

CRFI 20-003 Imaging - County Documents and Forms Indexing Response

													County Responses				Recommendation		
County	C W	C F	M C	G / R	W T	C C	F C	A P	K G	g s	U I	G e n e r a l	Document Number	Document Name	Description of Document/Form Content	Business Process Reason	Number/comment	Name	Form Names
																(What is the form used for and the reason document cannot be indexed to a CalSAWS Document)			
Ventura								x					56-04-041	Adoptions and Safe Family Act Court Findings Worksheet	Worksheet; contains court order details; removal information	Created by CBS at removal and updated at each renewal; used to track court order findings that are required every 12 months for state and federal eligibility - No Match	Other county drawer - AAP New Rec.	Program Budgets & Worksheets	AAP - Budget or Worksheet
Orange								x					F063-29-38	Adoption and Safe Family Act/ASFA Court Findings Worksheet	Adoption and Safe Family Act Court Findings Worksheet	Form not available from the state. Used for tracking compliance of initial court findings required for all state and federal FC cases	Other county drawer - AAP New Rec.	Program Budgets & Worksheets	AAP - Budget or Worksheet
Santa Clara								x					SCD 23 A	AAP Eligibility Checklist	Application	Application related documents; existing CalSAWS documents are too specific to index to. In order to meet county needs we need generic categories	Other county drawer - AAP New Rec.	AAP Worker Use-Program Checklists	AAP - Worker Use Checklists
Los Angeles													DCFS 6030	AAP Intake Checklist	Checklist of case	Eligibility determination.	Other county drawer - AAP New Rec.	AAP Worker Use-Program Checklists	AAP - Worker Use Checklists
Los Angeles													DCFS 6031	AAP Reassessment Checklist	Checklist of case	Eligibility determination.	Other county drawer - AAP New Rec.	AAP Worker Use-Program Checklists	AAP - Worker Use Checklists
Placer													AD 4320	Adoptions (AAP) Agreement	Income		SCR CA-205264, Other county drawer - AAP	AAP	AAP Agreement
Santa Barbara								x					AD 4320	ADOPTIONS ASSISTANCE AGREEMENT	ADOPTIONS ASSISTANCE AGREEMENT	NEEDED STATE FORM NOT ON TIER 1 LIST USED IN ELIGIBILITY DETERMINATION	SCR CA-205264, Other county drawer - AAP	AAP	AAP Agreement
Ventura								x					56-09-889	Adoptions Assistance Program Reassessment Letter	Informing letter; contains case information	Prepared by case aid and mailed to adoptive family with reassessment packet - No Match	Other county drawer - AAP	AAP	AAP Reassessment
Orange								x					F063-29-56	Adoption Assistance Program/AAP Case Recording Sheet	AAP Reassessment Case Recording Sheet	Form not available from the state. Used by ET as a RRR checklist to ensure all required documents/actions are in the case	Other county drawer - AAP	AAP	AAP Reassessment
Santa Clara								x	x				SCD 2385 AK	AAP/Kin-GAP RRR Coverletter	Redetermination/Recertification Documents	Form is used for RRR purposes; existing CalSAWS categories are too specific to processes not utilized at Santa Clara county. A general category is being requested	Other county drawer - AAP	AAP	AAP Reassessment
San Diego													09-77	ABAWD Discretionary Exemption Request Form	Req from HSS to Exempt ABAWD	Allows County to distribute discretionary ABAWDs exemptions	New Rec.	CFET Forms/Agreements	ABAWD
Alameda													63-63	Able-Bodied Adults Without Dependents Client Exemption Survey	ABAWD Exemption info	Form is used in a county-specific process	New Rec.	CFET Forms/Agreements	ABAWD
San Francisco	x												A100B	CalFresh Work Activity Requirements	Work Registrant/ABAWD Screening Form--Client Use Only	Client facing form for ABAWD exemption.	New Rec.	CFET Forms/Agreements	ABAWD
San Francisco	x												A104	Medical Exemption Form	Standard client verification form for clients to provide verification of clients mental/physical condition.	This is a county specific form, allowing clients to provide verification of a client's mental/physical condition which prevents them from meeting the ABAWD work activity requirement.	New Rec.	CFET Forms/Agreements	ABAWD
San Francisco	x												A105	Community Service Volunteer Verification Form	Standard client verification form for community service/volunteer hours verification.	This is a county specific form, allowing clients to provide verification of volunteer/community service hours associated with ABAWD work activity compliance.	New Rec.	CFET Forms/Agreements	ABAWD
San Francisco	x												A106	CHANGE IN WORKFARE HOURS	Client informing notice regarding the change in the number of workfare hours the household is required to complete.	This is a county specific form, informing ABAWD clients about the change in the number of workfare hours the household is required to complete.	New Rec.	CFET Forms/Agreements	ABAWD
Placer													ALL 1468	ABAWD Screening Sheet	Disability/Work Reg		New Rec.	CFET Forms/Agreements	ABAWD
Placer													ALL 584	ABAWD Work Program referral	Disability/Work Reg		New Rec.	CFET Forms/Agreements	ABAWD
Santa Clara	x												SCD 2495	ABAWD SCREENING AND CFET REFERRAL	CFET/CFES	Used to screen for ABAWD exemption and referral to CFET; existng CalWIN Documents do not meet this need	New Rec.	CFET Forms/Agreements	ABAWD
Santa Clara	x												SCD 2519	CALFRESH-ABAWD REQUEST FOR MEDICAL INFORMATION	Verification request	Form is used to request verification; existing CalSAWS categories are too specific to processes not utilized at Santa Clara county. A general category is being requested	New Rec.	CFET Forms/Agreements	ABAWD
Tehama	x												TEH 995	ABAWD Exemption Screening Tool	ABAWD Exemption Screening Tool	Specific to county business process	New Rec.	CFET Forms/Agreements	ABAWD
Butte					x								BU CW-208	NON-PARTICIPATING SECOND PARENT	NON-PARTICIPATING SECOND PARENT	NON-PARTICIPATING SECOND PARENT	New Rec.	Supporting CW Forms	Absent Parent
Initial - Kern													KCDHS 634-Serv	Parent's Questionnaire			New Rec.	Supporting CW Forms	Absent Parent
San Diego			x	x									11-93 HHSA	Alternative Job Traning Enrollment/Attendance Verification	verification of attendance or enrollment in an alternate program for job training	No CalSAWS document - County specific instructions	New Rec.	WTW Forms	Activity Attendance

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Los Angeles																			SOC 369	Agency-Relative Guardianship Disclosure	Agreement to Kin-Gap	Eligibility determination.	New Rec.	KG Forms	Agency-Relative Guardianship Disclosure	
Stanislaus																			SOC 369	Agency Relative Gaudianship Disclosure	Gguardsianship	Required form for relative prior to established guardianship for KinGAP. This Form is not listed on Forms List	New Rec.	KG Forms	Agency-Relative Guardianship Disclosure	
																						Is the voucher imaged before giving it to the customer?				
Placer																			Ancillary Voucher	Ancillary Voucher	WTW Supportive Services		New Rec.	WTW Agreements, Assessments, etc.	Ancillary Services	
Placer																			P-09	Ancillary tracking	WTW Supportive Services		New Rec.	WTW Agreements, Assessments, etc.	Ancillary Services	
Placer																			P-17	Request to Pay Ancillary Expense	WTW Supportive Services		New Rec.	WTW Agreements, Assessments, etc.	Ancillary Services	
Alameda																			x	10-13	Application Registration Request	Used for Application Registration Info	Form is used in a county-specific process	New Rec.	Application, Intake, or Screening	Application Clearance Sheet
Alameda																			x	10-7	Application Information Sheet	Application Summary of information	Form is used in a county-specific process	New Rec.	Application, Intake, or Screening	Application Clearance Sheet
																				collects applicant and household information when an application is submitted	gathers information prior to beginning the application in SAWS/no match to CalSAWS, no match					
Ventura																			x	56-00-134	Applicant Data Sheet (Buffy)		New Rec.	Application, Intake, or Screening	Application Clearance Sheet	
Ventura																				56-04-045	Children and Family Services Data Sheet.	Contains necessary information to sent up case file in CalWIN	Created by CBS and sent to support staff for initial case set up; this would need to be revised for Cal SAWS - No Match	New Rec.	Application, Intake, or Screening	Application Clearance Sheet
Butte																				BU 297	HH Fact sheet	Gathers information on members of the HH to aid eligibility	This aids in eligiblity infle clearance and hh composition	New Rec.	Application, Intake, or Screening	Application Clearance Sheet
Butte																			x	BU 297	Household Fact Sheet	Contains additional HH member information not requested on the SAWS 1	Used to file clear and pend additional required HH members	New Rec.	Application, Intake, or Screening	Application Clearance Sheet
San Mateo																			x	C-675	Application Clearance Sheet	C-675 Application Clearance Sheet	Multiple - San Mateo required form. No match found from CalSAWS.	New Rec.	Application, Intake, or Screening	Application Clearance Sheet
																					Used to completed file clearance and request case number at application. No comparable form.					
Riverside																				CSD 3598	C-IV Case Number Request to Foster Care	Request case number at application		New Rec.	Application, Intake, or Screening	Application Clearance Sheet
San Luis Obispo																			x	DSS GEN 313	Reception Inquiry.docx	Information document completed by applicants for all programs. Collects applicant and HH members information	Collections information for application request for all programs. Used all all SLO Co. offices	New Rec.	Application, Intake, or Screening	Application Clearance Sheet
San Luis Obispo																			x	DSS GEN 314	Reception Information Request.docx	Information document completed by applicants for all programs. Collects applicant and HH members information	Collections information for application request for all programs. Used all all SLO Co. offices - continuation sheet for additional HH members	New Rec.	Application, Intake, or Screening	Application Clearance Sheet
Alameda																				FC 45-41	LG Application Clearance Sheet	FC form used for application registration	Form is specific to county Foster care program	New Rec.	Application, Intake, or Screening	Application Clearance Sheet
Initial - Kern																			x	KCDHS 568-Serv	Application Checklist	Application information supplemental to SAWS 1	No match in the provided CalSAWS document.	New Rec.	Application, Intake, or Screening	Application Clearance Sheet
Solano																			x	N/A	Applicant Clearance	Application information supplemental to SAWS 1	No match in the provided CalSAWS document.	New Rec.	Application, Intake, or Screening	Application Clearance Sheet
Solano																			x	N/A	Application Clearance Form	used to assist application registration	No match in the provided CalSAWS document.	New Rec.	Application, Intake, or Screening	Application Clearance Sheet
Sacramento																				SC 16	Information Clearance Sheet	Required form for intake packets for all programs	Required form in all intake packets, when returned needs to be imaged into case file and assigned to clerical for app reg process.	New Rec.	Application, Intake, or Screening	Application Clearance Sheet
Tehama																			x	TEH 827	Application Triage Form (English/Spanish)	Application Triage Form	Specific to county business process	New Rec.	Application, Intake, or Screening	Application Clearance Sheet
Tehama																			x	TEH 852	Application by Phone	Application by Phone	Specific to county business process	New Rec.	Application, Intake, or Screening	Application Clearance Sheet
Santa Barbara																				W 426	COUNTY INQUIRY INFORMATION SHEET	CLIENT CLEARING INFORMATION	INFORMATION USED TO CORRECTLY ASSIGN CLIENTS TO CASES	New Rec.	Application, Intake, or Screening	Application Clearance Sheet
Los Angeles																				OCAT-ASR	Appraisal Summary and Recommendations		No possible map found in listing	New Rec.	WTW Agreements, Assessments, etc.	Appraisal Summary
Placer																				OCAT-Online CW Appraisal Tool	OCAT-Online CW Appraisal Tool	WTW Intake/Ore		New Rec.	WTW Agreements, Assessments, etc.	Appraisal Summary
Tulare																				1901-TW	Participant Appraisal Information and Work History	Work history for WTW Participants	The participant is required to complete this form to indicate what their Education and Work history is so that this can be used for job searching. There is no form on the CalSAWS listing that has information close to what this form is requesting	New Rec.	WTW Forms	Appraisal Summary
Alameda																				42-92	WTW Employability Social or Health Issues Self-Appraisal	Self-Appraisal form for WTW clients	Form is used in a county-specific process	New Rec.	WTW Forms	Appraisal Summary
Placer																				ALL 1356	CalWORKs Intake Appraisal	WTW Intake/Ore		New Rec.	WTW Forms	Appraisal Summary
Riverside																										
Contra Costa																				DPSS 3523	Appraisal Information	Customer info to complete WTW appraisal	Record customers information: employment, education, SIP, Skills, strengths and needs.	New Rec.	WTW Forms	Appraisal Summary
																				WTWCC 3	WTW Self-Appraisal			New Rec.	WTW Forms	Appraisal Summary
Tulare																				1991	CalMAP: Taking a look at the whole picture so we can best serve you	Assesment for clients life areas	This form indicates either areas of significant need or areas of stability in client's life. This allows wokers to focus in on those areas that may have a higher priority. There is no form on the CalSAWS listing that has information close to what this form is requesting	New Rec.	WTW Forms	Assessment
Tulare																				1924 TW	TulareWORKs - Assessment Form	Assesment of clients Employment Goals and potential barriers	This form is completed by the worker to indicate what the clients assesment test results are and their employment goals and potential barriers for the WTW program. There is no form on the CalSAWS listing that has information close to what this form is requesting	New Rec.	WTW Forms	Assessment

