

# A Guide to Counting Jobs Properly



## Job Creation Notes

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This document will demonstrate how to count created jobs using the Individual Business Service Agreement (IBSA) and the Assisted Activity Job Report (AAJR).

Job Creation are jobs created through the direct assistance provided by your program. The following documents need to be in the client's file:

1. Signed (by the employer) IBSA with the list of employees the business had prior to receiving services.
2. Signed (by the employer or their designee) AAJIR with the list of employees the business has after receiving services.
3. Signed (by the employee and the employer or their designee) Job Creation forms. If the number of job forms does not tie to the IBSA and AAJIR, then the Subrecipient must remove the excess jobs.
4. Detailed case notes need to clearly demonstrate how your assistance led to creating the jobs. Start-up businesses should have secondary evidence documentation in the client file showing that the business is open and operational (e.g. screenshot of online shop, screenshot Yelp/Google reviews, Grand Opening flyer, etc.)

If any of the above 4 documents are not in the client's file, then the created jobs may be discounted.

# Job Creation Scenario 1: Start-up Business + No Employees

A client wants to start a business and enrolls in your program. Client completes IBSA and on the third page, they should check the box indicating that the business has not opened and leave the rest of the Business Information section blank. On the fourth page of the IBSA, they should check the box indicating that the business has not opened and leave the table blank. After services were provided, the owner did not hire anyone. Therefore, 0 jobs were created.

Page 3 of the IBSA:

**Business Information**

Check Here:  If you have not opened your business as of the date of entering this Agreement and leave the rest of the page blank.

Current business location:  Home-based  Office/Storefront  Online

Business start date: \_\_\_\_\_

Are you operating this business full-time or part-time? \_\_\_\_\_

Are you in danger of closing your business?  Yes  No

Business Name: \_\_\_\_\_

Business Partner Name: \_\_\_\_\_

Business Address: \_\_\_\_\_

Business Email: \_\_\_\_\_

What goods or services does/will this business provide? \_\_\_\_\_

Website: \_\_\_\_\_

**Business Formation:**

<input type="checkbox"/> Sole Proprietorship	<input type="checkbox"/> General Partnership
<input type="checkbox"/> C-Corporation	<input type="checkbox"/> S-Corporation
<input type="checkbox"/> Limited Liability Company (LLC)	<input type="checkbox"/> Limited Liability Partnership (LLP)
<input type="checkbox"/> Have not filled yet	<input type="checkbox"/> Don't Know

Page 4 of the IBSA:

List all your existing permanent positions (including yourself) by name and position title: The first two lines are provided as examples only. Attached additional sheets as needed.

Check Here:  If you have not opened your business and leave the table blank.

	NAME	TITLE	HOURS PER WEEK
	Jane Doe	Owner	40
	VACANT	Server	26
1	N/A		
2			
3			
4			
5			
6			
7			
8			
9			
10			

Are you seeking to hire additional employees?  Yes  No

I certify that all my answers above are true and correct to the best of my knowledge. I also agree that by accepting to receive assistance from the BusinessSource Center I will cooperate and provide the BusinessSource staff with all requested information and documents to verify the outcomes.

  
 \_\_\_\_\_  
 Signature of Business Owner

 Elysa Cohen Naminyan  
 \_\_\_\_\_  
 Signature of BSC Coach

04/28/2021  
 \_\_\_\_\_  
 Date

04/28/2021  
 \_\_\_\_\_  
 Date

**NOTE:** The owner **cannot** be counted as a job creation. Since no jobs were created the owner does not need to complete the AAJIR.

# Job Creation Scenario 2: Start-up Business

A client wants to start a business and enrolls in your program. Client completes IBSA and on the third page, they should check the box indicating that the business has not opened and leave the rest of the Business Information section blank. On the fourth page of the IBSA, they should check the box indicating that the business has not opened and leave the table blank. As a result of the assistance provided by the Subrecipient, the position of Administrative Clerk was created. Therefore, 1 job was created (#2 on the AAJIR).

Page 4 of the IBSA:


List all your existing permanent positions (including yourself) by name and position title: The first two lines are provided as examples only. Attached additional sheets as needed.

Check Here:  If you have not opened your business and leave the table blank.


	NAME	TITLE	HOURS PER WEEK
	Jane Doe	Owner	40
	VACANT	Server	26
1	N/A		
2			
3			
4			
5			
6			
7			
8			
9			
10			

Are you seeking to hire additional employees?  Yes  No

I certify that all my answers above are true and correct to the best of my knowledge. I also agree that by accepting to receive assistance from the BusinessSource Center I will cooperate and provide the BusinessSource staff with all requested information and documents to verify the outcomes.

  
 \_\_\_\_\_  
 Signature of Business Owner

04/28/2021  
 \_\_\_\_\_  
 Date

 Elysa Cohen Narinyan  
 \_\_\_\_\_  
 Signature of BSC Coach

04/28/2021  
 \_\_\_\_\_  
 Date

City of Los Angeles  
**ASSISTED ACTIVITY JOB INFORMATION REPORT**

Business Name: <i>Atterre LLC</i>	Date Prepared: <i>05/29/2021</i>
Business Address: <i>6014 Ventura Canyon Ave, Van Nuys, CA 91401</i>	Prepared By: <i>Arsen Darchinyan</i> Print Name/Title:

Instructions:

1. Please complete for all existing employment positions. The first two lines are provided as examples only.
2. Hours: Indicate the number of hours worked each week.
3. Attach additional sheets as needed.

