

Signature Page

Workforce Innovation and Opportunity Act (WIOA) Title I Partners' Statement of Agreement for the Local Workforce Development Area known as

Eastern Oregon Workforce Investment Board

Partners' Statement of Agreement

We, the undersigned, do hereby approve and submit this local plan representing the following programs and partners:

- WIOA Title I
- WIOA Title II (Adult Education and Family Literacy Act)
- Oregon Employment Department
 - WIOA Title III (Wagner-Peyser)
 - Migrant and Seasonal Farmworkers
 - Unemployment Insurance
 - Veterans
 - Trade Adjustment Assistance
- Community Colleges
- Economic Development Organization(s)
- Carl Perkins (Post-secondary)
- Department of Human Services
 - Temporary Assistance for Needy Families
 - Supplemental Nutrition Assistance Program - Employment and Training
- WIOA Title IV (Vocational Rehabilitation)
- Job Corps
- Please list additional partners (Community-Based Organizations, Faith-Based Entities, etc.)

The length of this Plan will be July 1, 2024 through June 30, 2028.

We agree with the contents of this plan. Submitted on behalf of the partners for this Local Workforce Development Area.

_____ (Signature, TEC)	_____ (Date)	_____ (Signature, ODHS-SS)	_____ (Date)
_____ (Name and Title)		_____ (Name and Title)	
_____ (Signature, TVCC)	_____ (Date)	_____ (Signature, ODHS-VR)	_____ (Date)
_____ (Name and Title)		_____ (Name and Title)	
_____ (Signature, OED)	_____ (Date)	_____ (Signature, ODHS-ODDS)	_____ (Date)
_____ (Name and Title)		_____ (Name and Title)	
_____ (Signature, BMCC)	_____ (Date)	_____ (Signature, Easterseals)	_____ (Date)
_____ (Name and Title)		_____ (Name and Title)	
_____ (Signature, NEOEDD)	_____ (Date)	_____ (Signature, OHDC)	_____ (Date)
_____ (Name and Title)		_____ (Name and Title)	
_____ (Signature, GEODC)	_____ (Date)	_____ (Signature, OCB)	_____ (Date)
_____ (Name and Title)		_____ (Name and Title)	
_____ (Signature, CTUIR)	_____ (Date)	_____ (Signature, CTUIR-VR)	_____ (Date)
_____ (Name and Title)		_____ (Name and Title)	
_____ (Signature, Burns Paiute)	_____ (Date)	_____ (Signature, BTI)	_____ (Date)
_____ (Name and Title)		_____ (Name and Title)	
_____ (Signature, ODHS-SS)	_____ (Date)	_____ (Signature, ODHS-SS)	_____ (Date)
_____ (Name and Title)		_____ (Name and Title)	