Ventura																	56-08-153	Personally Identifiable Information Authorization to Release Information	Authorization for HSA to release PII to health care providers	Authorization for County Human Services Agency to release PII to health care provider - No Match	New Rec.	Other Contact Authorization Forms	Authorization for County to Release Information	
Placer																x	ALL 1457	AMIH Release of Information	Homeless		New Rec.	Other Contact Authorization Forms	Authorization for County to Release Information	
Stanislaus																x	CSA 1	Multi-Agency Consent to Release and Exchange Information	Inter County - Dept. Sharing of Information	Inter County Use. This is not an ABDCM 228	New Rec.	Other Contact Authorization Forms	Authorization for County to Release Information	
Stanislaus																x	CSA 2	Multi-Agency Consent to Release and Exchange Information Revocatoion Form	Inter County - Dept. Sharing of Information	Revoke Consent for Inter County Use of Multi Agency Release and Exchange of Information	New Rec.	Other Contact Authorization Forms	Authorization for County to Release Information	
Riverside	x																DPSS 228 HVP	CalWORKS Home Visiting Program (HVP) Authorization for Release of Information	Customer acknowledges release of info	used to allow DPSS to communicate customer information with RUHS - PH.	New Rec.	Other Contact Authorization Forms	Authorization for County to Release Information	
Initial - Kern																	KCDHS 166-HG	Heart Gallery -- Photographer's Statement of Agreement			New Rec.	Other Contact Authorization Forms	Authorization for County to Release Information	
San Mateo		x															PCG SSA-827	PCG SSA-827 Authorization to Disclose Information to the SSA	PCG SSA-827 Authorization to Disclose Information to the SSA	GA- San Mateo required form. No match found from CalSAWS.	New Rec.	Other Contact Authorization Forms	Authorization for County to Release Information	
Tehama																x	TEH 881	Request and Authorization to Share Information Electronically	ROI for Electronic Sharing	ROI for Electronic Sharing	New Rec.	Other Contact Authorization Forms	Authorization for County to Release Information	
Los Angeles																	WPC 001	Authorization for the Use and Disclosure of Health and Social Service Information	Allows DPSS to share MC PII information with DHS and/or LASD when a MC beneficiary is an inmate in the Los Angeles County jail or participant in the WPC program.	No possible map found in listing	New Rec. New Rec.	Other Contact Authorization Forms Jail/Inmate Forms and Notices	Authorization for County to Release Information	
San Diego																	09-104	CalFresh Success Consent for Release of Confidential Information	Consent for releae of confidential information	Fresh Success release of information, college records, Fresh Success records E&T record	New Rec.	Other Contact Authorization Forms	Authorization for Other Agency to Release Information	
San Diego																x	16-158	Voluntary Conset for the Work Number (WN)	Grants authorization for county to view the Work Number for employment verification	Allows for additional household members to authorize the use of the Work Number to verify employment	New Rec.	Other Contact Authorization Forms	Authorization for Other Agency to Release Information	
Solano																x	48-70-228MR	Release of Information to GA unit	Release of Onformation specific to GA cases	No match in the provided CalSAWS document.	New Rec.	Other Contact Authorization Forms	Authorization for Other Agency to Release Information	
Riverside																	DPSS 4662	Vulnerability Index Decision Assistance Tool	Program info & customer consent	FSS ESC obtain customer consent & acknowledgement of Homeless Management Info System	New Rec.	Other Contact Authorization Forms	Authorization for Other Agency to Release Information	
Sutter	x																HMIS	Authorization form	release	Allows staff to gather information for HMIS	New Rec.	Other Contact Authorization Forms	Authorization for Other Agency to Release Information	
Sonoma																	HSD 990	SRJC CalWORKS Program Student Release of Information	Release of Information for SRJC/CalWORKS student	This form is specific to our partnership with Santa Rosa Junior College	New Rec.	Other Contact Authorization Forms	Authorization for Other Agency to Release Information	
Santa Clara																	x	SCD 2263	Consent to Release Public Assistance Information for Health Services Reimbursement	Verification request	Form is used to request verification; existing CalSAWS categories are too specific to processes not utilized at Santa Clara county. A general category is being requested	New Rec.	Other Contact Authorization Forms	Authorization for Other Agency to Release Information
Stanislaus																	x	STAN GEN 111 A	Applicant's Authorization for Release of Information	Vitals Records Request: Birth, Death, Marriage, Divorce, Other	Used when vital records are needed from a County Clerk Recorder Office that are not certified. Similar Form Not found on Forms List	New Rec.	Other Contact Authorization Forms	Authorization for Other Agency to Release Information
Stanislaus																	x	STAN GEN 30	Authorization to Release and Obtain Information from Equifax/TALX	Authorization to Release Secific Information	To obtain information from Federal State and Government Databases. Unable to locate similar document for obtaining specific information stored in specific data bases. Similar Form not listed on the Forms List	New Rec.	Other Contact Authorization Forms	Authorization for Other Agency to Release Information
San Luis Obispo																		DSS828	Communication between DSS and Behavioral Health.docx	communication tool for shared client information	Document communication between County departments, no equivalent	New Rec.	Behavioral/Mental Health Forms	Behavioral/Mental Health Form
Los Angeles																		GN 6395	Mental Health Substance Abuse Use Disorder Treatment for Children Provider Referral Mental Health Substance Use Disorder Treatme	Form used to refer children of participants enrolled in Family Stabilization to Treatment Services provider and for providers to record the results.	No possible map found in listing	New Rec.	Behavioral/Mental Health Forms	Behavioral/Mental Health Form
Los Angeles																		GN 6396	Mental Health Substance Abuse Use Disorder Treatment for Children Service Provider Progress Report	Quarterly progress report for children of participants enrolled in Family Stabilization who are receiving treatment services.	No possible map found in listing	New Rec.	Behavioral/Mental Health Forms	Behavioral/Mental Health Form
Initial - Kern																		KCDHS 698-GA	Mental Health Information Flyer			New Rec.	Behavioral/Mental Health Forms	Behavioral/Mental Health Form
Los Angeles	x																	PA 1933	CalWORKS Mental Health Screening Instrument		No possible map found in listing	New Rec.	Behavioral/Mental Health Forms	Behavioral/Mental Health Form
Sacramento																		SC 267 FS	FS Drug-Alcohol Treatment Center Departure Report	Report provided from the drug and alcohol program	report provided from the drug and alcohol program , should be imaged into case for record keeping	New Rec.	Behavioral/Mental Health Forms	Behavioral/Mental Health Form
Tehama	x																	TEH WTW 636D	CalWORKS Referral Form	Referral to Behavior Health	Local provider specific referral	New Rec.	Behavioral/Mental Health Forms	Behavioral/Mental Health Form
Tehama																		TEH WTW 78	Partner Agency Monthly Treatment Report	Behavior Health Verification	Behavior Health verification/attendance	New Rec.	Behavioral/Mental Health Forms	Behavioral/Mental Health Form
Tulare																		611-G	Verification of Indigent Cremation	Cremation Payment Authorization	Form is used to certify that Tulare County HHSA has authorized a payment for cremation. There is no form on the CalSAWS listing that has information close to what this form is requesting	New Rec.	Burial/Cremation Forms	Burial/Cremation Form
Tulare																		618-G	Application for Indigent Burial	Application for Cremation	Application for Indigent Burial. There is no form on the CalSAWS listing that has information close to what this form is requesting	New Rec.	Burial/Cremation Forms	Burial/Cremation Form

Tulare				x													619-G	Request for Approval of Excess Burial Expense	Request for Excess Funds for Burial	When the deceased does not have a plot and the county owned burial plot is not available, this form is completed to have them buried elsewhere. There is no form on the CalSAWS listing that has information close to what this form is requesting	New Rec.	Burial/Cremation Forms	Burial/Cremation Form
Tulare				x													628-G	Cremation Approval	Cremation Approval	This is a notice that is sent to the client when their application for cremation has been approved. There is no form on the CalSAWS listing that has information close to what this form is requesting	New Rec.	Burial/Cremation Forms	Burial/Cremation Form
Tulare				x													629-G	Indigent Burial Denial	Indigent Burial Denial	This is a notice that is sent to the client when their application for Indigent Burial has been denied. There is no form on the CalSAWS listing that has information close to what this form is requesting	New Rec.	Burial/Cremation Forms	Burial/Cremation Form
Tulare				x													630-G	Indigent Burial Income-Resource Financial Eligibility Worksheet	Indigent Burial Budget	This is a budget that is completed to determine if the client is eligible to receive Indigent Burial Services. There is no form on the CalSAWS listing that has information close to what this form is requesting	New Rec.	Burial/Cremation Forms	Burial/Cremation Form
Placer															x		ALL 680	Burial Assets	Property/Liens		New Rec.	Burial/Cremation Forms	Burial/Cremation Form
San Luis Obispo				x													DSS GA 200.4	County Cremation Responsible Relative Information.docx	GA cremation research and fact finding	Worker tool to screen relatives for potential payment of cremation costs. County specific tool	New Rec.	Burial/Cremation Forms	Burial/Cremation Form
San Luis Obispo				x													DSS GA 300	Cremation Cost Determination.docx	Worker determination tool to determine which party is responsible to pay for cremation costs.	County specific tool created.	New Rec.	Burial/Cremation Forms	Burial/Cremation Form
San Luis Obispo				x													DSS GA 310	GA Cremation Reimbursement Request.docx	Contact letter to request cremation reimbursement.	Workers mail out letter informing family of the cost of cremation and requesting repayment. County specific form	New Rec.	Burial/Cremation Forms	Burial/Cremation Form
San Luis Obispo				x													DSS GA 36	Request for County Cremation.docx	Documentation of facts and research when County cremation has been requested	Worker tool to review and document if County is responsible for payment of cremation.	New Rec.	Burial/Cremation Forms	Burial/Cremation Form
San Luis Obispo				x													DSS GA 239	County Cremation Approval Notice.docx	County specific GA approval NOA	County created NOA action. For use outside of CalWIN and imaged	New Rec.	Manual <Program> NOA Burial/Cremation Forms	Burial/Cremation Form
San Luis Obispo				x													DSS GA 311	County Cremation Denial Notice.docx	County specific GA NOA	County created NOA action. For use outside of CalWIN and imaged	New Rec.	Manual <Program> NOA Burial/Cremation Forms	Burial/Cremation Form
Ventura															x		56-06-014	Bus Tokens/Passes Receipt	Transportation receipt	Proof of advance payment-no match	New Rec.	Transportation Forms	Bus Pass
Butte				x													BU 504	Bus Pass Authorization	Bus Pass Request Form	Bus pass request form	New Rec.	Transportation Forms	Bus Pass
Initial - Kern																	KCDHS 269-Gen	Bus Pass Postcard			New Rec.	Transportation Forms	Bus Pass
Riverside								x									DPSS 2720	Parent/Caretaker Agreement	Parent/Caretaker R&R	Used by CalLearn workers to communicate with DPSS staff to impose sanctions and penalties	New Rec.	CalLearn Agreements and Forms	Cal-Learn Agreement
Tehama				x													TEH CL 1	Voluntary Agreement to Remain in Cal Learn	CalLearn Voluntary Agreement	CalLearn voluntary agreement	New Rec.	CalLearn Agreements and Forms	Cal-Learn Agreement
Merced				x													24-3349	Cal-Learn Needs Assessment Tool	A questionnaire to determine participants needs and barriers during the Cal-Learn Assessment	This form is used by the county to determine the needs and barriers to determine Supportive Services needed at the initial Cal-Learn Assessment. There are no Cal-Learn or WTW Assessment options available in the provided CalSAWS list.	New Rec.	CalLearn Agreements and Forms	Cal-Learn Assessment
Butte				x													NO NUMBER	Comprehensive Baseline Assessment	Cal Learn	Assessment for new CL participants (CAL LEARN)	New Rec.	CalLearn Agreements and Forms	Cal-Learn Assessment
Tehama				x													TEH CL 4	Cal Learn Comprehensive Baseline Assessment	Cal Learn Comprehensive Baseline Assessment	Cal Learn Comprehensive Baseline Assessment	New Rec.	CalLearn Agreements and Forms	Cal-Learn Assessment
Yolo				x													YC 33	Cal-Learn Comprehensive Baseline Assessment	In-depth assessment (questionnaire) similar to that used by AFLP providers for CL.	Yolo County does not contract out CL services. Assessment required by CL program.	New Rec.	CalLearn Agreements and Forms	Cal-Learn Assessment
Alameda				x													42-CL03	Cal-Learn Service Providers (SP) Authorization of Supportive Services	Communication form	Form is used in a county-specific process	New Rec.	CalLearn Agreements and Forms	Cal-Learn Authorization
Santa Clara				x													SCD 48	Consent Form (AFLP)	Client Request/Agreement	This form is a client request or agreement; county business needs require a generic category: existing CalSAWS documents do contain a general request and/or agreement	New Rec.	CalLearn Agreements and Forms	Cal-Learn Authorization
Tehama				x													TEH CL 2	Cal Learn Authorization Release	Release of information for CalLearn	ROI for CalLearn Program - no state form	New Rec.	CalLearn Agreements and Forms	Cal-Learn Authorization
Tehama				x													TEH CL 8	Cal Learn Supportive Services Authorization	Cal Learn Supportive Services Authorization	Cal Learn Supportive Services Authorization	New Rec.	CalLearn Agreements and Forms	Cal-Learn Authorization
Initial - Santa Cruz				x													WEL3314	Cal-Learn Auth Voucher	Cal-Learn Auth Voucher		New Rec.	CalLearn Agreements and Forms	Cal-Learn Authorization
Yolo				x													YC 445N	Cal-Learn Consent Form	Consent from CL participant to contact HS.	Yolo County does not contract out CL services. Often need to contact school to confirm attendance.	New Rec.	CalLearn Agreements and Forms	Cal-Learn Authorization
Butte				x													BU 74	Report Card Bonus	Cal Learn	CL participant making progress in school earns a monetary bonus (CAL LEARN)	New Rec.	CalLearn Agreements and Forms	Cal-Learn Bonus
Placer				x													M42-69	Cal-Learn bonus			New Rec.	CalLearn Agreements and Forms	Cal-Learn Bonus
Los Angeles				x													NS-SUPP025	Bonus Sanction Adequate Recommendation from Cal-Learn Contractors		No possible map found in listing	New Rec.	CalLearn Agreements and Forms	Cal-Learn Bonus
Alameda				x													42-CL02	Alameda County Cal-Learn Program Interagency Communication Form	Cal-Learn Interagency Communication Form	Form is used in a county-specific process	New Rec.	CalLearn Agreements and Forms	Cal-Learn Communication
Contra Costa				x													CLDC 1	Cal-Learn Monthly Case Management Contact			New Rec.	CalLearn Agreements and Forms	Cal-Learn Communication