	NAME	TITLE	HOURS PER WEEK
	Jane Doe	Exec. Assistant	40
	VACANT	Sales Clerk	26
1	<i>Arsen Darchinyan</i>	<i>Member manager</i>	<i>40</i>
2	<i>Tonya Warding</i>	<i>Administrative Clerk</i>	<i>40</i>
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			

Note: The owner **cannot** be counted as a job creation.

# Job Creation Scenario 3: Operating Business

A client with an operating business enrolled into your program listing the owner and 4 employees on page four of the IBSA. As a result of the assistance provided by the Subrecipient, another Customer Service Rep position, Andres Garcia, was created. The AAJIR lists all the other positions and the new position. Therefore, 1 job was created (#6 on the AAJIR).

Page 4 of the IBSA:

List all your existing permanent positions (including yourself) by name and position title: The first two lines are provided as examples only. Attached additional sheets as needed.

**City of Los Angeles**  
**ASSISTED ACTIVITY JOB INFORMATION REPORT**

Check Here:  If you have not opened your business and leave the table blank.

Business Name: Monica's Services	Date Prepared: 7/1/2021
Business Address: 1700 N. West Ave LA CA 90051	Prepared By: Monica Gonzalez Print Name/Title: Owner

**Instructions:**

1. Please complete for all existing employment positions. The first two lines are provided as examples only.
2. Hours: Indicate the number of hours worked each week.
3. Attach additional sheets as needed.

	NAME	TITLE	HOURS PER WEEK
	Jane Doe	Owner	40
	VACANT	Server	26
1	Monica Gonzalez	Owner	40
2	Kristy Pham	Fiscal Officer	40
3	Vanessa Grigoryan	Administrative Assistant	40
4	Michael Jackson	Customer Service Rep	40
5	Oscar Lin	Customer Service Rep	40
6			
7			
8			
9			
10			

	NAME	TITLE	HOURS PER WEEK
	Jane Doe	Exec. Assistant	40
	VACANT	Sales Clerk	26
1	Monica Gonzalez	Owner	40
2	Kristy Pham	Fiscal Officer	40
3	Vanessa Grigoryan	Administrative Assistant	40
4	Michael Jackson	Customer Service Rep	40
5	Oscar Lin	Customer Service Rep	40
6	Andres Garcia	Customer Service Rep	20
7			
8			

Are you seeking to hire additional employees?  Yes  No

I certify that all my answers above are true and correct to the best of my knowledge. I also agree that by accepting to receive assistance from the BusinessSource Center I will cooperate and provide the BusinessSource staff with all requested information and documents to verify the outcomes.



Signature of Business Owner

*Violet Smith*

Signature of BSC Coach

4/6/21

Date

4/6/21

Date

# Job Creation Scenario 4: Job Replacement

A client with an operating business enrolled into your program listing the owner and 4 employees on page four of the IBSA. After services are provided, the business still has the owner and 4 employees. In row five of the AAJIR, Miranda Sharp replaced Oscar Lin as a Customer Service Representative. The employee changed but the number of positions remained the same, so this is considered job replacement instead of job creation. Therefore, 0 jobs were created.

Page 4 of the IBSA:

List all your existing permanent positions (including yourself) by name and position title: The first two lines are provided as examples only. Attached additional sheets as needed.

Check Here:  If you have not opened your business and leave the table blank.

	NAME	TITLE	HOURS PER WEEK
	Jane Doe	Owner	40
	VACANT	Server	26
1	Monica Gonzalez	Owner	40
2	Kristy Pham	Fiscal Officer	40
3	Vanessa Grigoryan	Administrative Assistant	40
4	Michael Jackson	Customer Service Rep	40
5	Oscar Lin	Customer Service Rep	40
6			
7			
8			
9			
10			

Are you seeking to hire additional employees?  Yes  No

I certify that all my answers above are true and correct to the best of my knowledge. I also agree that by accepting to receive assistance from the BusinessSource Center I will cooperate and provide the BusinessSource staff with all requested information and documents to verify the outcomes.



Signature of Business Owner

*Violet Smith*

Signature of BSC Coach

4/6/21

Date

4/6/21

Date

City of Los Angeles

## ASSISTED ACTIVITY JOB INFORMATION REPORT

Business Name: Monica's Services	Date Prepared: 7/1/2021
Business Address: 1700 N. West Ave LA CA 90051	Prepared By: Monica Gonzalez Print Name/Title: Owner

### Instructions:

1. Please complete for all existing employment positions. The first two lines are provided as examples only.
2. Hours: Indicate the number of hours worked each week.
3. Attach additional sheets as needed.

	NAME	TITLE	HOURS PER WEEK
	Jane Doe	Exec. Assistant	40
	VACANT	Sales Clerk	26
1	Monica Gonzalez	Owner	40
2	Kristy Pham	Fiscal Officer	40
3	Vanessa Grigoryan	Administrative Assistant	40
4	Michael Jackson	Customer Service Rep	40
5	Miranda Sharp	Customer Service Rep	40
6			
7			
8			

Note: Job replacement is not job creation

# Job Creation Scenario 5: Vacant Positions

A client with an operating business enrolled into your program listing the owner and 4 employees on page four of the IBSA. As a result of the assistance provided by the Subrecipient, another Customer Service Rep position, Andres Garcia, was created. Separately, Oscar Lin (#5 on the IBSA) left the business, but the owner intends to replace him (the new employee **cannot** be counted as job creation or retention when it does get filled). The business now has a owner, 4 employees, and one vacant position. Therefore, 1 job was created (#6 on the AAJIR).

