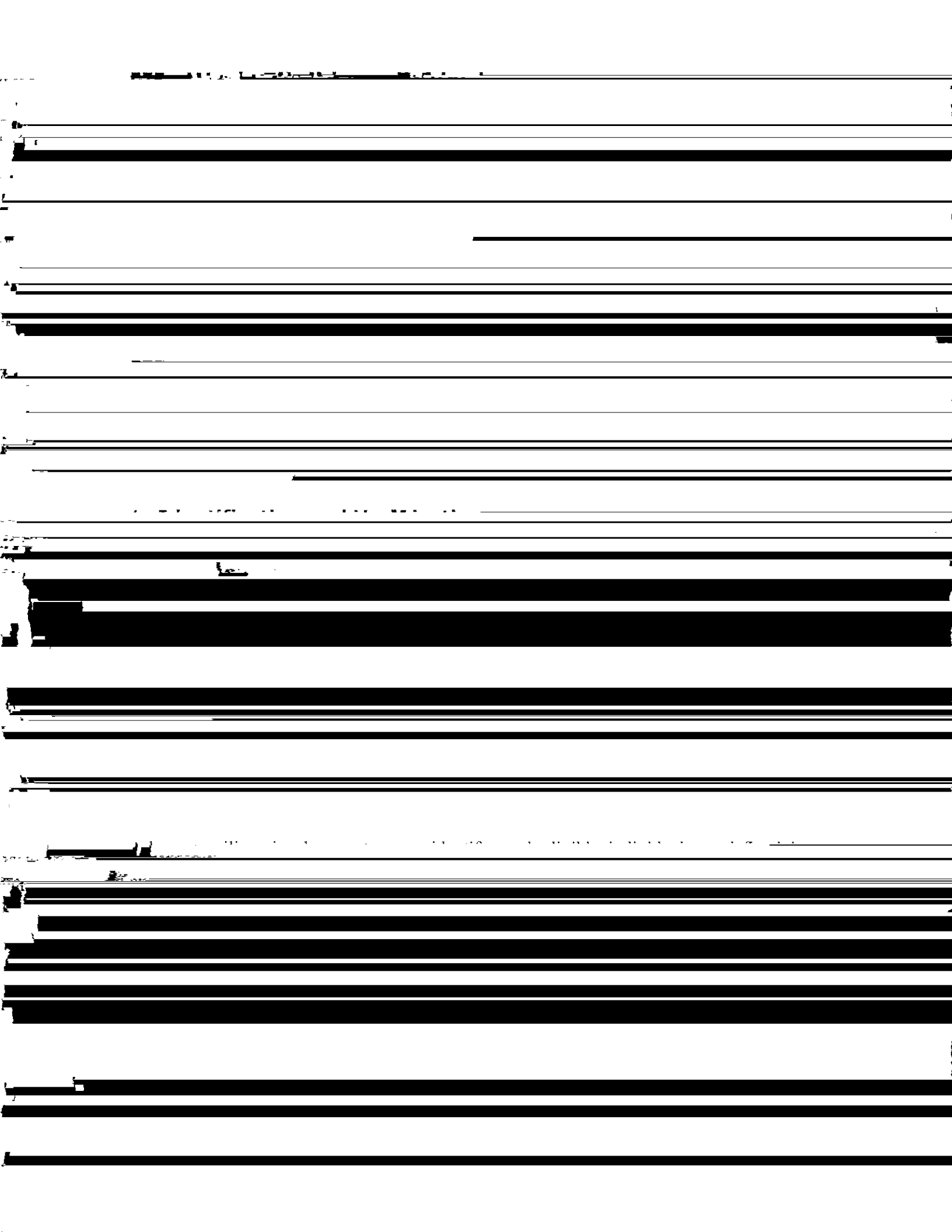

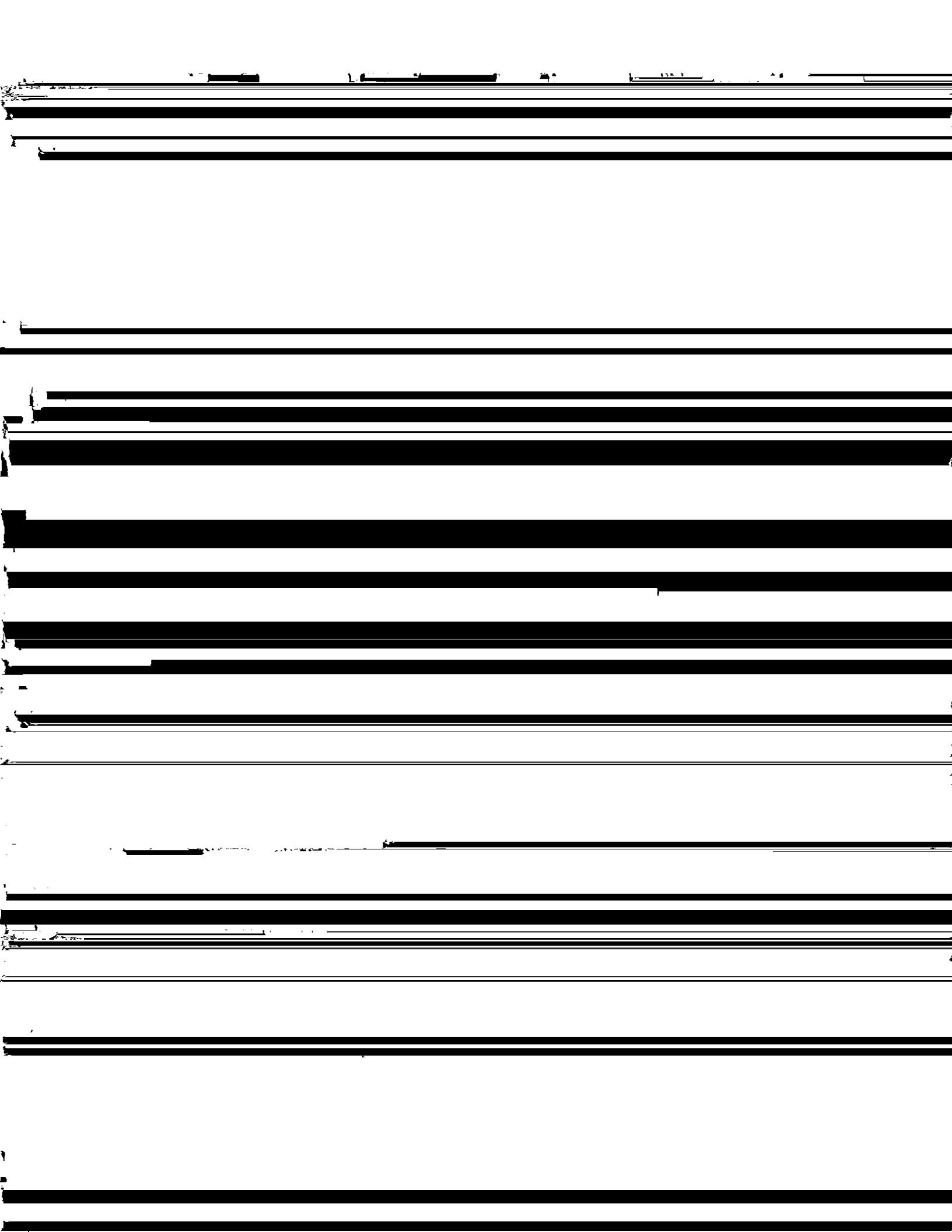