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Merced																	24-4183C	GA Intake Log	Log for documenting GA applications	Intake Worker completes report that provides information about each client that applies for GA - Do not see similar form	Is this imaged? Or just a record?	Application, Intake, or Screening	Case Assignment and Tracking
San Mateo			x														C-289	Medi-Cal Case Transfer Checklist	C-289 Medi-Cal Case Transfer Checklist	MC- San Mateo required form. No match found from CalSAWS.	New Rec.	Application, Intake, or Screening	Case Assignment and Tracking
San Mateo			x														C-674	TCF TMC Transfer Checklist 1012	C-674 TCF TMC Transfer Checklist 1012	CF- San Mateo required form. No match found from CalSAWS.	New Rec.	Application, Intake, or Screening	Case Assignment and Tracking
San Luis Obispo																x	DSS GEN 163	Universal Consult Guide.docx	Generic program consult guide at time face to face consult. - All programs	County created tool to track consult conversation and referral to programs. County created worker tool. Required for all face to face consults. Summary for assigned worker	New Rec.	Application, Intake, or Screening	Case Assignment and Tracking
San Luis Obispo																x	DSS GEN 164	Consult Research for Medical Coverage.docx	Tracking document for MC, CalHEERS, Covered CA history for applicants	County created tool to track medical coverage history. Helps determine which case numbers to link to existing or issuing new case numbers.	Is this imaged to a specific case?	Application, Intake, or Screening	Case Assignment and Tracking
Initial - Kern																x	KCDHS 40.1-Gen	Assignment Sheet			New Rec.	Application, Intake, or Screening	Case Assignment and Tracking
San Francisco																	N/A	Face Sheet Appeals unit	County form	This form documents Intakes for the Appeals Unit	New Rec.	Application, Intake, or Screening	Case Assignment and Tracking
Alameda				x													42-54	Clean Slate Referral Form	Clean Slate Referral Form	Form is used in a county-specific process	New Rec.	Non-Fraud Referral or Request	CBO/FBO/Local Partner Referral
Ventura																	56-03-346	Tribal TANF Case Tranfer Summary	TRIBAL TANF communication	Used to communicate and send case documents between HSA and OCVCDC. No match	New Rec.	Non-Fraud Referral or Request	CBO/FBO/Local Partner Referral
Ventura																	56-03-347	Tribal TANF Case Information Transmittal	TRIBAL TANF communication	Used to communicate case specific information between HSA and OCVCDC. No match	New Rec.	Non-Fraud Referral or Request	CBO/FBO/Local Partner Referral
Ventura																	56-06-617	Expanded Subsidized Employment (ESE) Referral	Referral	Referral to ESE-No match	New Rec.	Non-Fraud Referral or Request	CBO/FBO/Local Partner Referral
Tehama				x														Corning Family Resource Center Referral Form	Referral to Local Partner Agency	Referral to local partner agency	New Rec.	Non-Fraud Referral or Request	CBO/FBO/Local Partner Referral
Riverside						x											DPSS 4162	Continuation of Services for 11 and 12 Year Olds	Referral informing to other provider agency	DPSS correspondence to external agency re: CC	New Rec.	Non-Fraud Referral or Request	CBO/FBO/Local Partner Referral
Tehama					x												NVCSS Referral Form	NVCSS Referral Form	Referral to Local Partner Agency	Referral to local partner agency	New Rec.	Non-Fraud Referral or Request	CBO/FBO/Local Partner Referral
Napa																	SSSD 1018	Cope Family Center Referral			New Rec.	Non-Fraud Referral or Request	CBO/FBO/Local Partner Referral
San Bernardino																	TAD WTW FS 10	Tattoo Removal - Referral form	referral for Tattoo removal at local hospital	allows for list of tattoos and approval/denial of services -no comparable form	New Rec.	Non-Fraud Referral or Request	CBO/FBO/Local Partner Referral
Tehama				x													TEH WTW 108	LD Eval Referral	Learning Disability Referral	LD referral to local partner	New Rec.	Non-Fraud Referral or Request	CBO/FBO/Local Partner Referral
Tehama					x												TEH WTW 11	ABE GED and VESL Referral	Education Referral	Local education provider specific form	New Rec.	Non-Fraud Referral or Request	CBO/FBO/Local Partner Referral
Tehama						x												Subsidized Employment Referral- Express Professionals	Referral to Local Subsidized Partner	Referral to local partner for subsidized employment	New Rec.	Non-Fraud Referral or Request	CBO/FBO/Local Partner Referral
Tehama					x												TEH WTW 92	Residential Treatment Referral	Referral to Local Partner Agency	Referral to local partner agency	New Rec.	Non-Fraud Referral or Request	CBO/FBO/Local Partner Referral
Initial - Santa Cruz																x	WEL1267	Third Party Query Request Form	Third Party Query Request Form		New Rec.	Non-Fraud Referral or Request	CBO/FBO/Local Partner Referral
San Diego				x													09-43	CalFresh Claim Determination Worksheet and Benefit Recovery Status	Case Outstanding Overissuances and Referral to Revenue and Recovery for Collection	Referring Outstanding Overissuances to R&R after the case terminates	New Rec.	Program Budgets & Worksheets	CF - Budget or Worksheet
San Diego				x													14-123	MAGI Budget Worksheet	Manual Budget	Used to compute eligibility to ensure system is correct	New Rec.	Program Budgets & Worksheets	CF - Budget or Worksheet
Ventura				x													56-02-004	Financial Aid Computation Worksheet	Financial Aid Computation Worksheet	Worksheet to determine net countable educational income-No match	New Rec.	Program Budgets & Worksheets	CF - Budget or Worksheet
Ventura				x													56-02-058	CalFresh Proration Worksheet (05/19)	CalFresh Proration Worksheet	Worksheet to determine the prorated amount allocated to the eligible CFHH-No match	New Rec.	Program Budgets & Worksheets	CF - Budget or Worksheet
Ventura				x													56-02-154	CalFresh Disaster Response- Excluded Household Member Proration Worksheet	Excluded Household Members Proration Worksheet for Disaster CalFresh	Worksheet to determine the prorated amount allocated to the Disaster CalFresh case. No Match.	New Rec.	Program Budgets & Worksheets	CF - Budget or Worksheet
Ventura				x													56-02-156	CalFresh Medical Deduction Worksheet (08/19)	Medical Deduction Worksheet	Worker tool used to collect types of medical deduction and to calculates allowable medical deductions. No match.	New Rec.	Program Budgets & Worksheets	CF - Budget or Worksheet
Ventura				x													56-02-159	CalFresh Benefit Replacement Worksheet	Benefit Replacement Worksheet	Calculates the number of days and amount of replacement benefits- No match	New Rec.	Program Budgets & Worksheets	CF - Budget or Worksheet
Ventura				x													56-02-160	CalFresh Work Registration Exemption Determination Worksheet (01/20)	Work Registration Exemption Determination Worksheet	Worksheet for worker to determine which Work Registration exemptions the client meets. No match	New Rec.	Program Budgets & Worksheets	CF - Budget or Worksheet
Ventura				x													56-27-004	WINS Employment Hours (11/15)	Form for client to report work hours on a daily basis by month, to help evaluate for WINS	QC form to report work hours on a daily basis by month, for WINS evaluation. No match	New Rec.	Program Budgets & Worksheets	CF - Budget or Worksheet
Alameda				x													63-52	expedited Services Calfresh (ESCF) Worksheet	NMD form calculating how much CF they will get. EST worksheet for expedited services	Form is specific to county Extended Foster Care Program	New Rec.	Program Budgets & Worksheets	CF - Budget or Worksheet
San Luis Obispo				x													DSS CF 515	CalFresh Income Proration Worksheet for Participants.docx	Proration worksheet of income by month	Recipients can calculate prorated income for ineligibility CF HH members to determine IRT. No equivalent. Used to verify CalWIN eligibility	New Rec.	Program Budgets & Worksheets	CF - Budget or Worksheet
San Luis Obispo				x													DSS CF 517	CalFresh Income Proration.docx	Proration worksheet of income for eligible and ineligible HH members.	Workers can calculate prorated income for CF HH members. No equivalent and used to verify CalWIN eligibility.	New Rec.	Program Budgets & Worksheets	CF - Budget or Worksheet
San Luis Obispo				x													DSS CF 517-B	CalFresh Expense Proration.docx	Proration worksheet of expenses for eligible and ineligible HH members.	Workers can calculate prorated expenses for CF HH members. No equivalent and used to verify CalWIN eligibility.	New Rec.	Program Budgets & Worksheets	CF - Budget or Worksheet
Sutter				x													SU492	Addendum to Work Quarters	A manual worksheet used to determine qualifying quarters for documented non-citizens. Could not find any appropriate manual worksheets listed in the provided list.	A manual worksheet used to determine qualifying quarters for documented non-citizens. Could not find any appropriate manual worksheets listed in the provided list.	New Rec.	Program Budgets & Worksheets	CF - Budget or Worksheet

Sacramento																		CF 1010_34F	Quality Control CalFresh Interview Checklist	CalFresh interview checklist - QC	Used by a QC EW during a QC interview as a checklist	New Rec.	Worker Use-Program Checklists	CF - Worker Use Checklists
Sacramento																		CF 1012_34F	CalFresh Recertification Review Checklist	Used internal for full case review	A checklist used to conduct a full case review, should be imaged into case for record keeping	New Rec.	Worker Use-Program Checklists	CF - Worker Use Checklists
Initial - Kern	x																	KCDHS 241-CF	Excluded Household SSI/SSP Recipient (CalFresh)			New Rec.	Worker Use-Program Checklists	CF - Worker Use Checklists
Sacramento																		SC 316	Manual Tracking Form for Lomeli AE Claims	Manual tracking for AE claims	not specific for any case, does not need to be imaged	New Rec.	Worker Use-Program Checklists	CF - Worker Use Checklists
Santa Clara																	x	SCD 2550	Medical Deduction/Dependent Care Checklist	Income & Expense	form for clients to record and report deduction dependent care costs; existing CalSAWS documents do meet this need	New Rec.	Worker Use-Program Checklists	CF - Worker Use Checklists
San Bernardino	x																	TAD CF 711	CalFresh Employment and Training Checklist	Checklist	Used to determine E&T eligibility - no comparable form	New Rec.	Worker Use-Program Checklists	CF - Worker Use Checklists
Placer																		Transitional FS Checklist	Transitional FS Checklist	Correspondence		New Rec.	Worker Use-Program Checklists	CF - Worker Use Checklists
San Diego	x																	09-107	CalFresh E&T Plan Activity Assignment	CF E&T plan activity assignment	to meet E&T requirement	New Rec.	CFET Forms/Agreements	CFET Activities and Supporting Verification
Ventura	x																	56-02-114	CalFresh Employment & Training Program Job Verification	CalFresh Employment & Training Program Job Verification	Job Search Verification Letter-No Match	New Rec.	CFET Forms/Agreements	CFET Activities and Supporting Verification
Alameda			x															90-247	GA/FSET Drug and Alcohol Verification Informational Notice	GA Information notice to client	Form is specific to county General Assistance program	New Rec.	CFET Forms/Agreements	CFET Activities and Supporting Verification
Alameda	x		x															90-256	CalFresh E&T Verification of Participation from CBO	GA CalFresh E&T Verification of Participation from CBO	Form is specific to county General Assistance program	New Rec.	CFET Forms/Agreements	CFET Activities and Supporting Verification
Alameda			x															90-67	Education Training Program Verification	GA Request for information from school/training program	Form is specific to county General Assistance program	New Rec.	CFET Forms/Agreements	CFET Activities and Supporting Verification
Placer	x																	GREAT 15	CF Program Unpaid Comm Vol Hrs	CFET	This form is customized to our CF E&T Program	New Rec.	CFET Forms/Agreements	CFET Activities and Supporting Verification
Placer	x																	GREAT 36	Employer Contact Log	CFET	This form is customized to our CF E&T Program	New Rec.	CFET Forms/Agreements	CFET Activities and Supporting Verification
Placer	x																	GREAT 7	Community Volunteer Time Card	CFET	This form is customized to our CF E&T Program	New Rec.	CFET Forms/Agreements	CFET Activities and Supporting Verification
Sonoma	x																	HSD579	Food Stamp Employment and Training (FSET) Reimbursement Form [579]	Food Stamp Employment and Training (FSET) Reimbursement Form [579]	FSET	New Rec.	CFET Forms/Agreements	CFET Activities and Supporting Verification
Santa Clara	x																	SCD 2499	CalFresh Employment Services Attendance Form	CFET/CFES	tracks CFET activity attendance; existing CalWIN Documents do not meet this need	New Rec.	CFET Forms/Agreements	CFET Activities and Supporting Verification
Ventura	x																	56-02-072	CalFresh Employment & Training Program Cooperation Plan	E&T Program Agreement	E&T Agreement Plan-No Match	New Rec.	CFET Forms/Agreements	CFET Agreement/Plan
Alameda	x																	90-10	CalFresh E&T Program Requirements	GA CalFresh E&T agreement	Form is specific to county General Assistance program	New Rec.	CFET Forms/Agreements	CFET Agreement/Plan
Alameda	x		x															90-254	CalFresh E&T Consent Form	GA CalFresh E&T Consent Form for CBO's	Form is specific to county General Assistance program	New Rec.	CFET Forms/Agreements	CFET Agreement/Plan
Alameda	x		x															90-255	CalFresh E&T Employment Plan	GA CalFresh E&T Employment Plan	Form is specific to county General Assistance program	New Rec.	CFET Forms/Agreements	CFET Agreement/Plan
Santa Barbara				x														E 41A	FSET PARTICIPATION AGREEMENT	FSET PARTICIPATION AGREEMENT	NEEDED FORM NOT ON TIER 1 LIST	New Rec.	CFET Forms/Agreements	CFET Agreement/Plan
Placer	x																	GREAT 1	Comm Volunteer Participation Agmt	CFET	This form is customized to our CF E&T Program	New Rec.	CFET Forms/Agreements	CFET Agreement/Plan
Placer	x																	GREAT 2	Referral and Participation Agmt	CFET	This form is customized to our CF E&T Program	New Rec.	CFET Forms/Agreements	CFET Agreement/Plan
Santa Clara	x																	SCD 1656	CalFresh Employment and Training Program - Participation Agreement	Client Request/Agreement	This form is a client request or agreement; county business needs require a generic category; existing CalSAWS documents do contain a general request and/or agreement contains client CFET Activity plan; existing CalWIN Documents do not meet this need	New Rec.	CFET Forms/Agreements	CFET Agreement/Plan
Santa Clara	x																	SCD 2535	CFES Activity Assignment Plan	CFET/CFES		New Rec.	CFET Forms/Agreements	CFET Agreement/Plan
Tehama				x														TEH WTW 72	FSP Participant Agreement Form	FSP Agreement	FSP agreement	New Rec.	CFET Forms/Agreements	CFET Agreement/Plan
Tehama				x														TEH WTW 73	FSP Family Plan	FSP Plan	FSP plan	New Rec.	CFET Forms/Agreements	CFET Agreement/Plan
Ventura	x																	56-02-070	CalFresh Employment & Training Program Notice of Appointment	CalFresh Employment & Training Program Notice of Appointment	Workshop Appointment Letter-No Match	New Rec.	CFET Forms/Agreements	CFET Appointment
Ventura	x																	56-02-113	CalFresh Employment & Training Program Services Appointment Notice	CalFresh Employment & Training Program Services Appointment Notice	Assessment Appointment Letter-No Match	New Rec.	CFET Forms/Agreements	CFET Appointment
Alameda			x															90-248	GA/FSET Drug and Alcohol Treatment Appointment Letter	GA appointment letter	Form is specific to county General Assistance program	New Rec.	CFET Forms/Agreements	CFET Appointment
Alameda	x		x															90-253	CalFresh E&T Assessment Activity Appt letter	GA Appointment letter for CalFresh E&T Assessment Activity	Form is specific to county General Assistance program	New Rec.	CFET Forms/Agreements	CFET Appointment
Placer																		ALL 1201	FS and EBT appt re: ABAWD Disability/Work Reg			New Rec.	CFET Forms/Agreements	CFET Appointment
Ventura	x																	56-02-115	CalFresh Employment & Training Appraisal	CalFresh Employment & Training Appraisal	Employment Assessment form-No Match	New Rec.	CFET Forms/Agreements	CFET Assessment
Alameda	x																	63-45	CFAP/Non-Citizen Determination Worksheet	EST checklist for non-citizens	Form is used in a county-specific process	New Rec.	CFET Forms/Agreements	CFET Assessment
Alameda			x															90-28	GA CFET Questionnaire	GA CFET Questionnaire	Form is specific to county General Assistance program	New Rec.	CFET Forms/Agreements	CFET Assessment
Alameda			x															90-88	General Assistance Program Health Questionnaire	GA Health Questionnaire	Form is specific to county General Assistance program	New Rec.	CFET Forms/Agreements	CFET Assessment
Sacramento																		CF 1013_34F	CFET Employment Assessment 10-2015	CFET assessment Questionnaire	used for CFET participants, when returned needs to be image and assigned to CF EW	New Rec.	CFET Forms/Agreements	CFET Assessment
Sacramento																		CF 1014_34F	CalFresh Employment and Training Assessment	CalFresh Employment and Training Assessment	Used for CFET participants, when returned needs to be imaged and assigned to CF EW	New Rec.	CFET Forms/Agreements	CFET Assessment
Riverside	x																	DPSS 4406	CalFresh Employment and Training Program (CFET) Customer Profile	assessment questionnaire	CFET staff capture additional appraisal/assessment questions not in C-IV	New Rec.	CFET Forms/Agreements	CFET Assessment
San Luis Obispo	x																	DSS CF 600	CFET Questionnaire.docx	CFET and ABAWD questionnaire for each applicant	Staff can determine if applicants are required to comply or exempt with CFET and ABAWD programs. County specific tool	New Rec.	CFET Forms/Agreements	CFET Assessment

