

GLOW WIOA Partner Referral Form Monthly Report

Referral Month/Year: _____

Received from Partner Agency: _____

Partner Agency	Referrals Made	Outcome	Referrals Received	Outcome
Career Center - Workforce Career Services GCJDB, LCOWD, OCJDA, WCCA				
NYS Department of Labor				
ACCES Vocational Rehabilitation				
Pathstone – Migrant and Seasonal Farmworker				
Iroquois Job Corps				
NYS Commission for the Blind				
A4TD - Title V Senior Employment				
TANF - Department of Social Services				
Indian and Native American Program				
Re-Entry Employment Second Chance Act				
Genesee Valley BOCES				
Literacy West – Core				
Orleans/Niagara BOCES				
Monroe 2 BOCES				
Independent Living of the Genesee Region				
SUNY Attain Lab				
Other: WCCA – Angel Action				
Other: GCC/TRIO/AEOC				

Please send monthly reports to Michelle Williams, GLOW WDB, at michelle.williams@geneseeny.gov by the 5th day of the following month.

Thank you.