



California Statewide Automated Welfare System

Design Document

CA-205414 | CIV-102600

ACL 14-20 - CF 29A (2/14)

CalFresh Initial Appointment Letter

CalSAWS	DOCUMENT APPROVAL HISTORY	
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	Reviewed By	[individual(s) from build and test teams that reviewed document]

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
11/6/19	1.0	Initial Creation	Connor Gorry

Table of Contents

1	Overview	4
1.1	Current Design	4
1.2	Requests.....	4
1.3	Overview of Recommendations	4
1.3.1	Add CF 29A to the Template Repository.....	4
1.4	Assumptions.....	4
2	Recommendations	5
2.0	Overview.....	5
2.1	Description of Change	5
2.1.1	Create CF 29A Form XDP	5
2.1.2	Add Form Variable Population.....	6
2.1.3	Add CF 29A (2/14) to Template Repository	7
2.1.4	Add Form Print Options and Mailing Requirements	7
3	Supporting Documents	8
4	Requirements.....	8
4.1	Project Requirements.....	8
5	Migration Impacts.....	9
6	Outreach.....	9

2 OVERVIEW

This SCR is to add the form CF 29A to the Template Repository.

CF 29A's purpose is to notify the household in writing of their scheduled initial intake appointment for CalFresh.

2.1 Current Design

CalSAWS currently uses the FS 29A, a similar cover sheet that is generated for the CF Recertification Packet, which notifies clients of the date and time of their upcoming recertification interview.

2.2 Requests

Implement the CF 29A (2/14) Cal Fresh Initial Appointment Letter in the Template Repository. The purpose of this appointment letter is to notify the household in writing of their scheduled initial intake appointment for Cal Fresh.

2.3 Overview of Recommendations

2.3.1 Add CF 29A to the Template Repository

Implement the CF 29A (2/14) CalFresh Appointment Letter in the Template Repository in English and Spanish.

2.4 Assumptions

1. CF 29A will be added in English and Spanish. Threshold Languages will be added with SCR CA-205448.
2. No form generation will be added with this effort. Generation to the CF 29A will be added with SCR CA-205448.

3 RECOMMENDATIONS

3.1 Overview

This effort adds form CF 29A (2/14) Cal Fresh Initial Appointment Letter to the Template Repository

State Form: CF 29A (2/14) Cal Fresh Initial Appointment Letter

Programs: CF

Attached Forms: None

Forms Category: Form

Languages:

English and Spanish

3.2 Description of Change

This change adds the CalFresh Initial Appointment Letter CF 29A (2/14) to the Template Repository.

3.2.1 Create CF 29A Form XDP

The CF29A is a one page Form.

Form Header: Existing Standard C-IV/ Standard CalSAWS Header

Form Title: CalFresh Initial Appointment Letter

Form Number: CF 29A (2/14)

Include NA Back 9: No

Form Mockup:

**CALFRESH RECERTIFICATION
APPOINTMENT LETTER**

STATE OF CALIFORNIA
HEALTH AND HUMAN SERVICES AGENCY
CALIFORNIA DEPARTMENT OF SOCIAL SERVICES

Worker Name: _____

Worker ID: _____

Worker Phone Number: _____

Notice Date: _____

Case Name: _____

Case Number: _____

Office Hours: _____

TDD - For Hearing Impaired: _____

Your CalFresh application process must be completed by _____.
MM/DD/YYYY

You need an interview to complete the CalFresh application process. This is your appointment letter for your interview.

☐ You have a telephone CalFresh interview appointment. **If you prefer to be interviewed in person, please call the county at the number above for an appointment.**

APPOINTMENT DATE:	APPOINTMENT TIME:
YOUR PHONE NUMBER:	ALTERNATIVE PHONE NUMBER:

We will call you at the phone number provided above. If the number is not correct, you must call us and provide a number where you can be reached for your interview. It is very important that we are able to reach you. You may also want to provide an alternative phone number where you can be reached. County phone numbers may be blocked. If your phone does not accept blocked numbers, you may miss the phone call for your telephone interview, and your benefits may be delayed. If you miss your scheduled interview you will have to reschedule your interview. Call the county at the number above or go to the office address listed above to reschedule your interview.

☐ You have a face-to-face CalFresh interview appointment.

APPOINTMENT DATE:	APPOINTMENT TIME:
COUNTY OFFICE NAME:	
COUNTY OFFICE ADDRESS:	CITY: STATE: ZIP CODE:

IMPORTANT REMINDERS

- Failure to complete this interview may result in a delay of benefits or denial of your application for CalFresh benefits.
- If you do not keep the scheduled appointment, it is your responsibility to reschedule it.
- To change your appointment, please contact the county.
- Required verification must be turned in within 10 days of the county asking for it.
- Please tell the county if you need help getting this information. The county can help you get it.
- If you fail to complete your interview within 30 days from your application's filing date, you will receive a denial notice and you will need to reapply.

COMMENTS:

CF 29A (2014) RECOMMENDED FORM

C-IV/CalSAWS
Standard Header

CA 29A Body Text
(See [Supporting Documents #2](#))

CF 29A w/ CalSAWS Standard Header (Mockup)

3.2.2 Add Form Variable Population

The CF 29A Form will populate only the existing standard Form header in C-IV and CalSAWS.

Form Header Variables: Existing standard C-IV or CalSAWS header variable population.

Variables Requiring Translations: None

3.2.3 Add CF 29A (2/14) to Template Repository

The CF 29A (2/14) Form will be added to Template Repository. The form will not have any pre-population aside from the Header. CF29A will be added in English and Spanish.

Required Document Parameters: Case Number, Customer Name, Language

3.2.4 Add CF 29A Form Print Options and Mailing Requirements

The following Print Options will be included for the CF 29A:

Blank Template	Print Local without Save	Print Local and Save	Print Central and Save	Reprint Local	Reprint Central
X	X	X	X	X	X

Mailing Requirements:

Mail-To (Recipient): Primary Applicant for the CalFresh Program

Mailed From (Return): District Office Address

Mail-back-to Address: N/A

Outgoing Envelope Type: Standard

Return Envelope Type: N/A

Additional Requirements:



Special Paper Stock: N/A

Enclosures: N/A

Electronic Signature: No

Post to YBN/C4Y: Yes

4 SUPPORTING DOCUMENTS

Ref #	Document	Functional Area	Description	Attachment
1	CF 29A (2/14) MOCKUP	CF	Mockup of CF 29A (2/14)	 CF 29A MOCKUP
2	CF 29A (2/14) PDF	CF	PDF of CF 29A (2/14) as currently accessible through CA.gov	 CF 29A - CA.gov

5 REQUIREMENTS

5.1 Project Requirements

REQ #	REQUIREMENT TEXT	How Requirement Met
CAR-1208	The [CalSAWS] shall accommodate and generate State-mandated forms, notices, and NOAs that cannot be changed.	CalSAWS and C-IV will add state form CF 29A (2/14) in fulfillment of policy ACL 14-20.
CAR-1239	The LRS shall produce various notices, NOAs, forms, letters, stuffers, and flyers, including: a. Appointment notices b. ... (cont.)	CF 29A (2/14) Initial Appointment Letter is an appointment notice, and shall be produced by CalSAWS.

6 MIGRATION IMPACTS

N/A

7 OUTREACH

N/A

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