San Diego			x							11-67 HHSA	Good Cause Determination	GR/CFET Good Cause determination	No CalSAWS document - County specific instructions	New Rec.	CFET Forms/Agreements	CFET Good Cause or Exemption
San Diego										09-106	Pre Enrollment Form for Fresh Success	Fresh success pre enrollment form	to qualify a student for CF Program	New Rec.	CFET Forms/Agreements	CFET Good Cause or Exemption
San Diego		x								09-84	CalFresh Employment & Training Program Communication	E&T rights and Responsibilities	E&T components	New Rec.	CFET Forms/Agreements	CFET Notices and Requirements
Ventura		x								56-02-071	Important Work Requirement for CalFresh Recipients	Work Requirements for CalFresh recipients	Non-Compliance Communication Memo-No Match	New Rec.	CFET Forms/Agreements	CFET Notices and Requirements
Ventura		x								56-02-086	CalFresh Employment & Training Program Change	CalFresh Employment & Training Program Change	Work requirement information for CalFresh recipients No match	New Rec.	CFET Forms/Agreements	CFET Notices and Requirements
Ventura		x								56-02-119	CalFresh Employment & Training PrEP Welcome Letter (10/19)	CalFresh Employment & Training PrEP Welcome letter	Supportive Services Change NOA-No Match	New Rec.	CFET Forms/Agreements	CFET Notices and Requirements
Ventura		x								56-02-162	GA/FSET Case Update by EC/ET	GA Internal communication document	Form is specific to county General Assistance program	New Rec.	CFET Forms/Agreements	CFET Notices and Requirements
Alameda			x							90-19	CalFresh E&T Option to Participate	GA CalFresh E&T Option to Participate client form	Form is specific to county General Assistance program	New Rec.	CFET Forms/Agreements	CFET Notices and Requirements
Alameda		x		x						90-251	CFET Client Status	C-768 CFET Client Status	CF- San Mateo required form. No match found from CalSAWS.	New Rec.	CFET Forms/Agreements	CFET Notices and Requirements
San Mateo		x								C-768	Informing Notice	CFET	This form is customized to our CF E&T Program	New Rec.	CFET Forms/Agreements	CFET Notices and Requirements
Placer		x								GREAT 11	GR/CF E&T Orientation Form	Documentation of attendance at orientation	No CalSAWS document - County specific instructions	New Rec.	CFET Forms/Agreements	CFET Orientation
San Diego			x							11-73 HHSA	DSS CF 599	CFET Orientation.docx	Signed statement by CF applicant. No equivalent	New Rec.	CFET Forms/Agreements	CFET Orientation
San Luis Obispo		x								E 18A	CFET ORIENTATION NOTICE	CFET ORIENTATION NOTICE	NEEDED FORM NOT ON TIER 1 LIST	New Rec.	CFET Forms/Agreements	CFET Orientation
Santa Barbara		x		x							Orientation Appointment Letter	CFET	This form is customized to our CF E&T Program	New Rec.	CFET Forms/Agreements	CFET Orientation
Placer		x								GREAT 10A	Orientation Appointment Letter	CFET	This form is customized to our CF E&T Program	New Rec.	CFET Forms/Agreements	CFET Orientation
Placer		x								GREAT 10S	CalFresh Employment & Training PrEP Referral (10/19)	CalFresh Employment & Training PrEP Referral	PrEP Referral Form-No match	New Rec.	CFET Forms/Agreements	CFET Referral
Ventura		x								56-02-161	CalFresh Employment & Training PrEP Referral	CalFresh Employment & Training PrEP Referral	PreEP Referral Form-No match	New Rec.	CFET Forms/Agreements	CFET Referral
San Mateo		x								C-769	CFET Referral	C-769 CFET Referral	CF- San Mateo required form. No match found from CalSAWS.	New Rec.	CFET Forms/Agreements	CFET Referral
Sacramento										CF 1016_34F	CF E and T Referral to DHA	Referral for CF	Referrals need to be imaged into the case.	New Rec.	CFET Forms/Agreements	CFET Referral
Sacramento										CF 1016_34F MCC	MCC CF E and T Referral to DHA	Referral for Mather Campus	Referrals need to be imaged into the case.	New Rec.	CFET Forms/Agreements	CFET Referral
Placer		x								GREAT 29	Community Volunteer Site Referral	CFET	This form is customized to our CF E&T Program	New Rec.	CFET Forms/Agreements	CFET Referral
San Bernardino		x								TAD CF 715	Engagement Letter	Referral letter	Used to refer customers to E&T program	New Rec.	CFET Forms/Agreements	CFET Referral
San Diego				x						24-418 (12-08)	Parent Choices		Form used for Child Care program, No CalSAWS document type name/substitute available	New Rec.	Child Care Forms	Child Care Agreement
San Diego				x						24-428 HHSA (03-13)	Seeking Employment Agreement		Form used for Child Care program, No CalSAWS document type name/substitute available	New Rec.	Child Care Forms	Child Care Agreement
San Diego				x						26-12	Parent Agreement (9 09)		Form used for Child Care program, No CalSAWS document type name/substitute available	New Rec.	Child Care Forms	Child Care Agreement
San Diego				x						24-301 HHSA (8.04)	Respite Application		Form used for Child Care program, No CalSAWS document type name/substitute available	New Rec.	Child Care Forms	Child Care Application
Tulare				x						2008-CC	TulareWORKS STAGE 1 CHILDCARE MONTHLY TIME SHEET	Provider's child care timesheet	This form is completed by the child care provider to provide an accurate record of when the child care was provided for each child. There is no form on the CalSAWS listing that has information close to what this form is requesting	New Rec.	Child Care Forms	Child Care Attendance or Tracking
San Diego				x						24-760 HHSA (8.04)	3 Day Absence		Form used for Child Care program, No CalSAWS document type name/substitute available	New Rec.	Child Care Forms	Child Care Attendance or Tracking
San Diego				x						24-826 HHSA_03-13 SP	Absences Best Interest Days		Form used for Child Care program, No CalSAWS document type name/substitute available	New Rec.	Child Care Forms	Child Care Attendance or Tracking
Contra Costa				x						CCare 98	Absence Days - Tracking Form			New Rec.	Child Care Forms	Child Care Attendance or Tracking
Sacramento										CSF 26	TB Clearance	TB Clearance form	Needed for child care provider approval.	New Rec.	Child Care Forms	Child Care Attendance or Tracking
Sacramento										CSF 64	EBT Request for DAC-AR	Form SC416 is used in its place	Needed for child care provider approval.	New Rec.	Child Care Forms	Child Care Attendance or Tracking
Santa Clara				x						SCD 2549	Request for Attendance/Child Care Information	Supportive Services	Forms in this category are related to various supportive services; CalSAWS forms/categories do not meet business needs	New Rec.	Child Care Forms	Child Care Attendance or Tracking
Contra Costa				x						WPRCC 3	WTW Participation and Child Care Hours Calculation Cheat Sheet			New Rec.	Child Care Forms	Child Care Attendance or Tracking
Placer										PCOE Approved Child Care Schedule	PCOE Approved Child Care Schedule	WTW Supportive Services		New Rec.	Verifications? Child Care Forms	Child Care Attendance or Tracking

San Diego							x									24-827 HHSA _03-13_Eng 1	Incomplete File Notice		Form used for Child Care program, No CalSAWS document type name/substitute available	New Rec.	Child Care Forms	Child Care Provider Licence or Statement
San Diego							x									24-836 HHSA _03-13 SP	Business Verification		Form used for Child Care program, No CalSAWS document type name/substitute available	New Rec.	Child Care Forms	Child Care Provider Licence or Statement
San Diego							x									24-841 HHSA (03-13)	Licensed Exempt Self Certification		Form used for Child Care program, No CalSAWS document type name/substitute available	New Rec.	Child Care Forms	Child Care Provider Licence or Statement
San Diego							x									24-843 HHSA (03-13)	Education and Training Packet Cover Letter -356		Form used for Child Care program, No CalSAWS document type name/substitute available	New Rec.	Child Care Forms	Child Care Provider Licence or Statement
Ventura																56-04-015	Tri-Counties Regional Center	Contains verification from regional center that child meets eligibility criteria for Dual Agency/Early Start rate; contains effective date of services	Initiated by the CBS and sent to the regional center worker to verify services - No Match	New Rec.	Child Care Forms	Child Care Provider Licence or Statement
Tehama							x									CCP 4	Health & Safety Self-Certification	Health & Safety Self-Certification	State Form	New Rec.	Child Care Forms	Child Care Provider Licence or Statement
Placer																CCP 4	Health and Safety Self Cert	WTW Supportive Services		New Rec.	Child Care Forms	Child Care Provider Licence or Statement
Contra Costa							x	x								CCPR	Request for Provider Registration			New Rec.	Child Care Forms	Child Care Provider Licence or Statement
Riverside								x								DPSS 3069	Parent Determination of In-Home Child Care Provider Status (part of DOC 0615)	In home provider declaration status	Used for the in-home provider to identify if they are exempt from FLSA or non-exempt from FLSA.	New Rec.	Child Care Forms	Child Care Provider Licence or Statement
Riverside								x								DPSS 3085	Request to Enter/Modify Child Care Provider Information	add or modify resource in RDB	ET sends to Fiscal STAR	New Rec.	Child Care Forms	Child Care Provider Licence or Statement
Riverside								x								DPSS 4150	Licensed Child Care Providers Non-Operational Days - Declaration and Understanding Form	Sample calendar and calendar template	customer tool	New Rec.	Child Care Forms	Child Care Provider Licence or Statement
Initial - Kern								x								KCDHS 660-Gen	Child Care Provider Background Check			New Rec.	Child Care Forms	Child Care Provider Licence or Statement
Tehama							x									Table of Contents	Table of Contents - Exempt Provider Packet	Checklist for Exempt CC Provider	Checklist for Exempt CC provider packet	New Rec.	Child Care Forms	Child Care Provider Licence or Statement
Tehama							x									110	CCRE Stage 2 Referral	Refer CC from Stage 1 to Stage 2	Refer CC from Stage 1 to Stage 2 - no state form	New Rec.	Child Care Forms	Child Care Referral
San Diego								x								24-761 HHSA (02-06)	CPS Referral		Form used for Child Care program, No CalSAWS document type name/substitute available	New Rec.	Child Care Forms	Child Care Referral
Alameda	x															42-10	CalWORKs Child Care Request Form	Child care communication between EC and CBO	Form is used in a county-specific process	New Rec.	Child Care Forms	Child Care Referral
Ventura																56-06-085	Stage One Child Care Referral Form	Child care Referral	Child Care referral to APP-no match	New Rec.	Child Care Forms	Child Care Referral
Ventura																56-06-200	Stage Two Child Care Referral Form	Child care referral	Referral to transition to Stage II-no match	New Rec.	Child Care Forms	Child Care Referral
Contra Costa							x	x								CCare 15	Referral to Office of Revenue Collections Child Care Programs			New Rec.	Child Care Forms	Child Care Referral
Riverside								x								DPSS 4005	Child Care PRI Referral (part of DOC 0615)	CC PFI request	CC staff request Child Care Preventative Fraud Review Referral Form	New Rec.	Child Care Forms	Child Care Referral
Santa Clara								x								SCD 1718	ChildCare Request Form	Supportive Services	Forms in this category are related to various supportive services; CalSAWS forms/categories do not meet business needs	New Rec.	Child Care Forms	Child Care Request
Los Angeles								x								ST1-01	Child Care	This form is used to request child care services.	No possible map found in listing	New Rec.	Child Care Forms	Child Care Request
San Diego								x								24-417 (10-11)	Information Needed		Form used for Child Care program, No CalSAWS document type name/substitute available	New Rec.	Child Care Forms	Child Care Verification Form
San Diego								x								24-701	Justification Statement (8-04)		Form used for Child Care program, No CalSAWS document type name/substitute available	New Rec.	Child Care Forms	Child Care Verification Form
San Diego								x								24-707 HHSA (11-04)	Exceptional Needs		Form used for Child Care program, No CalSAWS document type name/substitute available	New Rec.	Child Care Forms	Child Care Verification Form
San Diego								x								24-745 (12-04)	Childs School Info		Form used for Child Care program, No CalSAWS document type name/substitute available	New Rec.	Child Care Forms	Child Care Verification Form
San Diego								x								24-763 HHSA (7-08)	Absent Parent		Form used for Child Care program, No CalSAWS document type name/substitute available	New Rec.	Child Care Forms	Child Care Verification Form
San Diego								x								24-793 HHSA (1.07)	Statement of Exceptional Needs		Form used for Child Care program, No CalSAWS document type name/substitute available	New Rec.	Child Care Forms	Child Care Verification Form
San Diego								x								24-842 HHSA (03-13)	Documentation of Exceptional Needs		Form used for Child Care program, No CalSAWS document type name/substitute available	New Rec.	Child Care Forms	Child Care Verification Form
Ventura							x									56-08-061	Medi-Cal Dependent Care Expense Verification	Form to allow clients to provide information, and child care providers to confirm, expenses	Client signs to give authorization, child care provider completes, in order to verify child care expenses. No match	New Rec.	Child Care Forms	Child Care Verification Form
Contra Costa								x	x							CCare S3	Child Care Programs Summary Sheet (10/03)			New Rec.	Child Care Forms	Child Care Verification Form
Santa Clara								x								SCD 1775	Child Care Checklist	Supportive Services	Forms in this category are related to various supportive services; CalSAWS forms/categories do not meet business needs	New Rec.	Child Care Forms	Child Care Verification Form

Ventura																		56-02-146	CalFresh Non-Citizen Eligibility Determination	Non-citizen eligibility determination	Worker tool to determine state vs federal funding and sponsorship screening and determination for non-citizen eligibility- No match	New Rec.	Sponsor Related Forms	County - Sponsor Document	
Ventura		x																56-03-350	CalWORKS Non-Citizen Eligibility Determination	Non-Citizen Eligibility Determination	Used to determine the State or Federal eligibility status of a CalWORKS non-citizen client. No match	New Rec.	Sponsor Related Forms	County - Sponsor Document	
Santa Clara																	x	GA 54	Sponsorship Questionnaire	Verification request	Form is used to request verification; existing CalSAWS categories are too specific to processes not utilized at Santa Clara county. A general category is being requested	New Rec.	Sponsor Related Forms	County - Sponsor Document	
Santa Clara																	x	GA 56	Notification to Sponsor	Verification request	Form is used to request verification; existing CalSAWS categories are too specific to processes not utilized at Santa Clara county. A general category is being requested	New Rec.	Sponsor Related Forms	County - Sponsor Document	
Santa Clara																	x	GA 60	Sponsored Non Citizen Control Sheet	Verification request	Form is used to request verification; existing CalSAWS categories are too specific to processes not utilized at Santa Clara county. A general category is being requested	New Rec.	Sponsor Related Forms	County - Sponsor Document	
Santa Clara Butte																	x	SCD 355 SA BU 214	Agreement to reimburse-sponsor Gas Card Receipt Form	Client Request/Agreement Gas Card Form	This form is a client request or agreement; county business needs require a generic category; existing CalSAWS documents do contain a general request and/or agreement	New Rec.	Sponsor Related Forms	County - Sponsor Document	
San Luis Obispo																		DSS ACCT 252	Ride-On Transportation Voucher Program.docx	Client Transportation Voucher - Participant Case info and destination one time/multiple	No equivalent form for vouchers	New Rec.	Transportation Forms	County - Transportation Form	
Contra Costa																		TR 12	Taxi Contractors Information			New Rec.	Transportation Forms	County - Transportation Form	
Contra Costa																		TR 15	KEYS Referral Route Slip			New Rec.	Transportation Forms	County - Transportation Form	
Contra Costa																		TR 17	KEYS Auto Loan - Initial Application Basic Automobile Maintenance Class Referral			New Rec.	Transportation Forms	County - Transportation Form	
Contra Costa																		TR 18				New Rec.	Transportation Forms	County - Transportation Form	
Contra Costa																		AAP Bank Notification	AAP Bank Notification			Other county drawer - AAP	AAP	County Adoption Form	
Contra Costa																		AAP M/C Speed Letter				Other county drawer - AAP	AAP	County Adoption Form	
Los Angeles																		AD 42R	Agency Adoption Program - Individual Case Report	No longer needed			Other county drawer - AAP	AAP	County Adoption Form
Placer																		Adoption Orders	Adoption Orders	Vitals			Other county drawer - AAP	AAP	County Adoption Form
San Luis Obispo																		DSS AAP 258	EFC Information for AAP before Age 16.docx	Request to extend AAP for child <16	No document to request extension of AAP payments		Other county drawer - AAP	AAP	County Adoption Form
Orange																		F063-29-41	Adoption Assistance Program/AAP Intake Case Recording Sheet	AAP Intake Case Recording Sheet	Form not available from the state. Used by Intake ET as a checklist when initiating the case to ensure all required documents/actions are in the case		Other county drawer - AAP	AAP	County Adoption Form
Orange																		F063-29-88	Adoption Assistance Program/AAP Wraparound Application Request	AAP Wraparound Application Request	Form not available from the state. Used by CFS Social Workers to notify Eligibility of a Wraparound application for a foster child		Other county drawer - AAP	AAP	County Adoption Form
Initial - Kern																		KCDHS 324-Adop	Adopting Parents Own Report on Health				Other county drawer - AAP	AAP	County Adoption Form
Initial - Kern																		KCDHS 338-Adop	Medical Report on Applicant				Other county drawer - AAP	AAP	County Adoption Form
Initial - Kern																		KCDHS 4-Adop	Adoptive Families Needed				Other county drawer - AAP	AAP	County Adoption Form
Initial - Kern																		KCDHS 676-RFA	Post Adoption Sibling Contact				Other county drawer - AAP	AAP	County Adoption Form
Initial - Kern																		KCDHS 678-RFA	AAP Re-Assessment Cover Letter				Other county drawer - AAP	AAP	County Adoption Form
Initial - Kern																		KCDHS 707-Adop	Voluntary Relinquishment				Other county drawer - AAP	AAP	County Adoption Form
Initial - Kern																		KCDHS 877-Adop	Developmental Evaluation				Other county drawer - AAP	AAP	County Adoption Form
Alameda																		No form #	AAP Intake dictation sheet	AAP approval information	Form is specific to county Foster care program		Other county drawer - AAP	AAP	County Adoption Form
Santa Clara																		SCD 2367	AAP Eligibility Case Summary Sheet	Application	Application related documents; existing CalSAWS documents are too specific to index to. In order to meet county needs we need generic categories		Other county drawer - AAP	AAP	County Adoption Form
Santa Clara																		SCD 2446	Adoption Pending Finalization Rate Verification	Verification request	Form is used to request verification; existing CalSAWS categories are too specific to processes not utilized at Santa Clara county. A general category is being requested	Other county drawer - AAP	AAP	County Adoption Form	
Ventura																		56-06-664	Case Conference Referral Form (09/17)	Referral	Referral to case conference-No match	New Rec.	Non-Fraud Referral or Request	County Specific Referral	
Initial - Kern																		KCDHS 319-ER	Emergency Response Referral Intake			New Rec.	Non-Fraud Referral or Request	County Specific Referral	
Los Angeles																		PA 6158	DPSS Criminal Background Declaration and Consent Form		No possible map found in listing	New Rec.	Non-Fraud Referral or Request	County Specific Referral	