Page 4 of the IBSA:

List all your existing permanent positions (including yourself) by name and position title: The first two lines are provided as examples only. Attached additional sheets as needed.

Check Here:  If you have not opened your business and leave the table blank.

	NAME	TITLE	HOURS PER WEEK
	Jane Doe	Owner	40
	VACANT	Server	26
1	Monica Gonzalez	Owner	40
2	Kristy Pham	Fiscal Officer	40
3	Vanessa Grigoryan	Administrative Assistant	40
4	Michael Jackson	Customer Service Rep	40
5	Oscar Lin	Customer Service Rep	40
6			
7			
8			
9			
10			

Are you seeking to hire additional employees?  Yes  No

I certify that all my answers above are true and correct to the best of my knowledge. I also agree that by accepting to receive assistance from the BusinessSource Center I will cooperate and provide the BusinessSource staff with all requested information and documents to verify the outcomes.



Signature of Business Owner

*Violet Smith*

Signature of BSC Coach

4/6/21

Date

4/6/21

Date

## City of Los Angeles ASSISTED ACTIVITY JOB INFORMATION REPORT

Business Name: Monica's Services	Date Prepared: 7/1/2021
Business Address: 1700 N. West Ave LA CA 90051	Prepared By: Monica Gonzalez Print Name/Title: Owner

### Instructions:

1. Please complete for all existing employment positions. The first two lines are provided as examples only.
2. Hours: Indicate the number of hours worked each week.
3. Attach additional sheets as needed.

	NAME	TITLE	HOURS PER WEEK
	Jane Doe	Exec. Assistant	40
	VACANT	Sales Clerk	26
1	Monica Gonzalez	Owner	40
2	Kristy Pham	Fiscal Officer	40
3	Vanessa Grigoryan	Administrative Assistant	40
4	Michael Jackson	Customer Service Rep	40
5	Vacant	Customer Service Rep	40
6	Andres Garcia	Customer Service Rep	20
7			
8			

## Job Creation Scenario 6: Change in Job Title or Duties

A client with an operating business enrolled into your program listing the owner and 4 employees on page four of the IBSA. After services are provided, the business still has the Owner and 4 employees. Oscar Lin was promoted to Customer Service Rep Supervisor and the owner will not replace Oscar Lin's previous title, Customer Service Rep, with another person. The name of the position changed, but the number of positions remained the same. Therefore, 0 jobs were created.

Page 4 of the IBSA:

List all your existing permanent positions (including yourself) by name and position title: The first two lines are provided as examples only. Attached additional sheets as needed.

Check Here:  If you have not opened your business and leave the table blank.

	NAME	TITLE	HOURS PER WEEK
	Jane Doe	Owner	40
	VACANT	Server	26
1	Monica Gonzalez	Owner	40
2	Kristy Pham	Fiscal Officer	40
3	Vanessa Grigoryan	Administrative Assistant	40
4	Michael Jackson	Customer Service Rep	40
5	Oscar Lin	Customer Service Rep	40
6			
7			
8			
9			
10			

Are you seeking to hire additional employees?  Yes  No

I certify that all my answers above are true and correct to the best of my knowledge. I also agree that by accepting to receive assistance from the BusinessSource Center I will cooperate and provide the BusinessSource staff with all requested information and documents to verify the outcomes.



Signature of Business Owner

*Violet Smith*

Signature of BSC Coach

4/6/21

Date

4/6/21

Date

### City of Los Angeles ASSISTED ACTIVITY JOB INFORMATION REPORT

Business Name: Monica's Services	Date Prepared: 7/1/2021
Business Address: 1700 N. West Ave LA CA 90051	Prepared By: Monica Gonzalez Print Name/Title: Owner

#### Instructions:

1. Please complete for all existing employment positions. The first two lines are provided as examples only.
2. Hours: Indicate the number of hours worked each week.
3. Attach additional sheets as needed.

	NAME	TITLE	HOURS PER WEEK
	Jane Doe	Exec. Assistant	40
	VACANT	Sales Clerk	26
1	Monica Gonzalez	Owner	40
2	Kristy Pham	Fiscal Officer	40
3	Vanessa Grigoryan	Administrative Assistant	40
4	Michael Jackson	Customer Service Rep	40
5	Oscar Lin	Customer Service Rep Supervisor	40
6			
7			
8			

Note: This scenario is like job replacement and job replacement is not job creation.



# Job Creation Scenario 7: Promotions

A client with an operating business enrolled into your program listing the owner and 4 employees on page four of the IBSA. After services are provided, the business has the owner, 4 employees, and one vacant position. Oscar Lin received a promotion to Customer Service Rep Supervisor and the owner plans to hire someone to replace Oscar Lin's old position (the new employee **cannot** be counted a job creation or retention when it does get filled). Therefore, 1 job was created (#6 on the AAJIR).

Page 4 of the IBSA:

List all your existing permanent positions (including yourself) by name and position title: The first two lines are provided as examples only. Attached additional sheets as needed.

Check Here:  If you have not opened your business and leave the table blank.