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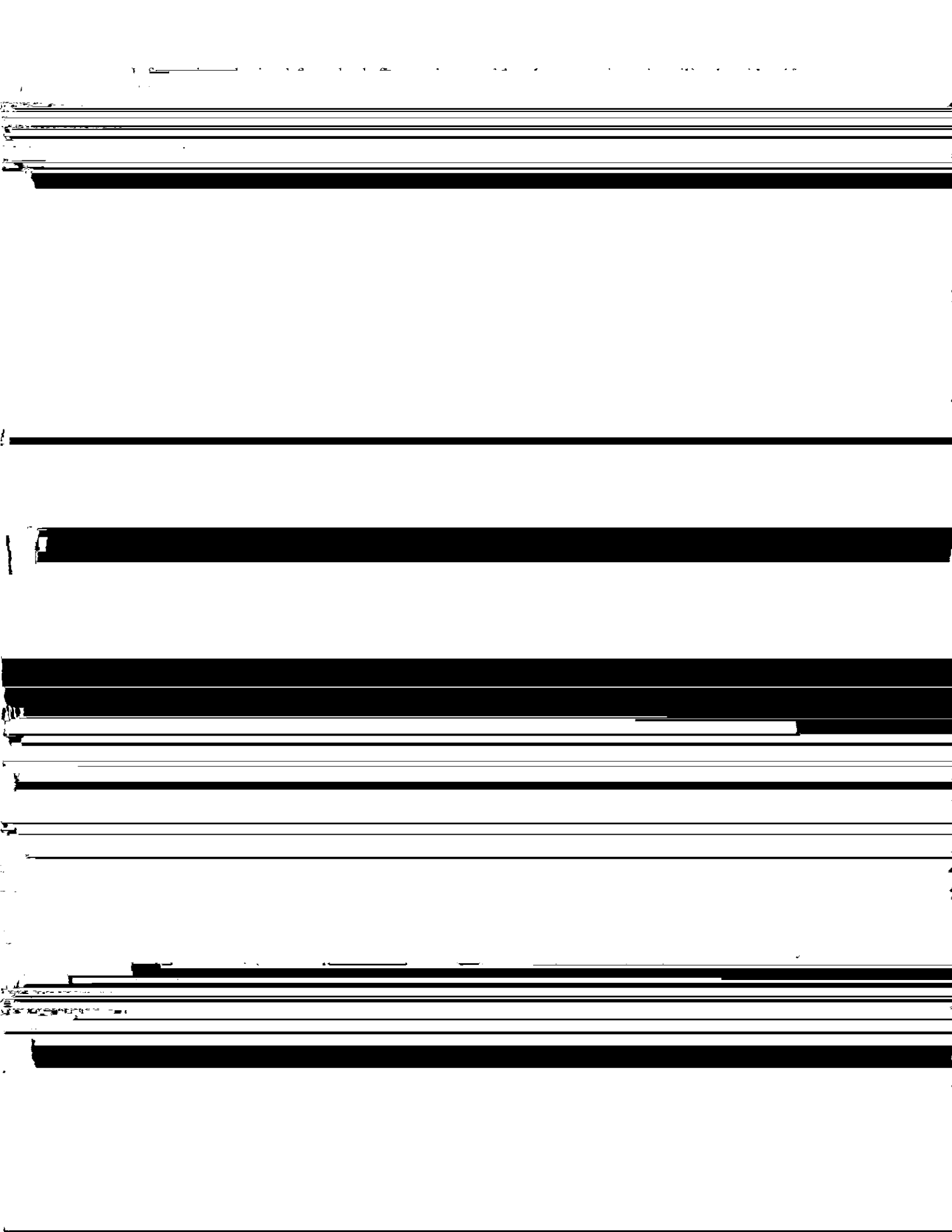