[illegible]

Initial - Kern																		KCDHS 713-UC	Problem with a Child					New Rec.	Foster Care Forms	County Supporting Foster Care Form
Initial - Kern																		KCDHS 723-CU	Parental Consent to Administer Psychotropic Drugs					New Rec.	Foster Care Forms	County Supporting Foster Care Form
Initial - Kern																		KCDHS 782-FC	Consider Becoming a Foster Parent for a Child w/Special Needs					New Rec.	Foster Care Forms	County Supporting Foster Care Form
Initial - Kern																		KCDHS 878-Coll	Foster Care Benefit Instructions Sheet					New Rec.	Foster Care Forms	County Supporting Foster Care Form
Alameda																		No form #	POEM Cover sheet	FC cover sheet mailed to parents	Form is specific to county Foster care program	New Rec.	Foster Care Forms	County Supporting Foster Care Form		
Alameda																		No form #	POEM Worksheet	FC document when parents do not work or getting any form of aid.	Form is specific to county Foster care program	New Rec.	Foster Care Forms	County Supporting Foster Care Form		
Stanislaus																		STAN 426 AC	Probation Change	Probations changes that impact FC payments	Form initiated from Probation to Child Welfare Services. Similar Form not listed on the Forms List	New Rec.	Foster Care Forms	County Supporting Foster Care Form		
Stanislaus																		STAN FC 203	Legal Guardian (LG) Statement	(LG) Statement used for Foster Care	Statement taken from Legal Guardian for Foster Care Program. Similar Form not found on Forms List.	New Rec.	Foster Care Forms	County Supporting Foster Care Form		
Los Angeles																		DCFS IEP	School assessment	School assessment	Eligibility determination.	New Rec.	Foster Care Forms	County Supporting Foster Care Form		
Initial - Santa Cruz																		DC29ES	Exempt Provider Rates	Exempt Provider Rates		New Rec.	Vendor and Provider Forms	County Supporting Vendor/Provider Form		
Initial - Kern																		KCDHS 415-ICS	Vendor Project Report				New Rec.	Vendor and Provider Forms	County Supporting Vendor/Provider Form	
Tehama																		TEH WTW 53	Clothing Voucher	Participant Clothing Voucher	Voucher for participant to purchase clothing from local vendors	New Rec.	Vendor and Provider Forms	County Supporting Vendor/Provider Form		
San Luis Obispo	x																	DSS CW 229	Keys to Unlock Your Future.docx	Resource check list	County can identify which resources family currently has and resources that are needed to be successful. County specific form	New Rec.	WTW Forms	County Supporting WTW Form		
San Luis Obispo																		DSS ES 10	WTW Reengagement for Reimbursed Child Support or Extender.docx	TOA notice - 48 months, child support recoupment/extenders	Notice to recipient of additional months of CW eligibility due to child support collection or extender/waiver granted. This is not a NOA	New Rec.	WTW Forms	County Supporting WTW Form		
Contra Costa																		EMCOM 1	Emergency Communication / Participant Information Alert			New Rec.	WTW Forms	County Supporting WTW Form		
Los Angeles																		GN 6323	Post-Employment Services Invitation Letter	This letter is used to invite employed participants to attend a seminar to learn about information on Post-Employment Services.	No possible map found in listing	New Rec.	WTW Forms	County Supporting WTW Form		
Placer																		HVI 381	Approval/Denial	WTW Supportive Services	Approval/denial of what? Is this a NOA? Or for the approval of an agreement or services?	New Rec.	WTW Forms	County Supporting WTW Form		
Initial - Kern																		KCDHS 320-Gen	Chronological Resume			New Rec.	WTW Forms	County Supporting WTW Form		
Initial - Kern																		KCDHS 345-Gen	Most Dreaded Questions of All			New Rec.	WTW Forms	County Supporting WTW Form		
Initial - Kern																		KCDHS 409-WTW	Bridges to Success Orientation Packet			New Rec.	WTW Forms	County Supporting WTW Form		
Placer																		P-10A	WTW Program Info-Auburn	WTW Correspondence	What is this? Is this imaged?	New Rec.	WTW Forms	County Supporting WTW Form		
Placer																		P-10S	WTW Program Info-Sunset	WTW Correspondence	What is this? Is this imaged?	New Rec.	WTW Forms	County Supporting WTW Form		
Placer																		P-10T	WTW Program Info-Tahoe	WTW Correspondence	What is this? Is this imaged?	New Rec.	WTW Forms	County Supporting WTW Form		
Contra Costa																		PDO 3	Clean Slate Case Closing Memo from the PDO			New Rec.	WTW Forms	County Supporting WTW Form		
Los Angeles																		REP DOC006	Targeted Assistance Discretionary (TAD) -Request for Services and Enrollment Form	Used for TAD request for services and enrollment.	No possible map found in listing	New Rec.	WTW Forms	County Supporting WTW Form		
Santa Clara	x																	RS 4	PLACEMENT and PLACEMENT FOLLOW-UP	RCA	Form is used for RCA purposes; existing CalSAWS categories are too specific to processes not utilized at Santa Clara county. A general category is being requested	New Rec.	WTW Forms	County Supporting WTW Form		
Santa Clara																		SCD 2529	Client Emergency Information Card	Supportive Services	Forms in this category are related to various supportive services; CalSAWS forms/ categories do not meet business needs	Is this imaged?	New Rec.	WTW Forms	County Supporting WTW Form	
Santa Clara																		SCD 568	Compliance Transmittal Form	Supportive Services	Forms in this category are related to various supportive services; CalSAWS forms/ categories do not meet business needs	New Rec.	WTW Forms	County Supporting WTW Form		
Tehama																		TEH WTW 82	Incentive Program Form	Opt-in or Waive WTW Incentives	Opt-in or waive WTW incentives	New Rec.	WTW Forms	County Supporting WTW Form		
Initial - Santa Cruz																		WEL3195	Family Support Update	Family Support Update		New Rec.	WTW Forms	County Supporting WTW Form		
Placer																		Winter Holiday Gift Request	Winter Holiday Gift Request	WTW Correspondence		New Rec.	WTW Forms	County Supporting WTW Form		
Santa Clara																		WTW 11	Welfare to Work/Cal-Learn Supportive Services Overpayment/Underpayment Notice	Overpayment/Overissuance/Underpayment /Underissuance	Form is used for OP/OI and UI/UP purposes; existing CalSAWS categories are too specific to processes not utilized at Santa Clara county. A general category is being requested	New Rec.	WTW Forms	County Supporting WTW Form		
Contra Costa																		WTW 181	Welfare-to-Work Information Exchange			New Rec.	WTW Forms	County Supporting WTW Form		

Placer																		WTW Program Notice	WTW Program Notice	WTW Correspondence		New Rec.	WTW Forms	County Supporting WTW Form
Contra Costa																		WTWCC 126	Introduction to TRAC Screens for WTW Workers			If this is for workers, is it imaged to a case?	WTW Forms	County Supporting WTW Form
Contra Costa																		WTWCC 20	STAND! Release of Information and Communication Referral			New Rec.	WTW Forms	County Supporting WTW Form
Riverside																		document	Minute order-Detention Hearing	Court minute order when children are detained from parent	Reviewed for required court findings to help determine foster care funding source. No comparable document.	Court/Hearings Document	Court/Hearings Document	Court Document
Riverside																		document	Minute order-Review Hearing	Court minute order required every six months	Reviewed for required court findings to maintain federal funding. No comparable document.	Court/Hearings Document	Court/Hearings Document	Court Document
Orange																		F063-29-39	Adoption and Safe Family Act/ASFA Ongoing Court Findings	Adoption and Safe Family Act Permanency Planning Hearing Worksheet	Form not available from the state. Used for tracking ongoing court permanency planning findings required for all federal FC cases	Court/Hearings Document	Court/Hearings Document	Court Document
Initial - Kern																		KCDHS 305.1-Serv	Court Hearing Form			Court/Hearings Document	Court/Hearings Document	Court Document
Initial - Kern																		KCDHS 305-Serv	Court Hearing Form			Court/Hearings Document	Court/Hearings Document	Court Document
Ventura																		56-06-652	Child Care Change Fax Transmittal	Change letter	Letter with Child care status change-no match	New Rec.	Fax/Coversheets	Coversheet
Placer																		CALHEERS Transmittal Cover Sheet	CALHEERS Transmittal Cover Sheet	Correspondence		New Rec.	Fax/Coversheets	Coversheet
Riverside																		DPSS 2407	FAX Transmittal	same as title	Semi-letterhead County Specific	New Rec.	Fax/Coversheets	Coversheet
San Luis Obispo																		DSS ACA 108	CalHEERS Verification Transmittal Coversheet.docx	Fax coversheet, County, Case name, contact info phone/email and CalHEERS case number	Transmittal of case documents to Covered California. No equivalent	New Rec.	Fax/Coversheets	Coversheet
San Luis Obispo																		DSS MC 197	Courtesy Application Coversheet.docx	Courtesy application information letter for non SLO Counties.	County created for to inform other counties that a courtesy application was taken in SLO Co. and provide worker, worker contact, applicant and SSN	New Rec.	Fax/Coversheets	Coversheet
Initial - Kern																		KCDHS 599-Gen	FAX Cover			New Rec.	Fax/Coversheets	Coversheet
Santa Clara																		SCD 274	Fax Request For Benefits Issuance Action	Miscellaneous	There needs to be a generic miscellaneous category for documents that do not index to any of the existing existing CalSAWS Documents and it does not make business sense to create a new category	New Rec.	Fax/Coversheets	Coversheet
Sutter																		SU 942	Alta Fax	Fax cover letter containing eligibility questions for HCBS Waiver	Form is used for the CWD to fax to Alta Regional to confirm an individual's eligibility to the HCBS Waiver program. Could not match to an existing CalSAWS document.	New Rec.	Fax/Coversheets	Coversheet
Placer																		ALL 1328	Message to My Worker	Correspondence		New Rec.	Customer/Worker Contact	Customer to Worker Contact
San Luis Obispo																		DSS 16.3	Message Memo.docx	Template to record phone messages	no equivalent	New Rec.	Customer/Worker Contact	Customer to Worker Contact
San Luis Obispo																		DSS52	Message To My Worker.docx	applicant/Recipient can leave written to assigned worker	no equivalent	New Rec.	Customer/Worker Contact	Customer to Worker Contact
Initial - Kern																		KCDHS 376-Gen	SSW Hotline Message			New Rec.	Customer/Worker Contact	Customer to Worker Contact
Initial - Kern																		KCDHS 436-Gen	Customer Service Complaint/Complaint of Discrimination			New Rec.	Customer/Worker Contact	Customer to Worker Contact
Mendocino																		MCDSS 2022A	Benefits Issuance Service Request Form	Benefit Issuance staff uses this form to document services provided to customers. Such as requesting a new EBT card, BIC, Voucher, passport, etc.	This form is used as a record of benefits requested by a customer and provided by the county. This form is used frequently by staff and increases the workload for staff imaging/indexing documents to a case.	New Rec.	Customer/Worker Contact	Customer to Worker Contact
Mendocino																		MCDSS 672	Goldenrod	Form is used by customers to communicate with eligibility specialists	This form is used as a communication tool between customers and eligibility specialists. Customers are able to use this form to report information, ask questions, or request services. Review of the CalSAWS document did not have an equivalent form.	New Rec.	Customer/Worker Contact	Customer to Worker Contact
Los Angeles																		PA 373	Record of Participant/Advocate Inquiry		No possible map found in listing	New Rec.	Customer/Worker Contact	Customer to Worker Contact
Napa																		SSSD 1000	Phone Message		Is this a notice to the worker the customer called? Or record that the worker call the customer? Either way is this imaged?	New Rec.	Customer/Worker Contact	Customer to Worker Contact
Sutter																		SU 503	Message for your PAS	Message for your Public Assistance Specialist	This form is utilized in the reception area. Customers use this form to leave a message for their worker regarding their case.	New Rec.	Customer/Worker Contact	Customer to Worker Contact
Initial - Santa Cruz																		WEL3319	Client Contact	Client Contact		New Rec.	Customer/Worker Contact	Customer to Worker Contact
Ventura																		x	Client Message	Form for client to write a message to their worker if unable to see them in person	Client can provide their name and case #, and write a message to their worker. No match	New Rec.	Customer/Worker Contact	Customer to Worker Contact
Ventura																		56-03-094B	CalWORKS Time On Aid Tracking Sheet	CalWORKS Time On Aid Tracking form	Used for manual tracking of CalWORKS TOA. NO match	New Rec.	Time Limit Forms	CW - 48 Month Time Limit
Placer																		ALL 1355	TOA Event Record Request	TOA		New Rec.	Time Limit Forms	CW - 48 Month Time Limit