	NAME	TITLE	HOURS PER WEEK
	Jane Doe	Owner	40
	VACANT	Server	26
1	Monica Gonzalez	Owner	40
2	Kristy Pham	Fiscal Officer	40
3	Vanessa Grigoryan	Administrative Assistant	40
4	Michael Jackson	Customer Service Rep	40
5	Oscar Lin	Customer Service Rep	40
6			
7			
8			
9			
10			

Are you seeking to hire additional employees?  Yes  No

I certify that all my answers above are true and correct to the best of my knowledge. I also agree that by accepting to receive assistance from the BusinessSource Center I will cooperate and provide the BusinessSource staff with all requested information and documents to verify the outcomes.



Signature of Business Owner

*Violet Smith*

Signature of BSC Coach

4/6/21

Date

4/6/21

Date

## City of Los Angeles ASSISTED ACTIVITY JOB INFORMATION REPORT

Business Name: Monica's Services	Date Prepared: 7/1/2021
Business Address: 1700 N. West Ave LA CA 90051	Prepared By: Monica Gonzalez Print Name/Title: Owner

### Instructions:

1. Please complete for all existing employment positions. The first two lines are provided as examples only.
2. Hours: Indicate the number of hours worked each week.
3. Attach additional sheets as needed.

	NAME	TITLE	HOURS PER WEEK
	Jane Doe	Exec. Assistant	40
	VACANT	Sales Clerk	26
1	Monica Gonzalez	Owner	40
2	Kristy Pham	Fiscal Officer	40
3	Vanessa Grigoryan	Administrative Assistant	40
4	Michael Jackson	Customer Service Rep	40
5	Vacant	Customer Service Rep	40
6	Oscar Lin	Customer Service Rep Supervisor	40
7			
8			

## Job Retention Notes

This document will demonstrate how to count retained jobs using the Individual Business Service Agreement (IBSA) and the Assisted Activity Job Report (AAJR).

As a reminder, Job Retention can only be counted if the jobs would have been lost without the assistance of Community Development Block Grant (CDBG) funds. The following documents need to be in the client's file:

1. Signed (by the employer) IBSA with the list of employees the business has prior to receiving services.
2. Signed (by the employer or their designee) AAJIR with the list of employees the business has after receiving services.
3. Signed (by the employee and the employer or their designee) Job Retention forms. If the number of job forms does not tie to the IBSA and AAJIR, then the Subrecipient must remove the excess jobs.
4. Documentation of the services provided which directly prevented the loss of jobs in the client notes. There should be a sentence such as "Based on current trends, the business will not be able to retain their employees."
5. One the following:
  - Letter of explanation of the current business environment with income not sufficient to meet payroll and current profit and loss statement(s) evidencing losses in business income -or-
  - Bank statements evidencing decreasing balances and challenges meeting credit and payroll responsibilities -or-
  - Business Tax Returns for the previous two years evidencing a decreasing business income, thereby creating challenges meeting credit and payroll responsibilities -or-
  - New article mentioning the business is going out of business or moving out of the City.

If any of the above 5 documents are not in the client's file, then the retained jobs may be discounted.

# Job Retention Scenario 1: Business with No Employees

A client with a failing business enrolls in your program listing only the owner on page four of the IBSA. After services are provided, the owner does not hire anyone else. Therefore, 0 jobs were retained.

Page 4 of the IBSA:

List all your existing permanent positions (including yourself) by name and position title: The first two lines are provided as examples only. Attached additional sheets as needed.

	NAME	TITLE	HOURS PER WEEK
	Jane Doe	Owner	40
	VACANT	Server	26
1	Bernadette Tibazi		
2			
3			
4			
5			
6			
7			
8			
9			
10			

Are you seeking to hire additional employees?  Yes  No

I certify that all my answers above are true and correct to the best of my knowledge. I also agree that by accepting to receive assistance from the BusinessSource Center I will cooperate and provide the BusinessSource staff with all requested information and documents to verify the outcomes.

  
 \_\_\_\_\_  
 Signature of Business Owner

1/3/2020  
 \_\_\_\_\_  
 Date

  
 \_\_\_\_\_  
 Signature of BSC Coach

1/3/2020  
 \_\_\_\_\_  
 Date

City of Los Angeles  
 ASSISTED ACTIVITY JOB INFORMATION REPORT

Business Name: Tibazi fine art	Date Prepared: Jan 13 2020
Business Address: 9165 Santa Ana Ave Atleta CA	Prepared By: Bernadette Tibazi Print Name/Title: Owner

Instructions:

1. Please complete for all existing employment positions. The first two lines are provided as examples only.
2. Hours: Indicate the number of hours worked each week.
3. Attach additional sheets as needed.

	NAME	TITLE	HOURS PER WEEK
	Jane Doe	Exec. Assistant	40
	VACANT	Sales Clerk	26
1	Bernadette Tibazi	Owner	26
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			

Note: The owner **cannot** be counted as a job retention.

## Job Retention Scenario 2: Operating Business

A client with a failing business enrolls into your program listing the owner and 4 employees on page four of the IBSA. As a result of the assistance provided by the Subrecipient, the business was able to retain all 4 employees. Therefore, 4 jobs were retained (#2-5 on the AAJIR).

Page 4 of the IBSA:

List all your existing permanent positions (including yourself) by name and position title: The first two lines are provided as examples only. Attached additional sheets as needed.

