



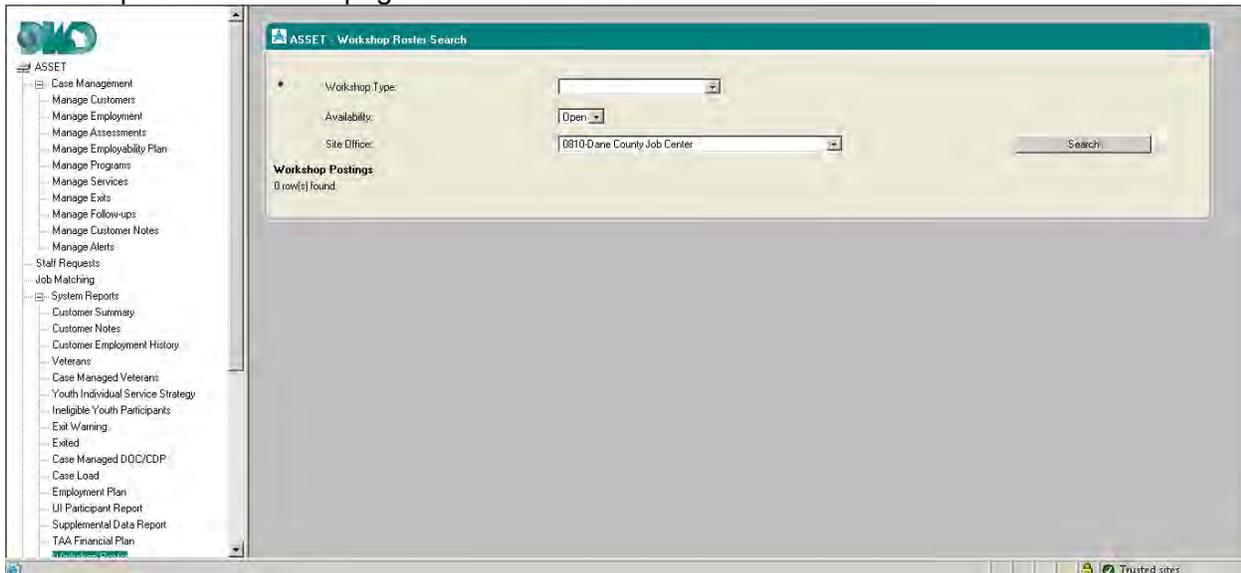
Users' Guide

ASSET SYSTEMS REPORT

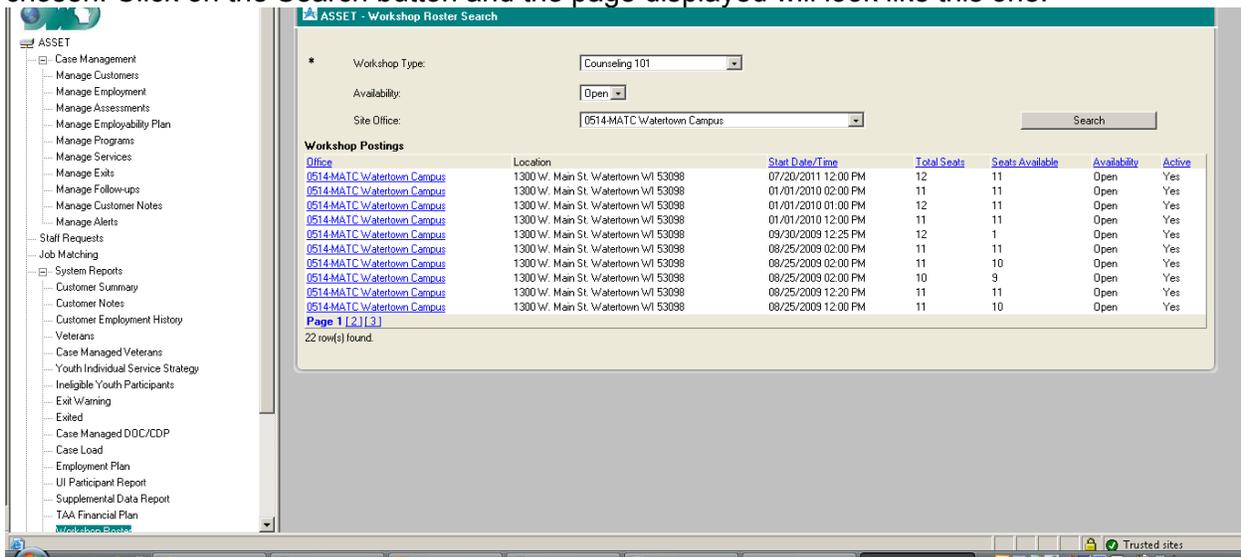
5-16

WORKSHOP ROSTER REPORT

The **Workshop Roster** was developed as a tool for a case manager to locate a potential workshop in their area or an area within a customer's accessibility. To access the report, open Workshop Reports by clicking on the plus sign (+) on the ASSET Menu Tree. Next, click on Workshop Roster and the page will look like this.