Los Angeles					x											GN 6189	48 Month Time Limit Evaluation	Used to evaluate GAIN participant's CalWORKs 48-Month Time Clock.	No possible map found in listing	New Rec.	Time Limit Forms	CW - 48 Month Time Limit
Los Angeles					x											GN 6198	Time Limit Invitation letter	Used to invite and inform participants of Time Limit and Post-Time Limit services prior to and after exhausting the CalWORKs 48-Month Time Clock.	No possible map found in listing	New Rec.	Time Limit Forms	CW - 48 Month Time Limit
Los Angeles					x											GN 6331	Request for Review of Months Counted Toward the 48-Month Time Limit	Completed by participants to request a review of months that they don't think should have counted toward the CalWORKs 48-Month Time Clock.	No possible map found in listing	New Rec.	Time Limit Forms	CW - 48 Month Time Limit
Los Angeles	x															PA 1953	CalWORKs Time Limits Informing Notice		No possible map found in listing	New Rec.	Time Limit Forms	CW - 48 Month Time Limit
Initial - Santa Cruz	x															WEL3210	CalWORKs Time-On-Aid Manual Update Request	CalWORKs Time-On-Aid Manual Update Request		New Rec.	Time Limit Forms	CW - 48 Month Time Limit
Merced	x															24-3092	HSP Budgeting Packet	Budgeting Packet provided to clients	Category does not exist in CalSAWS.	New Rec.	Program Budgets & Worksheets	CW - Budget or Worksheet
Placer											x					2788	Budget Worksheet	Income Reports/Budgets		New Rec.	Program Budgets & Worksheets	CW - Budget or Worksheet
Ventura	x															56-00-127	CalWORKs/CalFresh/Medi-Cal Case Review (05/17)	contains the case review elements for a manual case review	Form is used primarily for CBS Trainees, no match	New Rec.	Program Budgets & Worksheets	CW - Budget or Worksheet
Ventura	x	x														56-00-130	Periodic Reporting Worksheet CalWORKs-CalFRESH-Medi-Cal	manual budget for CalFresh & CalWORKS	used outside of SAWS system to compute a client's monthly income at intake, SAR, and RRR, no match	New Rec.	Program Budgets & Worksheets	CW - Budget or Worksheet
Ventura	x															56-03-093	Child Support Recoupment Tracking	Child Support Recoupment Tracking Form	Used for manual tracking of child support recoupment. Required due to issues discovered with recoupment automation. No match	New Rec.	Program Budgets & Worksheets	CW - Budget or Worksheet
Ventura	x															56-03-098	CalWORKs BDOA for U-Parent Applications	CalWORKs BDOA Determination Worksheet	Used to determine the BDOA for two-parent CW applicants 100HR Rule. No match	New Rec.	Program Budgets & Worksheets	CW - Budget or Worksheet
Ventura	x															56-04-071	AB12 Court Findings Worksheet	Worksheet; contains court order details; removal information	Created by CBS at age 18 and updated at each renewal; used to track court order findings that are required every 12 months for state and federal eligibility - No Match	New Rec.	Program Budgets & Worksheets	CW - Budget or Worksheet
Placer	x															ALI 439	CW OP Budget Worksheet	OP/OI		New Rec.	Program Budgets & Worksheets	CW - Budget or Worksheet
Placer	x															CW 29	Intake Financial Test	Income Reports/Budgets		New Rec.	Program Budgets & Worksheets	CW - Budget or Worksheet
Placer	x															CW 30	CW budget worksheet	Income Reports/Budgets		New Rec.	Program Budgets & Worksheets	CW - Budget or Worksheet
Shasta	x															DSS 8000 CWUP	CW Unemployment Parent Beg Date of Aid Worksheet	Deprivation	Unsure of what mapping would be appropriate, form attached	New Rec.	Program Budgets & Worksheets	CW - Budget or Worksheet
San Luis Obispo	x															DSS CW 59	Pregnancy Special Need Worksheet.docx	Pregnancy information about 1-3 trimester and due date. Actions to be taken	CalWORKs pregnancy special needs - eligibility and grant amount starting time. County specific	New Rec.	Program Budgets & Worksheets	CW - Budget or Worksheet
San Luis Obispo	x															DSS FSS 1	Family Stabilization Questionnaire.docx	CW AU completes indicating interest and issues	Worker tool to gather information and inquire if CW AU elects to participate in FSS services. No equivalent	New Rec.	Program Budgets & Worksheets	CW - Budget or Worksheet
San Luis Obispo	x				x											DSS FSS 2	Family Stabilization Services Plan.docx	FSS plan and agreement contract	Worker tool that outlines request and need for FSS services. Outlines goal and activities and due dates. Signed by participant. No equivalent	New Rec.	Program Budgets & Worksheets	CW - Budget or Worksheet
San Luis Obispo	x				x	x										DSS827	Needs Budget Worksheet.docx	automated worksheet to determine available income (income vs. expenses)	no equivalent - Used to determine if app/recip. Can afford to pay for a requested services	New Rec.	Program Budgets & Worksheets	CW - Budget or Worksheet
Placer	x			x												MC 337	PWE 100 Hrs Worksheet	Income Reports/Budgets		New Rec.	Program Budgets & Worksheets	CW - Budget or Worksheet
Los Angeles	x															PA 137	CW Budget Worksheet		No possible map found in listing	New Rec.	Program Budgets & Worksheets	CW - Budget or Worksheet
Los Angeles	x															PA 371	Nonrecurring Special Need Worksheet		No possible map found in listing	New Rec.	Program Budgets & Worksheets	CW - Budget or Worksheet
Placer	x															RCA Budget	RCA Budget	Income Reports/Budgets		New Rec.	Program Budgets & Worksheets	CW - Budget or Worksheet
Santa Clara	x															SCD 1308	CalWORKs U-Parent Beginning Date of Aid Worksheet	Budget Worksheet	manual budget worksheet used when budget is incorrect in System or manual budget needs to be calculated- existing CalSAWS Documents do meet these needs	New Rec.	Program Budgets & Worksheets	CW - Budget or Worksheet
Santa Clara	x															SCD 157 CW	CalWORKs Overpayment Computation Worksheet	Overpayment/Overissuance/Underpayment/Underissuance	Form is used for OP/OI and UI/UP purposes; existing CalSAWS categories are too specific to processes not utilized at Santa Clara county. A general category is being requested	New Rec.	Program Budgets & Worksheets	CW - Budget or Worksheet
Sutter	x															SU494	100 Hour Rule Worksheet	A manual worksheet used to determine the beginning date of aid for CW when unemployed/underemployed deprivation exists. Could not find any appropriate manual worksheets listed in the provided list.	A manual worksheet used to determine the beginning date of aid for CW when unemployed/underemployed deprivation exists. Could not find any appropriate manual worksheets listed in the provided list.	New Rec.	Program Budgets & Worksheets	CW - Budget or Worksheet
San Bernardino	x	x														TAD QA 2	NonCitizen Eligibility Determination and Work Quarter Calculation	Worksheet	Used to determine eligibility to CalWORKs/CalFRESH for non-citizens - no comparable form	New Rec.	Program Budgets & Worksheets	CW - Budget or Worksheet
Initial - Santa Cruz	x															WEL3198pg1	CalWORKs Budget Worksheet	CalWORKs Budget Worksheet		New Rec.	Program Budgets & Worksheets	CW - Budget or Worksheet
Initial - Santa Cruz	x															WEL3198pg2	CalWORKs Budget Worksheet	CalWORKs Budget Worksheet		New Rec.	Program Budgets & Worksheets	CW - Budget or Worksheet
Yolo					x											YC 440	CWES Appraisal Worksheet	Helps collect information during the appraisal process.	Currently OCAT is only available in English, this is used for Non-English speaking customers	New Rec.	Program Budgets & Worksheets	CW - Budget or Worksheet
San Luis Obispo	x																CalWORKs Issuance Worksheet (4-1-19 thru 6-30-19).xlsx	Automated Worksheet for CW	no CW 30 option	New Rec.	Program Budgets & Worksheets	CW - Budget or Worksheet
San Luis Obispo	x																CalWORKs Issuance Worksheet (7-1-19 thru 9-30-19).xlsx	Automated Worksheet for CW	no CW 30 option	New Rec.	Program Budgets & Worksheets	CW - Budget or Worksheet
San Luis Obispo	x																CalWORKs Issuance Worksheet.xlsx	Automated Worksheet for CW	no CW 30 option	New Rec.	Program Budgets & Worksheets	CW - Budget or Worksheet
San Luis Obispo	x																CW IRT Determination Worksheet (4-1-19 thru 9-30-19).docx	Automated IRT worksheet	eligibility determination, no equivalent	New Rec.	Program Budgets & Worksheets	CW - Budget or Worksheet

San Luis Obispo	x															CW IRT Determination Worksheet.docx	Automated IRT worksheet	eligibility determination, no equivalent	New Rec.	Program Budgets & Worksheets	CW - Budget or Worksheet
San Luis Obispo	x															HCB5 Spousal Impoverishment Budgets.xlsx	MC LTC Spousal Improverishment worksheet	County created automated worksheet to determine spousal impoverishment for MC LTC cases.	New Rec.	Program Budgets & Worksheets	CW - Budget or Worksheet
Merced	x												24-3096	HSP Checklist	Checklist to ensure accuracy with case management	Category does not exist in CalSAWS.	New Rec.	Worker Use-Program Checklists	CW - Worker Use Checklists		
Merced	x												24-3112	HSP Habitability Standards Checklist	Form used to complete habitability inspections	Category does not exist in CalSAWS.	New Rec.	Worker Use-Program Checklists	CW - Worker Use Checklists		
Placer	x												All 1359	CalWORKs Checklist	Correspondence		New Rec.	Worker Use-Program Checklists	CW - Worker Use Checklists		
San Mateo	x												C-265	CalWORKs Transfer Checklist	C-265 CalWORKs Transfer Checklist	CW- San Mateo required form. No match found from CalSAWS.	New Rec.	Worker Use-Program Checklists	CW - Worker Use Checklists		
Placer	x												CalWORKs/TMC to MediCal Checklist	CalWORKs/TMC to MediCal Checklist	Correspondence		New Rec.	Worker Use-Program Checklists	CW - Worker Use Checklists		
San Luis Obispo	x												DSS CW 217-B	AB 236 Temporary Homeless Assistance Eligibility and Tracking.docx	AB236 Homeless Assistance tracking eligibility, payments and supervisor approval	Worker tool to record all steps needed issue and record AB236 Housing assistance payments. County specific	New Rec.	Worker Use-Program Checklists	CW - Worker Use Checklists		
San Luis Obispo	x												DSS CW 218	AB 557 Expanded Temporary HA Eligibility and Tracking.docx	AB557 Temporary Homeless Assistance tracking eligibility, payments and supervisor approval	Worker tool to record all steps needed issue and record AB557 Temporary Housing assistance payments. County specific	New Rec.	Worker Use-Program Checklists	CW - Worker Use Checklists		
San Luis Obispo	x												DSS CW 245	Transfer of Assets Period of Ineligibility.docx	POI transfer of property informaton	Used to determine period of ineligibility for CalWORKs. Worksheet calculates property reserve information and POI time period	Is this imaged? Or just a doc to assist the worker? New Rec.	Worker Use-Program Checklists	CW - Worker Use Checklists		
Los Angeles Orange	x												PA 6064	Permanent Homeless Assistance Arranges Checklist		No possible map found in listing	New Rec.	Worker Use-Program Checklists	CW - Worker Use Checklists		
													F063-02-747	Backward Mapping	GOAL SETTING TOOL	CW 2.0	New Rec.	CW 2.0 Forms	CW 2.0 Backward Map		
Stanislaus													STAN WTW 2.0F	Backward Mapping	WTW	CalWORKs 2.0 Program. There are no similar Forms found for this program on the Forms List	New Rec.	CW 2.0 Forms	CW 2.0 Backward Map		
San Luis Obispo	x													CW 2.0 Backward Mapping	New State CalWORKs forms	CW 2.0	New Rec.	CW 2.0 Forms	CW 2.0 Backward Map		
Stanislaus	x												STAN WTW 2.0D	CALMAP	WTW	CalWORKs 2.0 Program. There are no similar Forms found for this program on the Forms List	New Rec.	CW 2.0 Forms	CW 2.0 CalMAP		
Yolo	x												YC 795	CalMAP Tool	CalWORKs 2.0 Tool	CalWORKs 2.0 Tool needed to meet state mandates	New Rec.	CW 2.0 Forms	CW 2.0 CalMAP		
San Luis Obispo	x													CW 2.0 CalMAP	New State CalWORKs forms	CW 2.0	New Rec.	CW 2.0 Forms	CW 2.0 CalMAP		
Santa Barbara Orange	x												CW 2.0-1	GETTING TO KNOW YOU	BARRIER REFERRAL DOMESTIC VIOLENCE/MENTAL HEALTH	NEEDED REFERRAL	New Rec.	CW 2.0 Forms	CW 2.0 Getting to Know You		
	c												F063-02-748	Getting to Know You	GOAL SETTING TOOL	CW 2.0	New Rec.	CW 2.0 Forms	CW 2.0 Getting to Know You		
Merced	x													CalMAP Identifying Family Needs and Assessing Progress CalWORKs 2.0 Getting to Know You CalWORKs 2.0 Quality of Life Index CalWORKs 2.0 Road Map	These are State suggested forms for WTW to use with clients as a part of their Assessment	Current county policy is to index these under "Assessment," however, there are no Cal-Learn or WTW Assessment options available in the provided CalSAWS list.	New Rec.	CW 2.0 Forms	CW 2.0 Getting to Know You		
Stanislaus													STAN WTW 2.0B	Getting to Know You	WTW	CalWORKs 2.0 Program. There are no similar Forms found for this program on the Forms List	New Rec.	CW 2.0 Forms	CW 2.0 Getting to Know You		
Santa Barbara Orange	x												CW 2.0-2	MY GOAL-PLAN-DO-REVIEW	WTW ACTIVITY GOALS WORKSHEET	NEEDED WORKSHEET	New Rec.	CW 2.0 Forms	CW 2.0 Goals		
Orange													F063-02-749	Goal Storming	GOAL SETTING TOOL	CW 2.0	New Rec.	CW 2.0 Forms	CW 2.0 Goals		
Orange													F063-02-750	My Goal Plan	GOAL SETTING TOOLS	CW 2.0	New Rec.	CW 2.0 Forms	CW 2.0 Goals		
Orange													F063-02-752	Needs Assessment	GOAL SETTING TOOLS	CW 2.0	New Rec.	CW 2.0 Forms	CW 2.0 Goals		
Stanislaus													STAN WTW 2.0A	Goal Plan Do Review	WTW	CalWORKs 2.0 Program. There are no similar Forms found for this program on the Forms List	New Rec.	CW 2.0 Forms	CW 2.0 Goals		
Stanislaus													STAN WTW 2.0C	Your Life Index	WTW	CalWORKs 2.0 Program. There are no similar Forms found for this program on the Forms List	New Rec.	CW 2.0 Forms	CW 2.0 Goals		
Stanislaus													STAN WTW 2.0E	Goal Storming	WTW	CalWORKs 2.0 Program. There are no similar Forms found for this program on the Forms List	New Rec.	CW 2.0 Forms	CW 2.0 Goals		
Yolo	x												YC 796	Goal/Plan/Do/Review Tool	CalWORKs 2.0 Tool	CalWORKs 2.0 Tool needed to meet state mandates	New Rec.	CW 2.0 Forms	CW 2.0 Goals		
San Luis Obispo	x													CW 2.0 Goal Plan Do Review-Revise	New State CalWORKs forms	CW 2.0	New Rec.	CW 2.0 Forms	CW 2.0 Goals		
San Luis Obispo	x													CW 2.0 Multicultural Quality of Life Index	New State CalWORKs forms	CW 2.0	New Rec.	CW 2.0 Forms	CW 2.0 Goals		
Stanislaus	x												STAN WTW 2.0G	CW 2.0 Postcard	WTW	CalWORKs 2.0 Program. There are no similar Forms found for this program on the Forms List	New Rec.	CW 2.0 Forms	CW 2.0 Other Tools		
Yolo	x												YC 800	Triage Tool	CalWORKs 2.0 Tool	CalWORKs 2.0 Tool needed to meet state mandates	New Rec.	CW 2.0 Forms	CW 2.0 Other Tools		
San Luis Obispo	x													CW 2.0 Executive Skills Improvement Tool	New State CalWORKs forms	CW 2.0	New Rec.	CW 2.0 Forms	CW 2.0 Other Tools		
San Luis Obispo	x													CW 2.0 Executive Skills Self-Assessment	New State CalWORKs forms	CW 2.0	New Rec.	CW 2.0 Forms	CW 2.0 Other Tools		
San Luis Obispo	x													CW 2.0 Triage Tool	New State CalWORKs forms	CW 2.0	New Rec.	CW 2.0 Forms	CW 2.0 Other Tools		
Orange													F063-02-753	Quality of Life	GOAL SETTING TOOLS	CW 2.0	New Rec.	CW 2.0 Forms	CW 2.0 Quality of Life		
Merced	x													CalMAP Identifying Family Needs and Assessing Progress CalWORKs 2.0 Getting to Know You CalWORKs 2.0 Quality of Life Index CalWORKs 2.0 Road Map	These are State suggested forms for WTW to use with clients as a part of their Assessment	Current county policy is to index these under "Assessment," however, there are no Cal-Learn or WTW Assessment options available in the provided CalSAWS list.	New Rec.	CW 2.0 Forms	CW 2.0 Quality of Life		