Check Here:  If you have not opened your business and leave the table blank.

	NAME	TITLE	HOURS PER WEEK
	Jane Doe	Owner	40
	VACANT	Server	26
1	Monica Gonzalez	Owner	40
2	Kristy Pham	Fiscal Officer	40
3	Vanessa Grigoryan	Administrative Assistant	40
4	Michael Jackson	Customer Service Rep	40
5	Oscar Lin	Customer Service Rep	40
6			
7			
8			
9			
10			

Are you seeking to hire additional employees?  Yes  No

I certify that all my answers above are true and correct to the best of my knowledge. I also agree that by accepting to receive assistance from the BusinessSource Center I will cooperate and provide the BusinessSource staff with all requested information and documents to verify the outcomes.



Signature of Business Owner

*Violet Smith*

Signature of BSC Coach

4/6/21

Date

4/6/21

Date

### City of Los Angeles ASSISTED ACTIVITY JOB INFORMATION REPORT

Business Name: Monica's Services	Date Prepared: 7/1/2021
Business Address: 1700 N. West Ave LA CA 90051	Prepared By: Monica Gonzalez Print Name/Title: Owner

#### Instructions:

1. Please complete for all existing employment positions. The first two lines are provided as examples only.
2. Hours: Indicate the number of hours worked each week.
3. Attach additional sheets as needed.

	NAME	TITLE	HOURS PER WEEK
	Jane Doe	Exec. Assistant	40
	VACANT	Sales Clerk	26
1	Monica Gonzalez	Owner	40
2	Kristy Pham	Fiscal Officer	40
3	Vanessa Grigoryan	Administrative Assistant	40
4	Michael Jackson	Customer Service Rep	40
5	Oscar Lin	Customer Service Rep	40
6			
7			
8			

Note: The owner **cannot** be counted as a job retention.

# Job Retention Scenario 3: Retention and Creation

A client with a failing business enrolled into your program listing the owner and 4 employees on page four of the IBSA. As a result of the assistance provided by the Subrecipient, the business was able to retain 4 employees and hired another Customer Service Rep, Andres Garcia. Therefore, 4 jobs were retained (#2-5 on the AAJIR) and 1 job was created (#6 on the AAJIR).

Page 4 of the IBSA:

List all your existing permanent positions (including yourself) by name and position title: The first two lines are provided as examples only. Attached additional sheets as needed.

**City of Los Angeles**  
**ASSISTED ACTIVITY JOB INFORMATION REPORT**

Check Here:  If you have not opened your business and leave the table blank.

	NAME	TITLE	HOURS PER WEEK
	Jane Doe	Owner	40
	VACANT	Server	26
1	Monica Gonzalez	Owner	40
2	Kristy Pham	Fiscal Officer	40
3	Vanessa Grigoryan	Administrative Assistant	40
4	Michael Jackson	Customer Service Rep	40
5	Oscar Lin	Customer Service Rep	40
6			
7			
8			
9			
10			

Business Name: Monica's Services	Date Prepared: 7/1/2021
Business Address: 1700 N. West Ave LA CA 90051	Prepared By: Monica Gonzalez Print Name/Title: Owner

**Instructions:**

1. Please complete for all existing employment positions. The first two lines are provided as examples only.
2. Hours: Indicate the number of hours worked each week.
3. Attach additional sheets as needed.

	NAME	TITLE	HOURS PER WEEK
	Jane Doe	Exec. Assistant	40
	VACANT	Sales Clerk	26
1	Monica Gonzalez	Owner	40
2	Kristy Pham	Fiscal Officer	40
3	Vanessa Grigoryan	Administrative Assistant	40
4	Michael Jackson	Customer Service Rep	40
5	Oscar Lin	Customer Service Rep	40
6	Andres Garcia	Customer Service Rep	20
7			
8			

Are you seeking to hire additional employees?  Yes  No

I certify that all my answers above are true and correct to the best of my knowledge. I also agree that by accepting to receive assistance from the BusinessSource Center I will cooperate and provide the BusinessSource staff with all requested information and documents to verify the outcomes.



Signature of Business Owner

*Violet Smith*

Signature of BSC Coach

4/6/21

Date

4/6/21

Date

Note: The owner **cannot** be counted as a job retention.

# Job Retention Scenario 4: Job Replacement

A client with a failing business enrolled into your program listing the owner and 4 employees on page four of the IBSA. As a result of the assistance provided by the Subrecipient, the business was able to retain 4 employees. Miranda Sharp (#5 on the AAJIR) replaced Oscar Lin (#5 on IBSA) as a Customer Service Representative. The employee changed but the number of positions remained the same, so this is considered a job replacement and not a job creation. Therefore, 4 jobs were retained (#2-5 on the AAJIR) and there were no job creations.

Page 4 of the IBSA:

List all your existing permanent positions (including yourself) by name and position title: The first two lines are provided as examples only. Attached additional sheets as needed.

Check Here:  If you have not opened your business and leave the table blank.

	NAME	TITLE	HOURS PER WEEK
	Jane Doe	Owner	40
	VACANT	Server	26
1	Monica Gonzalez	Owner	40
2	Kristy Pham	Fiscal Officer	40
3	Vanessa Grigoryan	Administrative Assistant	40
4	Michael Jackson	Customer Service Rep	40
5	Oscar Lin	Customer Service Rep	40
6			
7			
8			
9			
10			

Are you seeking to hire additional employees?  Yes  No

I certify that all my answers above are true and correct to the best of my knowledge. I also agree that by accepting to receive assistance from the BusinessSource Center I will cooperate and provide the BusinessSource staff with all requested information and documents to verify the outcomes.