The Workshop report defaults to the Case Manager logged into ASSET. Next, select the criteria of Workshop Type, Availability and Site office to locate Workshop information for the criteria chosen. Click on the Search button and the page displayed will look like this one.





Users' Guide

ASSET SYSTEMS REPORT

5-16 WORKSHOP ROSTER REPORT

The Search Results provides information about the Workshops by Office Site, Location, Start Date/Time, Total Seats, Seats Available, Availability, and whether the status of the workshop. Included on the report are; PIN, Name (customer name), Program/Program Area, and the Registration or Begin Date.

The Field Descriptions are:

FIELD	REQUIRED	DESCRIPTION
• <u>Office Site</u>	N/A	Office Number and Site Name
• <u>Location</u>	N/A	Address of Workshop
• <u>Start Date/Time</u>		Date and Time of Workshop
• <u>Total Seats</u>		Number of Attendees
• <u>Seats Available</u>		Number of Seats Available for scheduling
• <u>Availability</u>		Options include: <ul style="list-style-type: none">• All• Open• Full
• <u>Active</u>		Status of Workshop Active/Inactive

By clicking on the Office Site (underlined and highlighted in blue), the page returned is the Workshop Roster. It will look like the one below when customers are scheduled.



Users' Guide

ASSET SYSTEMS REPORT

5-16

WORKSHOP ROSTER REPORT

ASSET - Workshop Roster

Workshop Information:
Workshop Type: Counseling 101
Date: 09/30/2009
Start Time: 12:25 PM
End Time: 12:30 PM
Site Office: 0514-MATC Watertown Campus
Site Address: 1300 W. Main St. Watertown WI 53099
Site Details: Verify that offices listed in 'Site Office' are in 30 miles distance of the case manager who is scheduling this workshop posting service. Verify that offices listed in 'Site Office' are in 30 miles:200

Availability:
RES Seats Available: 1
Non-RES Seats Available: 0
Contact: Komaragii, Neeraja

Roster:

Present	PIN	Last Name	First Name	MI	Residence City	Phone Number	RES
<input type="checkbox"/>	6262	ALLEN	KRESTEN	D	BELOIT	(608) 368-1673	Yes
<input type="checkbox"/>	6262	ALLEN	KRESTEN	D	BELOIT	(608) 368-1673	Yes
<input type="checkbox"/>	6253	KERTTULA	JILL	A	BLUE MOUNDS	(608) 437-7481	Yes
<input type="checkbox"/>	6253	KERTTULA	JILL	A	BLUE MOUNDS	(608) 437-7481	Yes
<input type="checkbox"/>	6257	X [Confidential]	RESAssetNUK		madison	[Confidential]	No
<input type="checkbox"/>	6259	Komaragii	RESAssetNUM		madison		No
<input type="checkbox"/>	6245	LEWELLYN	DARYN	L	EDGERTON	(608) 884-3816	Yes
<input type="checkbox"/>	6245	LEWELLYN	DARYN	L	EDGERTON	(608) 884-3816	Yes
<input type="checkbox"/>	6247	SIEFKEN	JEFFERY	S	EDGERTON	(608) 884-0046	Yes
<input type="checkbox"/>	6250	SULLIVAN	RONNIE	J	LANCASTER	(608) 778-0372	Yes
<input type="checkbox"/>	6250	SULLIVAN	RONNIE	J	LANCASTER	(608) 778-0372	Yes

11 row(s) found.

Click on the PIN highlighted and underlined in blue takes staff to the Workshop Details page. RES Staff can update the customer's information on this page. For example, if the customer doesn't attend the workshop they can remove the workshop or update it.



Users' Guide

ASSET SYSTEMS REPORT

5-16

WORKSHOP ROSTER REPORT

ASSET - Assisted Job Search & Placement Detail for Little BoPeep (4072)

Save
Event History

Program Name: WIA Title 1
Program Area: Adult

Service Information
Service Name: Assisted Job Search & Placement
Service Category: Core Services Staff Assisted

* **Open: (One of the following is required)**
Planned Service Date: 06/30/2006 [mm/dd/yyyy]
Actual Service Date: 06/30/2006 [mm/dd/yyyy]

* **Close: (One of the following is required)**
Planned Service Date: 06/30/2007 [mm/dd/yyyy]
Actual Service Date: 11/06/2007 [mm/dd/yyyy]

* **Funding Source:** WIA Title 1B Adult

* **Contract ID:** 10-0001

Old Contract ID: _____
Provider Name: _____
Provider Text: _____

Failed to Attend WPRS Orientation Date: _____ [mm/dd/yyyy]

Weekly Participation Hours: _____

Location of Service Provision: _____

Trusted sites

Once a participant has been system exited the individual will drop off the Roster listing.

[Return to Index-Click Here](#)