Yolo	x																YC 799	Quality of Life Tool	CalWORKs 2.0 Tool	CalWORKs 2.0 Tool needed to meet state mandates	New Rec.	CW 2.0 Forms	CW 2.0 Quality of Life
Santa Barbara	x																CW 2.0-3	MY ROAD MAP/SPEED BUMPS & CHANGING GEARS	WTW PROBLEM SOLVING WORKSHEET	NEEDED WORKSHEET	New Rec.	CW 2.0 Forms	CW 2.0 Road Map
San Luis Obispo	x																DSS ES 406	CW 2.0 Participant Road Test Survey.docx	Participant survey for CW 2.0	Request feedback from CW applicant/participants for new CW 2.0 tools	New Rec.	CW 2.0 Forms	CW 2.0 Road Map
Orange																	F063-02-751	My Road Map	GOAL SETTING TOOLS	CW 2.0	New Rec.	CW 2.0 Forms	CW 2.0 Road Map
Merced	x																Other County Forms	CalMAP Identifying Family Needs and Assessing Progress CalWORKs 2.0 Getting to Know You CalWORKs 2.0 Quality of Life Index CalWORKS 2.0 Road Map	These are State suggested forms for WTW to use with clients as a part of their Assessment	Current county policy is to index these under "Assessment," however, there are no Cal-Learn or WTW Assessment options available in the provided CalSAWS list.	New Rec.	CW 2.0 Forms	CW 2.0 Road Map
Yolo	x																YC 797	My Road Map Tool	CalWORKs 2.0 Tool	CalWORKs 2.0 Tool needed to meet state mandates	New Rec.	CW 2.0 Forms	CW 2.0 Road Map
Yolo	x																YC 798	Potholes and Detours Tool	CalWORKs 2.0 Tool	CalWORKs 2.0 Tool needed to meet state mandates	New Rec.	CW 2.0 Forms	CW 2.0 Road Map
San Luis Obispo	x																	CW 2.0 My Road Map - Potholes and Detours	New State CalWORKs forms	CW 2.0	New Rec.	CW 2.0 Forms	CW 2.0 Road Map
Merced																	24-4100	HDAP – Referral	Referral form to HDAP that includes client information.	Client information is screened for potential program eligibility. - Category does not exist in CalSAWS.	New Rec.	Non-Fraud Referral or Request	CW and Family
Alameda	x																40-100	CalWORKs Starting Out Strong Initiative Confidential Referral Form	Referral form to CBO	Form is used in a county-specific process	New Rec.	Non-Fraud Referral or Request	CW and Family
Alameda	x																40-101	CalWORKs Starting Out Strong Initiative	Client request for participation in Initiative	Form is used in a county-specific process	New Rec.	Non-Fraud Referral or Request	CW and Family
Ventura	x																56-06-671	CalWORKs Internship Program Referral Form [04/19]	Referral	Referral to CIP-No match	New Rec.	Non-Fraud Referral or Request	CW and Family
Butte	x																BU CW-40	Death Certificate Voucher CalWORKs	Death Certificate Voucher CalWORKs	Death Certificate Voucher CalWORKs	New Rec.	Non-Fraud Referral or Request	CW and Family
Santa Clara																	CD 9600	Confidential Application for Child Development	Application	Application related documents; existing CalSAWS documents are too specific to index to. In order to meet county needs we need generic categories	New Rec.	Non-Fraud Referral or Request	CW and Family
Riverside	x																DPSS 383 TRS	CalWORKs and Foster Care Termination Referral Slip	same as title	Used to notify worker of termination for individuals on case	New Rec.	Non-Fraud Referral or Request	CW and Family
Initial - Santa Cruz																	WEL3340	Families Together Referral	Families Together Referral		New Rec.	Non-Fraud Referral or Request	CW and Family
Yolo	x																YC 302	Tribal TANF Request	Referral form	County specific Tribal TANF referral form	New Rec.	Non-Fraud Referral or Request	CW and Family
Placer																	DDS Waiver Referral	DDS Waiver Referral	Applications/SOF/ICT		New Rec.	DDSD Forms	DDSD Referral
Placer																	DDSD Referrals/Disability Evals	DDSD Referrals/Disability Evals	Disability/Work Reg		New Rec.	DDSD Forms	DDSD Referral
Placer																	DDSD Sponsor	DDSD Sponsor Deeming Referrals	Disability/Work Reg		New Rec.	DDSD Forms	DDSD Referral
Napa																	SSSD 2071	DDSD Referral Communique			New Rec.	DDSD Forms	DDSD Referral
San Diego																	14-90	RRR for Cases Pending Over One Year	Informing Notice	Used to notify customers that are pending a DDSD decision for over one year that an RRR is due	New Rec.	DDSD Forms	DDSD Renewal
Placer																	DDS Waiver Renewal	DDS Waiver Renewal	Disability/Work Reg		New Rec.	DDSD Forms	DDSD Renewal
Placer																	DDS-HCBS Waiver Renewal	DDS-HCBS Waiver Renewal	Correspondence		New Rec.	DDSD Forms	DDSD Renewal
San Diego																	14-92	No Determination Coversheet	Transmittal	Notifies FRCs of non-cooperation with DDSD	New Rec.	DDSD Forms	DDSD Supporting Document
San Diego																	14-95	Fax DDSD	Transmittal	Fax coversheet to fax DDSD referral to DDSD	New Rec.	DDSD Forms	DDSD Supporting Document
San Diego																	14-96	DDSD Weekly Activity Log	Log of DDSD activity	FRCs report on weekly DDSD activity	New Rec.	DDSD Forms	DDSD Supporting Document
San Diego																	14-97	DDSD Monthly Activity Log	Log of DDSD activity	FRCs report on monthly DDSD activity	New Rec.	DDSD Forms	DDSD Supporting Document
Placer																	CEF C01	DDSD Medical Appointment Letter	Disability/Work Reg		New Rec.	DDSD Forms	DDSD Supporting Document
Placer																	MSC 529	DDSD Request for More Info	Disability/Work Reg		New Rec.	DDSD Forms	DDSD Supporting Document
Los Angeles																	PA 4040	Disability Packet Review Checklist	The form used to ensure packets contain the necessary information needed for DDSD-SP to conduct the evaluation process. The reverse side of the PA 4040 provides detailed instructions for completing the checklist.	No possible map found in listing	New Rec.	DDSD Forms	DDSD Supporting Document
Los Angeles																	PA 5063	Receipt/Assignment of Disability Packet	Transmittal form used by EW to verify receipt of packet sent to DDSD-SP	No possible map found in listing	New Rec.	DDSD Forms	DDSD Supporting Document
Los Angeles																	PA 6090	Medi-Cal Presumptive Disability Certification	It is provided with the DDSD-SP packet, to the Medi-Cal applicant/beneficiary or their representative to certify Presumptive Disability (PD). Form is completed by a doctor or medical source to certify PD for a Medi-Cal applicant.	No possible map found in listing	New Rec.	DDSD Forms	DDSD Supporting Document
Santa Clara																	SCD 96	Screening/SP-DDSD Applicants	Application	Application related documents; existing CalSAWS documents are too specific to index to. In order to meet county needs we need generic categories	New Rec.	DDSD Forms	DDSD Supporting Document
Placer																	SP2 DDSD 221R	DDSD - Response to MC 221	Disability/Work Reg		New Rec.	DDSD Forms	DDSD Supporting Document

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Santa Clara											x	SCD 2201	EBT On-Line Request	Miscellaneous	There needs to be a generic miscellaneous category for documents that do not index to any of the existing existing CalSAWS Documents and it does not make business sense to create a new category	New Rec.	Fiscal Forms	EBT Form
Santa Clara											x	SCD 2202	Client Electronic Benefit Transfer (EBT) Request	Client Request/Agreement	This form is a client request or agreement; county business needs require a generic category; existing CalSAWS documents do contain a general request and/or agreement	New Rec.	Fiscal Forms	EBT Form
Santa Clara											x	SCD 2322	EBT Repayment Authorization Form	Overpayment/Overissuance/Underpayment /Underissuance	Form is used for OP/OI and UI/UP purposes; existing CalSAWS categories are too specific to processes not utilized at Santa Clara county. A general category is being requested	New Rec.	Fiscal Forms	EBT Form
Initial - Santa Cruz												WEL1551E	EBT Hardship Exemption	EBT Hardship Exemption		New Rec.	Fiscal Forms	EBT Form
Alameda	x											50-125	Exemption from Cash EBT Stagger	Request for exemption from Cash EBT Stagger	Form is used in a county-specific process	New Rec.	Fiscal Forms	EBT Stagger Date
Ventura	x											56-03-151	Exemption Request from EBT Cash Stagger	Cash aid on the 1st instead of stagger date.	Used to capture recipients' request to receive benefits on the 1st of the month. No match	New Rec.	Fiscal Forms	EBT Stagger Date
San Luis Obispo	x											DSS CW 525	Request for Exemption from Staggered Issuance.docx	EBT		New Rec.	Fiscal Forms	EBT Stagger Date
San Luis Obispo											x	DSS GEN 533	EBT Benefit Availability Information.docx	Informing notice to participants about stagger date of approved programs.	Form issued to CW, GA, CAPI and CF recipients informing them of their stagger issuance date for each program. County created informational letter.	New Rec.	Fiscal Forms	EBT Stagger Date
Sacramento												SC 413	EBT Cash Stagger Exemption Request	Form completed by customer requesting EBT issued on the 1st of the month	Request of EBT aid to be delivered on the 1st of the month, when received should be imaged into case and assigned to EW for processing	New Rec.	Fiscal Forms	EBT Stagger Date
Sacramento												SC 414	EBT Cash Exemption Request	Form provided to customer to select how to receive benefits	Completed by customer selecting on how they want their benefits received, when returned should be imaged into case and assigned to EW	New Rec.	Fiscal Forms	EBT Stagger Date
Napa	x											SSSD 2048	EBT Stagger Exemption Request			New Rec.	Fiscal Forms	EBT Stagger Date
San Francisco		x										2152A	CAAP Warning - Act of Work Requirement Negligent Failure	Warning for CAAP work requirements negligent failure.	There is no GA/GR index for warning of work requirement negligent failure.	New Rec.	GA/GR Work and Activities Forms	EDD/Work Registration
Tehama		x										GA 5	EDD Registration Verification (English/Spanish)	EDD Registration Verification	Specific to county business process for GA weekly tracking of work employ work requirements - no comparable form	New Rec.	GA/GR Work and Activities Forms	EDD/Work Registration
San Bernardino		x										GR 515 Eng & SP	Work Registration Verification for GR (E/S)	WDD work registration		New Rec.	GA/GR Work and Activities Forms	EDD/Work Registration
Sonoma		x										HSD19	Work Project and Work Requirements [19]	Work Project and Work Requirements [19]	General Assistance	New Rec.	GA/GR Work and Activities Forms	EDD/Work Registration
Ventura						x						AA4	Eligibility Certification - Adoption Assistance Program	Contains required eligibility information to determine Federal AAP - Title IV-E Pathways	SW completes and provides to eligibility with necessary information to determine AAP eligibility - required for AAP (03/04) - No Match	SCR CA-203681, Other county drawer - AAP	AAP	Eligibility Certification Adoption Assistance Program
Los Angeles												AAP 4	Eligibility Certification Adoption Assistance Program	Certification of Adoption benefits	Certification of AAP benefits and Aid Code funding	SCR CA-203681, Other county drawer - AAP	AAP	Eligibility Certification Adoption Assistance Program
Stanislaus						x						AAP 4 State Form	Eligibility Certification Adoption Assistance Program	Adoption Certification	Agency determination of eligibility for adoption of a child. This Form not found on Forms List	SCR CA-203681, Other county drawer - AAP	AAP	Eligibility Certification Adoption Assistance Program
Ventura						x						56-04-063	Emergency Assistance Miscellaneous Research Sheet	Case information necessary for Emergency Assistance research (initial approval of EA1)	Created by CBS for Case Aid research and ACE entry for NTE date; could be scanned in with EA 1 if that is an option in Cal SAWS - No Match	New Rec.	Foster Care Forms	Emergency Assistance
Riverside						x						CSD 2953	Emergency Disenrollment for Foster Care Children	Correspondence to Health Care Options	Used to disenroll a child from insurance which blocks the foster child's Medi-Cal benefits. No comparable form.	New Rec.	Foster Care Forms	Emergency Assistance
Stanislaus						x						EA 1	Emergency Assistance Application	Emergency Assistance-Child removed	Child Removed from home, emergency placement and assistance. Foster Care only. Similar Form not found on Forms List.	New Rec.	Foster Care Forms	Emergency Assistance
Ventura						x						EA 1	Emergency Assistance Application for Child Welfare Services	Contains required eligibility information to determine Emergency Assistance eligibility	Completed by head of household or SW and provided to eligibility with necessary information to determine eligibility to the emergency assistance program - required for Emergency Caregiver Funding (SK/SL and Emergency Assistance (SK) - No Match	New Rec.	Foster Care Forms	Emergency Assistance
Los Angeles												EA 1	Emergency Assistance Application	Qualification for Emergency Assistance	Verification of funding source	New Rec.	Foster Care Forms	Emergency Assistance
Orange						x						EA Abatement_Req	Emergency Assistance/EA Abatement Request	Emergency Assistance Abatement Request (joint form used by FC and CFS)	Emergency Assistance Abatement Request (joint form used by FC and CFS)	New Rec.	Foster Care Forms	Emergency Assistance
Initial - Kern						x						KDHS 942-FC	Emergency Foster Home Program			New Rec.	Foster Care Forms	Emergency Assistance
Riverside			x									DP55 4351	Monthly Documentation of Hours	Employee work schedule	Employer confirms customer's work hours	New Rec.	WTW Forms	Employment Hours
Los Angeles		x		x								E2Lite TANF RADEP	Employers Verification of Actual Worked Hours	Used to verify actual hours worked.	No possible map found in listing	New Rec.	WTW Forms	Employment Hours
Sonoma						x						HSD 1616	Statement of Employment Hours	Employment Hours Verification Form	No similar document listed on CalSAWS Document list	New Rec.	WTW Forms	Employment Hours
Sutter						x					x	SES82	self employment participation worksheet	self employment tracking	tracks customer for 6 months to determine if they will be meeting WPR with self employment or need additional activities	New Rec.	WTW Forms	Employment Hours