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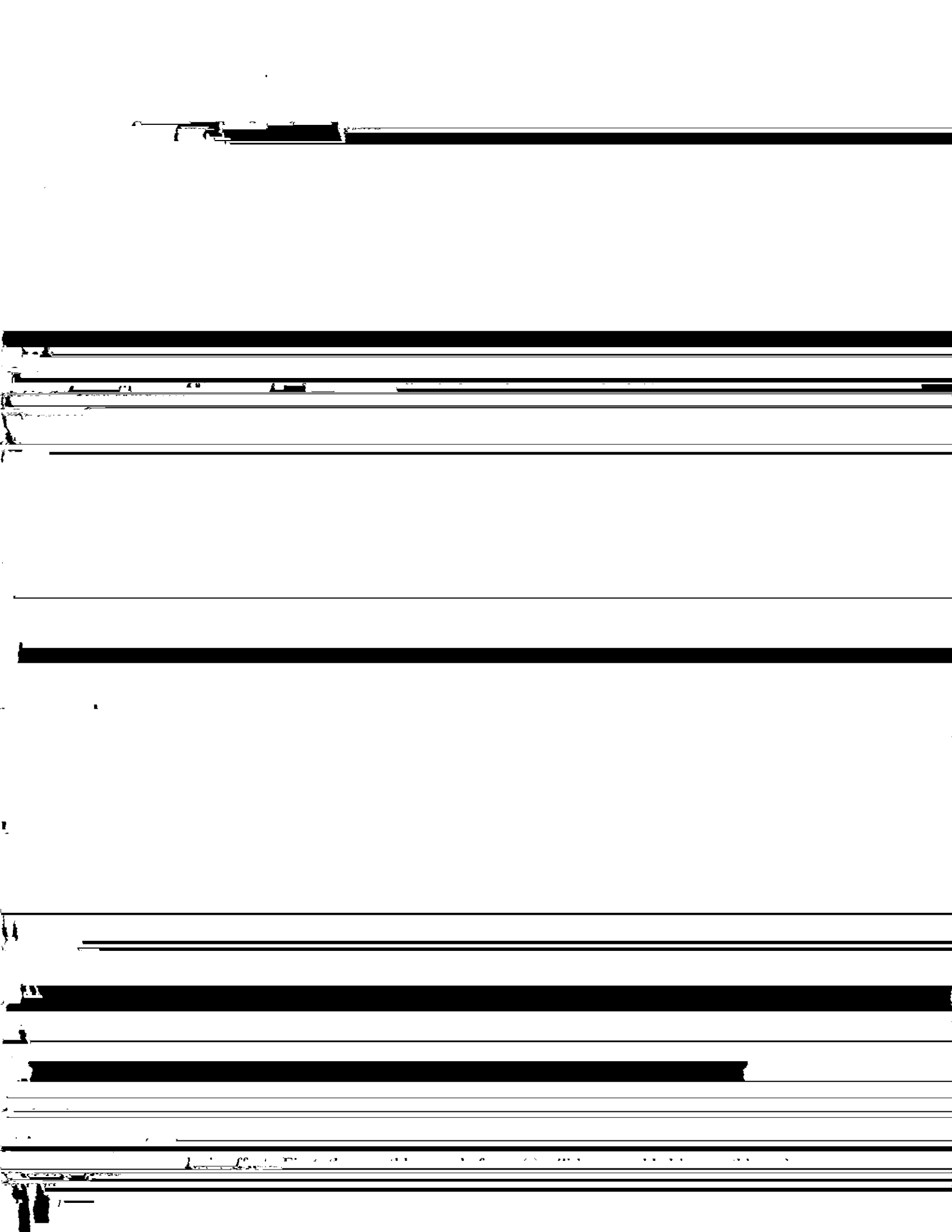
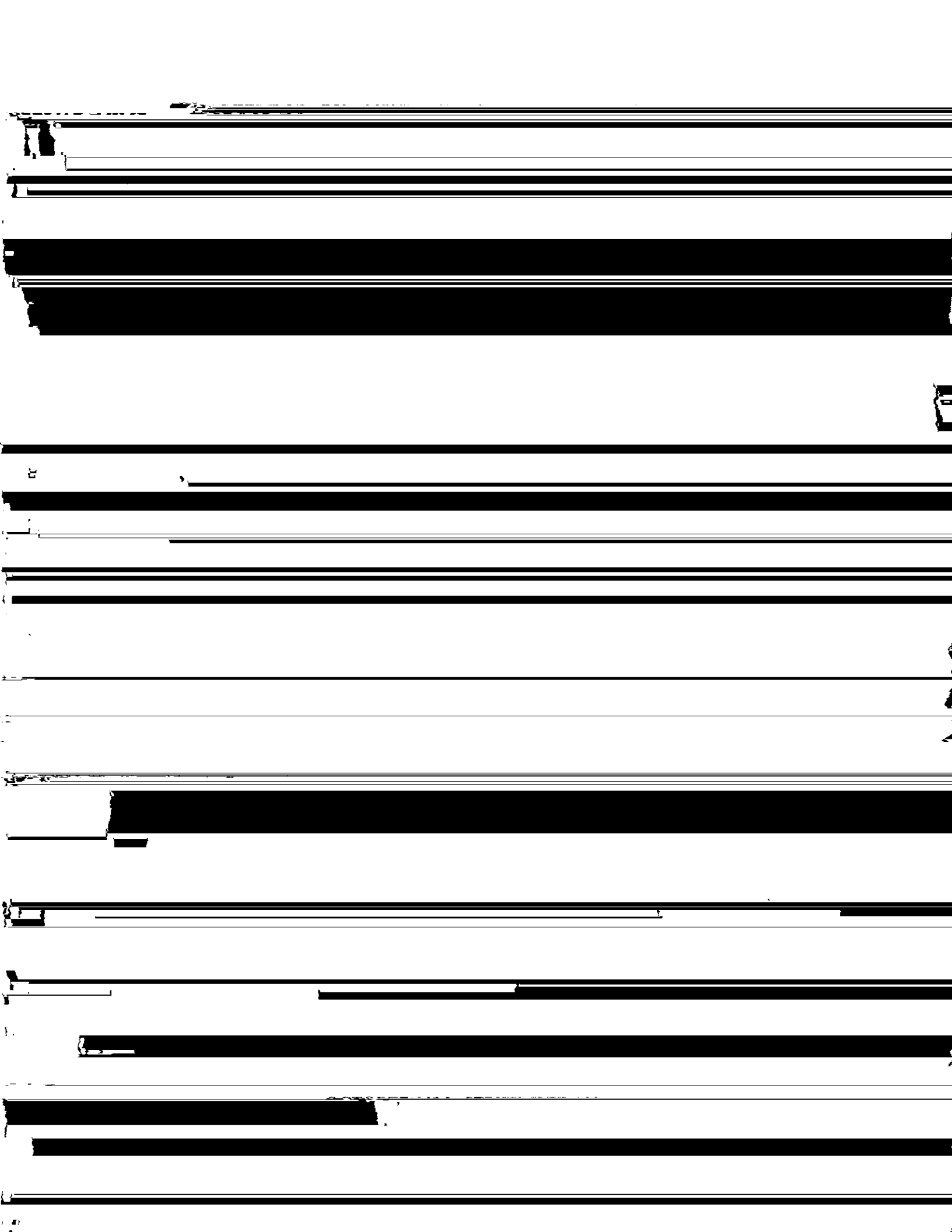