Signature of Business Owner

*Violet Smith*

Signature of BSC Coach

4/6/21

Date

4/6/21

Date

## City of Los Angeles ASSISTED ACTIVITY JOB INFORMATION REPORT

Business Name: Monica's Services	Date Prepared: 7/1/2021
Business Address: 1700 N. West Ave LA CA 90051	Prepared By: Monica Gonzalez Print Name/Title: Owner

### Instructions:

1. Please complete for all existing employment positions. The first two lines are provided as examples only.
2. Hours: Indicate the number of hours worked each week.
3. Attach additional sheets as needed.

	NAME	TITLE	HOURS PER WEEK
	Jane Doe	Exec. Assistant	40
	VACANT	Sales Clerk	26
1	Monica Gonzalez	Owner	40
2	Kristy Pham	Fiscal Officer	40
3	Vanessa Grigoryan	Administrative Assistant	40
4	Michael Jackson	Customer Service Rep	40
5	Miranda Sharp	Customer Service Rep	40
6			
7			
8			

Note: The owner **cannot** be counted as a job retention.

# Job Retention Scenario 5: Vacant Positions

A client with a failing business enrolled into your program listing the owner and 4 employees on page four of the IBSA. As a result of the assistance provided by the Subrecipient, the owner was able to retain all 4 employees and create 1 new Customer Service Rep position filled by Andres Garcia (#6 on the AAJIR). Separately, Oscar Lin (#5 on the IBSA) left the business and now there is one vacant position. The owner intends to replace him (the new employee **cannot** be counted as job creation when it does get filled). For the vacant position, you may collect the job retention form after the position is filled to be counted as a job retention. Therefore, 3 jobs were retained (#2-4 on the AAJIR) and 1 job was created (#6 on the AAJIR).

Page 4 of the IBSA:

List all your existing permanent positions (including yourself) by name and position title: The first two lines are provided as examples only. Attached additional sheets as needed.

Check Here:  If you have not opened your business and leave the table blank.

	NAME	TITLE	HOURS PER WEEK
	Jane Doe	Owner	40
	VACANT	Server	26
1	Monica Gonzalez	Owner	40
2	Kristy Pham	Fiscal Officer	40
3	Vanessa Grigoryan	Administrative Assistant	40
4	Michael Jackson	Customer Service Rep	40
5	Oscar Lin	Customer Service Rep	40
6			
7			
8			
9			
10			

Are you seeking to hire additional employees?  Yes  No

I certify that all my answers above are true and correct to the best of my knowledge. I also agree that by accepting to receive assistance from the BusinessSource Center I will cooperate and provide the BusinessSource staff with all requested information and documents to verify the outcomes.



Signature of Business Owner

*Violet Smith*

Signature of BSC Coach

4/6/21

Date

4/6/21

Date

## City of Los Angeles ASSISTED ACTIVITY JOB INFORMATION REPORT

Business Name: Monica's Services	Date Prepared: 7/1/2021
Business Address: 1700 N. West Ave LA CA 90051	Prepared By: Monica Gonzalez Print Name/Title: Owner

### Instructions:

1. Please complete for all existing employment positions. The first two lines are provided as examples only.
2. Hours: Indicate the number of hours worked each week.
3. Attach additional sheets as needed.

	NAME	TITLE	HOURS PER WEEK
	Jane Doe	Exec. Assistant	40
	VACANT	Sales Clerk	26
1	Monica Gonzalez	Owner	40
2	Kristy Pham	Fiscal Officer	40
3	Vanessa Grigoryan	Administrative Assistant	40
4	Michael Jackson	Customer Service Rep	40
5	Vacant	Customer Service Rep	40
6	Andres Garcia	Customer Service Rep	20
7			
8			

Note: The owner **cannot** be counted as a job retention.

# Job Retention Scenario 6: Change in Job Title or Duties

A client with a failing business enrolled into your program listing the owner and 4 employees on page four of the IBSA. As a result of the assistance provided by the Subrecipient, the owner was able to retain 4 employees. Oscar Lin was promoted to Customer Service Rep Supervisor and the Owner will not replace Oscar Lin's previous title, Customer Service Rep, with another person. The name of the position changed, but the number of positions remained the same. Therefore, 4 jobs (#2-5 on the AAJIR) were retained and there are no job creations.

Page 4 of the IBSA:

List all your existing permanent positions (including yourself) by name and position title: The first two lines are provided as examples only. Attached additional sheets as needed.

Check Here:  If you have not opened your business and leave the table blank.

	NAME	TITLE	HOURS PER WEEK
	Jane Doe	Owner	40
	VACANT	Server	26
1	Monica Gonzalez	Owner	40
2	Kristy Pham	Fiscal Officer	40
3	Vanessa Grigoryan	Administrative Assistant	40
4	Michael Jackson	Customer Service Rep	40
5	Oscar Lin	Customer Service Rep	40
6			
7			
8			
9			
10			

Are you seeking to hire additional employees?  Yes  No

I certify that all my answers above are true and correct to the best of my knowledge. I also agree that by accepting to receive assistance from the BusinessSource Center I will cooperate and provide the BusinessSource staff with all requested information and documents to verify the outcomes.



