

Release 7.0 Features

Form Name	Field Name	Error Type			Error Message
		Screen Reject	Warning	Priority	
Add Contact	Organization		S		Special characters are not permitted in "Organization", except for the following: ! ( ) - ' & / # . : or three asterisks***.
Add Contact	Number and Street, Suite Number; or PO Box		S		"Number and Street, Suite Number; or PO Box" must contain at least two characters, one of which must be a letter. Special characters are not permitted, except for the following: # , . - ; ' /.
Add Supervisor	Organization		S		Special characters are not permitted in "Organization", except for the following: ! ( ) - ' & / # . : or three asterisks***.
Add Supervisor	Number and Street, Suite Number; or PO Box		S		"Number and Street, Suite Number; or PO Box" must contain at least two characters, one of which must be a letter. Special characters are not permitted, except for the following: # , . - ; ' /.
Approved Breaks	Start Date		S		"Reason for approved break in participation Selection" is a required field.
Assignment Information	CSA wage (per hour)	W		2	"CSA wage" is blank.
Assignment Information	CSA wage (per hour)	W		2	"CSA wage" for this assignment is unusually high; please verify.
Assignment Information	Number of hours per week assigned	W		2	"Number of hours per week assigned" is blank.

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Assignment Information	Community Service Assignment Code		S		Since "Participant Staff assigned to" is "Grantee or sub-recipient/local project", "Community service assignment code" should be "E1. Project Administration".
Contact/Supervisor Information	Organization		S		Special characters are not permitted in "Organization", except for the following: ! ( ) - ' & / # . : or three asterisks***.
Customer Service Survey Information	CS survey number 1   Date of Delivery		S		Item 23.2 "Date of Delivery" for "Customer Service Survey 1" must have format mm/dd/yyyy and be on or after 1/1/1973.
Customer Service Survey Information	CS survey number 1   Date of Delivery	R	S		"Date of Delivery" for "Customer Service Survey 1" must not be in the future.
Customer Service Survey Information	CS survey number 2   Date of Delivery		S		Item 24.2 "Date of Delivery" for "Customer Service Survey 2" must have format mm/dd/yyyy and be on or after 1/1/1973.
Customer Service Survey Information	CS survey number 2   Date of Delivery	R	S		"Date of Delivery" for "Customer Service Survey 2" must not be in the future.
Customer Service Survey Information	CS survey number 3   Date of Delivery		S		Item 25.2 "Date of Delivery" for "Customer Service Survey 3" must have format mm/dd/yyyy and be on or after 1/1/1973.
Customer Service Survey Information	CS survey number 3   Date of Delivery	R	S		"Date of Delivery" for "Customer Service Survey 3" must not be in the future.

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Edit An Organization	Organization name		S		"Name of host agency" is a required field. Special characters are not permitted, except for the following: ! ( ) - ' & / # . : or three asterisks***.
Edit An Organization	Number and Street, Suite Number; or PO Box		S		"Host agency Number and Street, Suite Number; or PO Box" must contain at least two characters, one of which must be a letter. Special characters are not permitted, except for the following: # , . - ; ' / .
Edit An Organization	Number and Street, Suite Number; or PO Box		S		"Number and Street, Suite Number; or PO Box" must contain at least two characters, one of which must be a letter. Special characters are not permitted, except for the following: # , . - ; ' / .
Edit An Organization	Organization		S		Special characters are not permitted in "Organization", except for the following: ! ( ) - ' & / # . : or three asterisks***.
Edit An Organization	Number and Street, Suite Number; or PO Box		S		"Number and Street, Suite Number; or PO Box" must contain at least two characters, one of which must be a letter. Special characters are not permitted, except for the following: # , . - ; ' / .

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Employer Information	Name of employer		S		"Name of employer" is a required field. Special characters are not permitted, except for the following: ! ( ) - ' & / # . : or three asterisks***.
Employer Information	Number and Street, Suite Number; or PO Box		S		"Employer Number and Street, Suite Number; or PO Box" must contain at least two characters, one of which must be a letter. Special characters are not permitted, except for the following: # , . - ; ' / .
Enrollment Information	Co-enrollments? (check as many as apply)	DW		2	"Co-enrollments?" is Other and "g. Other (specify)" is blank. Please correct this information. Otherwise, SPARQ will assume that "Co-enrollments?" is NOT Other.
Exit Form	Date of termination letter		S		"Date of exit" must be at least 30 days after "Date of termination letter."
Exit Form	Date of exit or other closing of record	DR			There are more than three days between two assignments in this enrollment. A break must be entered before the participant can be exited.