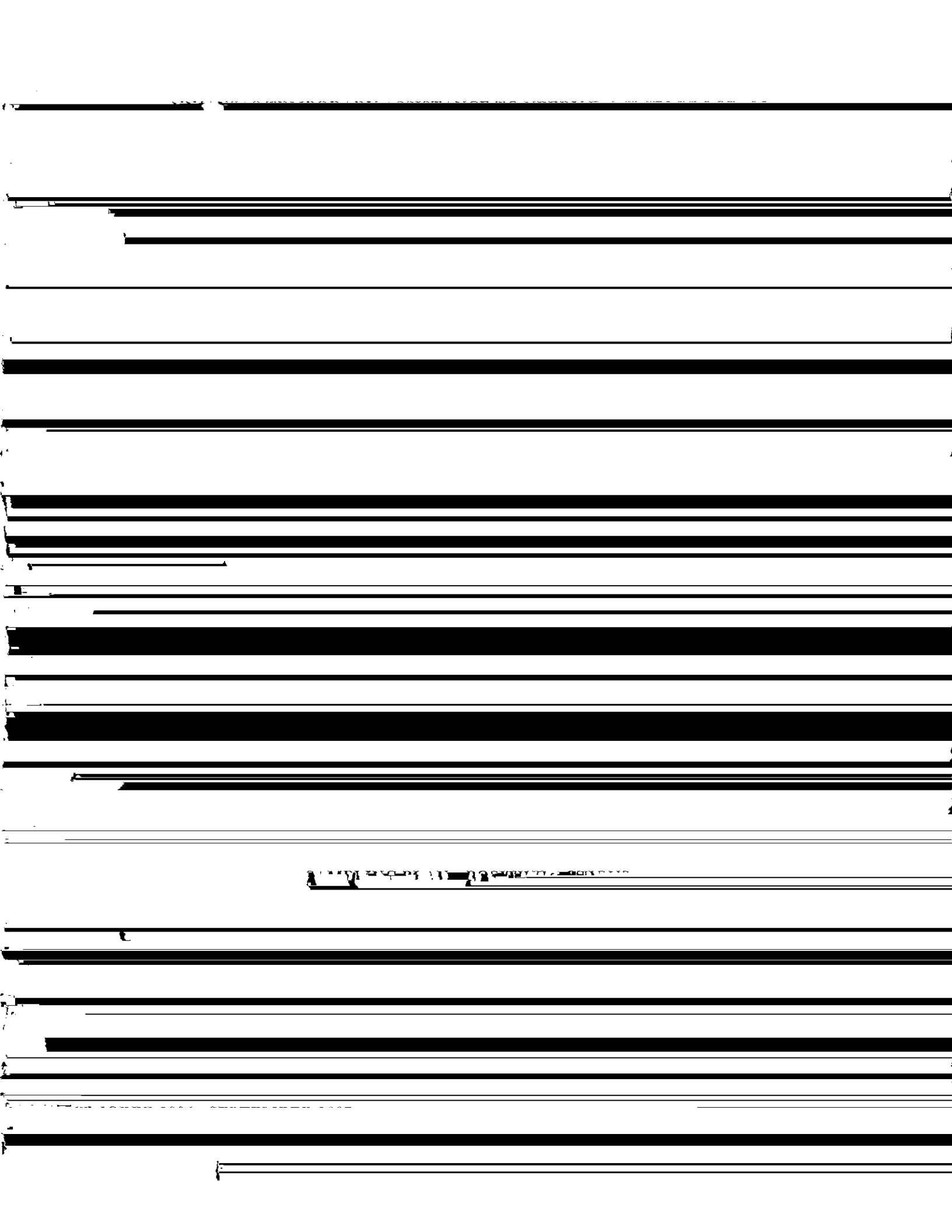
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