Signature of Business Owner

*Violet Smith*

Signature of BSC Coach

4/6/21

Date

4/6/21

Date

## City of Los Angeles ASSISTED ACTIVITY JOB INFORMATION REPORT

Business Name: Monica's Services	Date Prepared: 7/1/2021
Business Address: 1700 N. West Ave LA CA 90051	Prepared By: Monica Gonzalez Print Name/Title: Owner

### Instructions:

1. Please complete for all existing employment positions. The first two lines are provided as examples only.
2. Hours: Indicate the number of hours worked each week.
3. Attach additional sheets as needed.

	NAME	TITLE	HOURS PER WEEK
	Jane Doe	Exec. Assistant	40
	VACANT	Sales Clerk	26
1	Monica Gonzalez	Owner	40
2	Kristy Pham	Fiscal Officer	40
3	Vanessa Grigoryan	Administrative Assistant	40
4	Michael Jackson	Customer Service Rep	40
5	Oscar Lin	Customer Service Rep Supervisor	40
6			
7			
8			

Note: The owner **cannot** be counted as a job retention.



# Job Retention Scenario 7: Promotions

A client with a failing business enrolled into your program with an owner and 4 employees as listed on page four of the IBSA. As a result of the assistance provided by the Subrecipient, the business was able to retain the 4 employees and create a new position of Customer Service Rep Supervisor (#6 on the AAJIR). Oscar Lin was promoted to the new position and now his old position, Customer Service Rep (#5 on the AAJIR), is vacant and the owner plans to fill his old position. For the vacant position, you may collect the job retention form after the position is filled to be counted as a job retention. Therefore, 3 jobs were retained (#2-4 on the AAJIR) and 1 job was created (#6 on the AAJIR).

Page 4 of the IBSA:

List all your existing permanent positions (including yourself) by name and position title: The first two lines are provided as examples only. Attached additional sheets as needed.

Check Here:  If you have not opened your business and leave the table blank.

	NAME	TITLE	HOURS PER WEEK
	Jane Doe	Owner	40
	VACANT	Server	26
1	Monica Gonzalez	Owner	40
2	Kristy Pham	Fiscal Officer	40
3	Vanessa Grigoryan	Administrative Assistant	40
4	Michael Jackson	Customer Service Rep	40
5	Oscar Lin	Customer Service Rep	40
6			
7			
8			
9			
10			

Are you seeking to hire additional employees?  Yes  No

I certify that all my answers above are true and correct to the best of my knowledge. I also agree that by accepting to receive assistance from the BusinessSource Center I will cooperate and provide the BusinessSource staff with all requested information and documents to verify the outcomes.



Signature of Business Owner

*Violet Smith*

Signature of BSC Coach

4/6/21

Date

4/6/21

Date

## City of Los Angeles ASSISTED ACTIVITY JOB INFORMATION REPORT

Business Name: Monica's Services	Date Prepared: 7/1/2021
Business Address: 1700 N. West Ave LA CA 90051	Prepared By: Monica Gonzalez Print Name/Title: Owner

### Instructions:

1. Please complete for all existing employment positions. The first two lines are provided as examples only.
2. Hours: Indicate the number of hours worked each week.
3. Attach additional sheets as needed.

	NAME	TITLE	HOURS PER WEEK
	Jane Doe	Exec. Assistant	40
	VACANT	Sales Clerk	26
1	Monica Gonzalez	Owner	40
2	Kristy Pham	Fiscal Officer	40
3	Vanessa Grigoryan	Administrative Assistant	40
4	Michael Jackson	Customer Service Rep	40
5	Vacant	Customer Service Rep	40
6	Oscar Lin	Customer Service Rep Supervisor	40
7			
8			

Note: The owner **cannot** be counted as a job retention.

# Job Retention Scenario 8: Furloughed Positions

A client with a failing business enrolled into your program. Prior to enrollment, the owner furloughed their 4 employees, so they should list the positions as vacant on page four of the IBSA. As a result of the assistance provided by the Subrecipient, the owner was able to bring back all of their employees. Therefore, 4 jobs (#2-5 on the AAJIR) were retained and there are no job creations.

Page 4 of the IBSA:

List all your existing permanent positions (including yourself) by name and position title: The first two lines are provided as examples only. Attached additional sheets as needed.

Check Here:  If you have not opened your business and leave the table blank.

	NAME	TITLE	HOURS PER WEEK
	Jane Doe	Owner	40
	VACANT	Server	26
1	Monica Gonzalez	Owner	40
2	Vacant	Fiscal Officer	40
3	Vacant	Administrative Assistant	40
4	Vacant	Customer Service Rep	40
5	Vacant	Customer Service Rep	40
6			
7			
8			
9			
10			

Are you seeking to hire additional employees?  Yes  No

I certify that all my answers above are true and correct to the best of my knowledge. I also agree that by accepting to receive assistance from the BusinessSource Center I will cooperate and provide the BusinessSource staff with all requested information and documents to verify the outcomes.