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Follow-Up Information	Any wages for second quarter after exit quarter? Please also indicate method of verification	R			Because this placement was not active in the second quarter after the exit quarter, there cannot be a successful Followup 2 for Retention or Average Earnings.
Follow-Up Information	Any wages for third quarter after exit quarter? Please also indicate method of verification	R			Because this placement was not active in the third quarter after the exit quarter, there cannot be a successful Followup 2 for Retention or Average Earnings.
Follow-Up Information	Any wages for fourth quarter after exit quarter? Please also indicate method of verification	R			Because this placement was not active in the fourth quarter after the exit quarter, there cannot be a successful Followup 3 for Retention at 1 year.
Host Agency Information	Name of host agency		S		"Name of host agency" is a required field. Special characters are not permitted, except for the following: ! ( ) - ' & / # . : or three asterisks***.
Host Agency Information	Number and Street, Suite Number; or PO Box		S		"Host agency Number and Street, Suite Number; or PO Box" must contain at least two characters, one of which must be a letter. Special characters are not permitted, except for the following: # , . - ; ' / .
Other Personal Characteristics	Veteran (or eligible spouse of veteran)?	W		1	"Veteran?" is blank.

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Other Personal Characteristics	Disability	W		1	"Disability?" is blank.
Other Personal Characteristics	Failed to find employment after using WIA Title I?	W		1	"Failed to find employment after using WIA Title I?" is blank.
Other Personal Characteristics	At risk of homelessness?	W		1	"At risk of homelessness?" is blank.
Participant Information	Number and Street, Suite Number; or PO Box		S		"Number and Street, Apt. Number; or PO Box" must contain at least two characters, one of which must be a letter. Special characters are not permitted, except for the following: # , . - ; ' /.
Placement Information	Start Date	W		1	Since "Exit due to unsubsidized placement?" is Yes, there must be a placement "Start date" after the "Date of exit."
Supportive Services	Type of supportive service provided		S		"Type of supportive services provided" is a required field.
Supportive Services	Type of supportive service provided		S		"Type of supportive service provided" is "Other" and "Type of Supportive service provided Other (specify)" is blank.
Supportive Services	Date supportive service provided		S		"Date supportive service provided" is a required field.
Supportive Services	Date supportive service provided		S		"Date supportive service provided" must have format mm/dd/yyyy and be on or after 1/1/1973.

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Supportive Services	Date supportive service provided		S		"Date supportive service provided" must not be in the future.
Supportive Services	Supportive service provided by		S		"Supportive service provided by" is blank.
Supportive Services	Supportive service provided by		S		"Supportive service provided by" is "Other" and "Supportive service provided by Other (specify)" is blank.
Supportive Services	Type of supportive service provided		S		"Type of supportive services provided" is a required field.
Supportive Services	Type of supportive service provided		S		"Type of supportive service provided" is "Other" and "Type of Supportive service provided Other (specify)" is blank.
Supportive Services	Date supportive service provided		S		"Date supportive service provided" is a required field.
Supportive Services	Date supportive service provided		S		"Date supportive service provided" must have format mm/dd/yyyy and be on or after 1/1/1973.
Supportive Services	Supportive service provided by		S		"Supportive service provided by" is blank.
Supportive Services	Supportive service provided by		S		"Supportive service provided by" is "Other" and "Supportive service provided by Other (specify)" is blank.

Form Name	Field Name	Error Type Screen Reject Warning Priority			Error Message
Training Provider Information	Name of training provider or OJE employer		S		"Name of training provider or OJE/OJT employer" is a required field. Special characters are not permitted, except for the following: ! ( ) - ' & / # . : or three asterisks***.
Training Provider Information	Number and Street, Suite Number; or PO Box		S		"Number and Street, Suite Number; or PO Box" must contain at least two characters, one of which must be a letter. Special characters are not permitted, except for the following: # , . - ; ' /.
Waiver Of Durational Limit	Date of last update (severe disability)		S		"Date of last update (severe disability)" must not be in the future.
Waiver Of Durational Limit	Date of last update (frail)	R			"Date of last update (frail)" cannot be after "Date of exit."
Waiver Of Durational Limit	Date of last update (frail)		S		"Date of last update (frail)" must not be in the future.
Waiver Of Durational Limit	Date of last update (old enough for but not receiving SS Title II)	R			"Date of last update (old enough for but not receiving SS Title II)" cannot be after "Date of exit".
Waiver Of Durational Limit	<b>Date of last update (old enough for but not receiving SS Title II)</b>		S		"Date of last update (old enough for but not receiving SS Title II)" must not be in the future.



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Waiver Of Durational Limit	Date of last update (severely limited employment prospects in area of persistent unemployment)		S		"Date of last update (severely limited employment prospects in area of persistent unemployment)" must not be in the future.
Waiver Of Durational Limit	Date of last update (LEP waiver)		S		"Date of last update (LEP waiver)" must not be in the future.
Waiver Of Durational Limit	Date of last update (Low literacy skills	R			"Date of last update (low literacy skills waiver)" cannot be after "Date of exit."
Waiver Of Durational Limit	<b>Date of last update (Low literacy skills</b>		S		"Date of last update (low literacy skills waiver)" must not be in the future.

**Notes:**

- Error Type "DW" = Default Warning
- Error Type "R" = Reject
- Error Type "S" = Screen Reject
- Error Type "W" = Warning