Signature of Business Owner

*Violet Smith*

Signature of BSC Coach

4/6/21

Date

4/6/21

Date

## City of Los Angeles ASSISTED ACTIVITY JOB INFORMATION REPORT

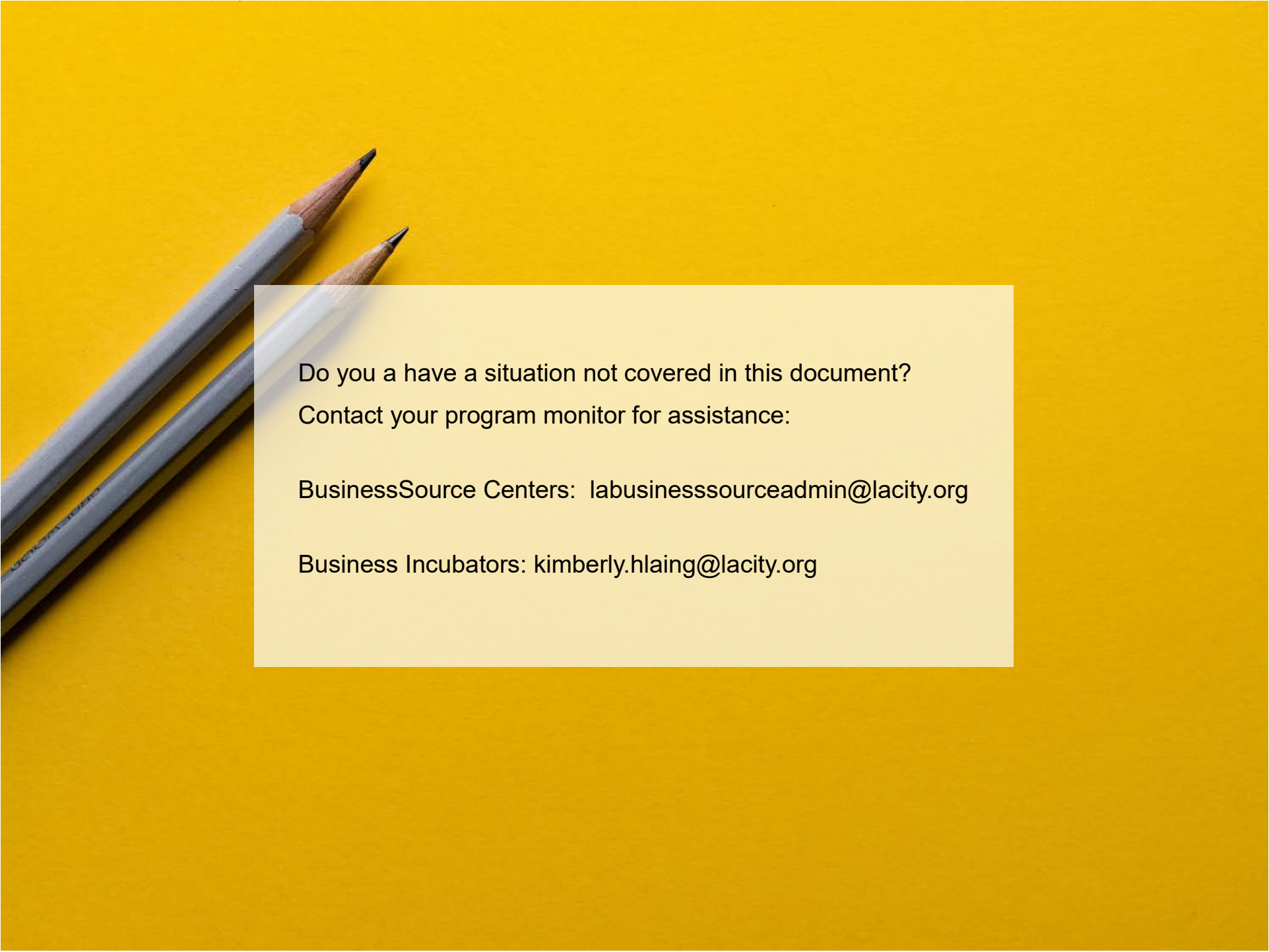
Business Name: Monica's Services	Date Prepared: 7/1/2021
Business Address: 1700 N. West Ave LA CA 90051	Prepared By: Monica Gonzalez Print Name/Title: Owner

### Instructions:

1. Please complete for all existing employment positions. The first two lines are provided as examples only.
2. Hours: Indicate the number of hours worked each week.
3. Attach additional sheets as needed.

	NAME	TITLE	HOURS PER WEEK
	Jane Doe	Exec. Assistant	40
	VACANT	Sales Clerk	26
1	Monica Gonzalez	Owner	40
2	Kristy Pham	Fiscal Officer	40
3	Vanessa Grigoryan	Administrative Assistant	40
4	Michael Jackson	Customer Service Rep	40
5	John Wick	Customer Service Rep	40
6			
7			
8			

Note: The owner **cannot** be counted as a job retention. If Oscar Lin held the vacant position on line five of the IBSA and he declines the offer to return to work then the owner replaced him with a new employee, John Wick. The new employee **cannot** be counted as a job creation, but can be counted as a job retention.

Two sharpened pencils, one grey and one light blue, are positioned diagonally on a bright yellow background. A semi-transparent white rectangular box is overlaid on the right side of the image, containing text.

Do you have a situation not covered in this document?  
Contact your program monitor for assistance:

BusinessSource Centers: [labusinesssourceadmin@lacity.org](mailto:labusinesssourceadmin@lacity.org)

Business Incubators: [kimberly.hlaing@lacity.org](mailto:kimberly.hlaing@lacity.org)