Ventura																		56-06-222	Job Retention Informing Letter	Informing notice	Retention eligibility-no match	New Rec.	WTW Activities	Employment Services
Butte																		BU CW-542	Job Retention Services	Letter	Letter of informing notice	New Rec.	WTW Activities	Employment Services
Butte																		BU CW-562	Job Retention Services Request	Application	Application	New Rec.	WTW Activities	Employment Services
Initial - Kern																		KCDHS 357-Gen	Congratulations You Got The Job			New Rec.	WTW Activities	Employment Services
Initial - Santa Cruz																		WEL3295	Subsidized Employment Extension Request	Subsidized Employment Extension Request		New Rec.	WTW Activities	Employment Services
Tehama																		WorkForce Academy Guidelines	WorkForce Academy Guidelines	Guidelines for Job Club	Guidelines for job club activity	New Rec.	WTW Activities	Employment Services
Placer																		P-20	ES Information Request	WTW Correspondence		New Rec.	WTW Forms	Employment Services
San Diego																		11-94 HHSA	Documentation of Reasonable Suspicion	Documentation of reasonable suspicion of need for substance abuse services	No CalSAWS document - County specific instructions	SIU Documents	SIU Documents	Evidence
Santa Clara																		DPA 435	State hearing Request Form	State hearing Request Form	SIU - Documentation of State Hearing requests	SIU Documents	SIU Documents	Evidence
Riverside																		DPSS 169	Evidence Review Summary	Verifies staff viewed original document Transfer of CLETS information	Verifies information appears on original documentary used by SIU and maintined in customer case file	SIU Documents	SIU Documents	Evidence
Los Angeles																		WFP&I 350	Request for Child Support Services	WFP&I View and Use only	No possible map found in listing	SIU Documents	SIU Documents	Evidence
Los Angeles																		WFP&I 373	WFP&I User Agreement DMV and CLETS	WFP&I View and Use only	No possible map found in listing	SIU Documents	SIU Documents	Evidence
Los Angeles																		WFP&I Image Doc	WFP&I Imaged Documents	WFP&I View and Use only	No possible map found in listing (This is for WFP&I Use Only)	SIU Documents	SIU Documents	Evidence
Santa Clara																			Fax Cover Sheets / Police / SIU	Fax cover sheets - Law enforcement	SIU - fax cover sheets with law enforcement verification to request information from 3rd parties	SIU Documents	SIU Documents	Evidence
Santa Clara																			Income & Eligibility Verification Systems (IEVS)	Income & Eligibility Verification Systems (IEVS)	SIU - Documentation of correspondences with IEVS worker	SIU Documents	SIU Documents	Evidence
Santa Clara																			Postal Records	Postal Records	SIU - Request for postal records (i.e. ID'ing PO BOX users and change of address records)	SIU Documents	SIU Documents	Evidence
Tulare																		1902TW	Request for Temporary Suspension from Participation in a Welfare to Work Activity	Client's reasoning for temporarily not cooperating with their activity	If a client feels like they are unable to cooperate with their signed activity or cannot be assigned an activity, they can fill this form out to potentially get a temporary waiver. There is no form on the CalSAWS listing that has information close to what this form is requesting	New Rec.	WTW Forms	Exemption Request
Placer																		DHCS 7045	Worker Observations - Disability	Disability/Work Reg		New Rec.	WTW Forms	Exemption Request
Riverside																		DPSS 4654	Welfare-to-Work (WTW) Activities Waiver of Liability	same as title	Disabled/exempt customer volunteers to participate.	New Rec.	WTW Forms	Exemption Request
Los Angeles																		GAIN 64	BPPE Exemption Status Request Letter	Used to request documentation from a private school of its accreditation or exempt status.	No possible map found in listing	New Rec.	WTW Forms	Exemption Request
Los Angeles																		GN 6164	Potential Exemption Gram	This is a gram used by GAIN and REP contracted staff and DPSS County Issuance Approval (CIA) staff for authorizing participant's exemption request.	No possible map found in listing	New Rec.	WTW Forms	Exemption Request
Placer																		Peace for Families Tracking Sheet	Peace for Families Tracking Sheet	WTW Participation		New Rec.	WTW Forms	Exemption Request
Placer																		Peace for Families Verification	Peace for Families Verification	WTW Exemptions		New Rec.	WTW Forms	Exemption Request
Santa Clara																		SCD 1554	CALWORKS - Domestic Abuse PARTICIPATION STATUS	Supportive Services	Forms in this category are related to various supportive services; CalSAWS forms/ categories do not meet business needs	New Rec.	WTW Forms	Exemption Request
Santa Clara																		SCD 1725	County Specific Exemption/Extender Review Form	TOA	Form is used for Time on Aid purposes; existing CalSAWS categories are too specific to processes not utilized at Santa Clara county. A general category is being requested	New Rec.	WTW Forms	Exemption Request
Napa																		SSSD 3077	Opt Out for WTW Early Engagement Education Activities			New Rec.	WTW Forms	Exemption Request
Tehama																		TEH WTW 64	Extender-Exemption Determination	Determine Exemption/Extender	Worksheet to determine exemption/extender	New Rec.	WTW Forms	Exemption Request
Initial - Santa Cruz																		WEL3343E5	Exempt Volunteer Agreement	Exempt Volunteer Agreement		New Rec.	WTW Forms	Exemption Request
Placer																		WTW 6	Welfare-to-Work Exemption Request	WTW Exemptions		New Rec.	WTW Forms	Exemption Request
Placer																		WTW 7	WTW Exemption Determination	WTW Exemptions		New Rec.	WTW Forms	Exemption Request
Contra Costa																		WTWCC 35	Universal Notification About Domestic Abuse			New Rec.	WTW Forms	Exemption Request
Contra Costa																		AAP 18A	Request to Participate in Extended AAP			Other county drawer - AAP	AAP	Extended AAP
San Luis Obispo																		DSS AAP 256	Request for Extended AAP Benefits.docx	Request to extend AAP	No document to request extension of AAP payments	Other county drawer - AAP	AAP	Extended AAP
Stanislaus																		SOC 152	Transitional Housing Placement Plus Foster Care Provider	Extended Foster Care	Extended Foster Care for 18 years of age and older. Form not found on Forms List. Over 18 years of Age Foster Family and Agency agreement. Similar Form not Found on Forms List	New Rec.	Foster Care Forms	Extended Foster Care
Stanislaus																		SOC 153	Foster Agency Agreement	Extended Foster Care		New Rec.	Foster Care Forms	Extended Foster Care

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Initial - Kern							x						KDHS 654-Serv	Relative Assessment Checklist		Application related documents; existing CalSAWS documents are too specific to index to. In order to meet county needs we need generic categories	New Rec.		Worker Use-Program Checklists	FC - Worker Use Checklists
Santa Clara							x						SCD 18	Foster Care Checklist	Application		New Rec.		Worker Use-Program Checklists	FC - Worker Use Checklists
Ventura							x						SOC 157 B	SILP Inspection: Checklist of Facility Health and Safety Standards	Contains SILP approval requirements; verifies that SILP meets eligibility standards	The SOC 157 B is completed by the SW to verify that the home the youth is residing in meets SILP standards; required documentation for Extended Foster Care (AB12) - No Match	New Rec.		Worker Use-Program Checklists	FC - Worker Use Checklists
Stanislaus							x						SOC 817	Checklist of Health and Safety	Checklist to determine home is safe and healthy for child	Checklist to determine if home is Healthy and Safe. Similar Form Not Found on Forms List	New Rec.		Worker Use-Program Checklists	FC - Worker Use Checklists
Sutter							x						SU1001	FC Unemployment Deprivation Worksheet	A manual worksheet used to determine deprivation for Foster Care benefits.	A manual worksheet used to determine deprivation for Foster Care benefits. Could not find any appropriate manual worksheets listed in the provided list.	New Rec.		Worker Use-Program Checklists	FC - Worker Use Checklists
Los Angeles														Foster Care Redetermination Checklist	Checklist	Eligibility determination.	New Rec.		Worker Use-Program Checklists	FC - Worker Use Checklists
Alameda						x							42-121	Tuition Informing Notice	Notice to client for non-payment of tuition	Form is used in a county-specific process	New Rec.		Education	Financial Aid
Placer						x							Adult School Request for Payment	Adult School Request for Payment	WTW Supportive Services		New Rec.		Education	Financial Aid
San Diego													CSF 50	Student Income Verification Request	College CalWORKS Coordinator Ancillary Request	Used to verify enrollment status, financial aid and work study to determine eligibility to CalWORKS and CalFresh	New Rec.		Education	Financial Aid
Los Angeles						x							NS-SUPPO16	NS-SUPPO16		No possible map found in listing	New Rec.		Education	Financial Aid
Los Angeles						x							NS-SUPPO18	Adult School Ancillary Request		No possible map found in listing	New Rec.		Education	Financial Aid
Los Angeles	x												PA 1853	Student Income Verification Request		No possible map found in listing	New Rec.		Education	Financial Aid
Los Angeles	x												PA 1853A	Student Income Verification Form		No possible map found in listing	New Rec.		Education	Financial Aid
Santa Clara Sutter										x			SCD 1615 SE579	Student Income Budget Yuba College parking permit	Budget Worksheet Supportive services	manual budget worksheet used when budget is incorrect in System or manual budget needs to be calculated- existing CalSAWS Documents do meet these needs form for reduced fee parking pass	New Rec. New Rec.		Education Education	Financial Aid Financial Aid
Tehama							x						TEH 802	Education Transportation Reimbursement Agreement	Foster Care Reimbursement Form	Specific to county business process for Foster Care	New Rec.		Education	Financial Aid
San Diego						x							24-525.1 HHSA (6.05)	Stage 1 Aid Paid Pending		Form used for Child Care program, No CalSAWS document type name/substitute available	New Rec.		Child Care Forms	Fiscal Related Child Care Form
San Diego Placer						x x							24-716 HHSA (8.04) ALL 129	IRS Instruction Letter Child Care Receipt		Form used for Child Care program, No CalSAWS document type name/substitute available	New Rec. New Rec.		Child Care Forms Child Care Forms	Fiscal Related Child Care Form Fiscal Related Child Care Form
Contra Costa Placer						x x	x						CCare 14 Child Care Receipt	Child Care Repayment Agreement Child Care Receipt			New Rec. New Rec.		Child Care Forms Child Care Forms	Fiscal Related Child Care Form Fiscal Related Child Care Form
Initial - Santa Cruz						x							DC8E	Child Care Payment Policy	Child Care Payment Policy		New Rec.		Child Care Forms	Fiscal Related Child Care Form
Los Angeles	x					x							PA 129-1	Child Care Information Payments		No possible map found in listing	New Rec.		Child Care Forms	Fiscal Related Child Care Form
Los Angeles	x												PA 1728-B	Receipt PT for Child Care Services		No possible map found in listing	New Rec.		Child Care Forms	Fiscal Related Child Care Form
Santa Clara Initial - Santa Cruz						x x							SCD 1755 B WEL181	Child Care Billing Return of Child Care Claims	Supportive Services Return of Child Care Claims	Forms in this category are related to various supportive services; CalSAWS forms/categories do not meet business needs	New Rec. New Rec.		Child Care Forms Child Care Forms	Fiscal Related Child Care Form Fiscal Related Child Care Form
Monterey													CO-48G	Forgery Certificate Form	The form requests the warrant payee certify under plenty of perjury that the warrant was forged and requests information about the forged warrant.	The form is required for all forged warrants and must be completed before benefit issuance staff can replace a forged warrant. There is no relevant form on the list.	New Rec.		Fiscal Forms	Forgery Certificate
San Luis Obispo										x			DSS ACCT 376	Forgery Certificate.docx	Case information for benefit replacement	Fiscal Services documentation for non-receipt of benefits. County Specific	New Rec.		Fiscal Forms	Forgery Certificate
San Luis Obispo										x			DSS ACCT 542	Forgery Certificate Needed.docx	Fiscal Services to Supervisor for stop payment	Fiscal business process, acting on report of stolen benefits	New Rec.		Fiscal Forms	Forgery Certificate
Ventura							x						56-04-025	SOC 155B Request	Request Letter; contains case information	Completed by CBS and sent to caregiver to request the completion of a form - No Match Caretakers need Relative be imaged into the case.	New Rec.		Foster Care Forms	Foster Agency or Parent Agreement
Sacramento							x						CSF 18	Caretaker Relative Agreement	Agreement to place child with relative or NREFM		New Rec.		Foster Care Forms	Foster Agency or Parent Agreement
Los Angeles													DCFS 129	Agency-Relative Caregiver Placement Agreement		Eligibility determination.	New Rec.		Foster Care Forms	Foster Agency or Parent Agreement
Contra Costa							x						FC 910	ITFC Agreement Notification-Speed Letter			New Rec.		Foster Care Forms	Foster Agency or Parent Agreement
Santa Barbara							x						FC REL 9	NREFM PLACEMENT AGREEMENT	PLACEMENT AGREEMENT	ACCEPTANCE OF RESPONSIBILITY OF CHILD IN FC PLACEMENT	New Rec.		Foster Care Forms	Foster Agency or Parent Agreement
Initial - Kern							x						KDHS 353-Serv	Acknowledgement by Parent(s)/Guardian(s)			New Rec.		Foster Care Forms	Foster Agency or Parent Agreement
Initial - Kern							x						KDHS 609-Serv	Caregiver Assessment & Agreement			New Rec.		Foster Care Forms	Foster Agency or Parent Agreement
Santa Barbara							x						SCD 154	AGENCY GROUP HOME AGREEMENT	AGENCY GROUP HOME AGREEMENT	NEEDED STATE FORM NOT ON TIER 1 LIST - REQUIRED	New Rec.		Foster Care Forms	Foster Agency or Parent Agreement
Stanislaus							x						SOC 154	Group Home Agreement	Group Home Placement	Under Age of 18 Group Home Placement. Similar Form not found on Forms List	New Rec.		Foster Care Forms	Foster Agency or Parent Agreement

Riverside				x				CSD 1827 LG	Non-Related Legal Guardian Rights and Reporting Responsibilities	Notifies NRLG of rights and responsibilities	NRLG signs and returns a copy to acknowledge they received information. No comparable form.	New Rec.	Foster Care Forms	FC Redetermination
San Luis Obispo				x				DSS FC 853	FC Relative-Guardian RV Letter.docx	FC Redetermination coverletter	FC Redetermination due and notification with due date of packet. County created, no equivalent	New Rec.	Foster Care Forms	FC Redetermination
Contra Costa				x				FC 158 RV	FOSTER CARE RV DOCUMENTATION			New Rec.	Foster Care Forms	FC Redetermination
Contra Costa				x				FC 158 RV EFC	Extended Foster Care RV Worksheet			New Rec.	Foster Care Forms	FC Redetermination
Santa Clara				x				SCD 1461	Foster Care Redetermination Appointment	Redetermination/Recertification Documents	Form is used for RRR purposes; existing CalSAWS categories are too specific to processes not utilized at Santa Clara county. A general category is being requested	New Rec.	Foster Care Forms	FC Redetermination
Santa Clara				x				SCD 2493	NDLG RRR Notice	Redetermination/Recertification Documents	Form is used for RRR purposes; existing CalSAWS categories are too specific to processes not utilized at Santa Clara county. A general category is being requested	New Rec.	Foster Care Forms	FC Redetermination
Alameda				x				Form # 45-51	Guardian Responsibilities and Rights	FC Information of reporting responsibilities	Form is specific to county Foster care program	New Rec.	Foster Care Forms	FC Rights and Responsibilities
Stanislaus				x				STAN FC 98	Miller vs Youkim (MY) Packet	Right & Respsponsibilities	Required document must be signed. Similar Form not found on Forms List	New Rec.	Foster Care Forms	FC Rights and Responsibilities
Riverside				x				DPSS 224	Vital Statistics and Property Search	Use to request birth certificates	Ets use the form to request birth certificates for foster children. No comparable form.	New Rec.	Foster Care Forms	FC Verification Statement
San Luis Obispo				x				DSS FC 110	Verification of Youth in Foster Care.docx	FC youth placement information	DSS confirms FC placement of child with time frames. County specific form	New Rec.	Foster Care Forms	FC Verification Statement
Contra Costa				x				FC 35	Foster Care Relative's Statement			New Rec.	Foster Care Forms	FC Verification Statement
Alameda				x				Form # 45-57A	Foster Care Need Letter-Relatives	Request for verifications from relative placement	Form is specific to county Foster care program	New Rec.	Foster Care Forms	FC Verification Statement
Santa Clara				x				SCD 1533	Information Regarding Foster Care Eligibility	Verification request	Form is used to request verification; existing CalSAWS categories are too specific to processes not utilized at Santa Clara county. A general category is being requested	New Rec.	Foster Care Forms	FC Verification Statement
Santa Clara				x				SCD 36	ICAMA and ICPC Benefit Verification	Verification request	Form is used to request verification; exiting CalSAWS categories are too specific to processes not utilized at Santa Clara county. A general category is being requested	New Rec.	Foster Care Forms	FC Verification Statement
Initial - Kern				x				KCDHS 611-Serv	Request Assessment of Relative Home...			New Rec.	Foster Care Forms	Foster Relative Assesment
Initial - Kern				x				KCDHS 648-Serv	Request for Assessment of Relative...			New Rec.	Foster Care Forms	Foster Relative Assesment
Initial - Kern				x				KCDHS 663-Gen	Relative Assessment Grievance Review			New Rec.	Foster Care Forms	Foster Relative Assesment
Stanislaus				x				SOC 818	Relative or Non Relative Extended Family Member Caregiver Assessment	Caregive Assessment	All answers must be answered to approve the caregiver. Similar Form not Found on Forms List	New Rec.	Foster Care Forms	Foster Relative Assesment
San Francisco			x					2323	Reduced Earned / Unearned Income - Supplemental Payment Request	Calculation to issue supplemental benefits to customers when their income reduced.	There is no index for GA Supplemental benefits when customer's income reduced.	New Rec.	Program Budgets & Worksheets	GA/GR - Budget or Worksheet
San Diego			x					11-117 HHSA	GR Aid Owed Worksheet	Worksheet to determine amount of aid to be repaid	No CalSAWS document - County specific instructions	New Rec.	Program Budgets & Worksheets	GA/GR - Budget or Worksheet
Tulare			x					658-G	Budget Work Sheet-General Assistance	GA Eligibility Budget	This is a budget that is completed to determine eligibility for the General Assistance Program. There is no form on the CalSAWS listing that has information close to what this form is requesting	New Rec.	Program Budgets & Worksheets	GA/GR - Budget or Worksheet
Butte			x					BUGA-408	General Assistance Budget Worksheet		Provides budget information. Map and proratations	New Rec.	Program Budgets & Worksheets	GA/GR - Budget or Worksheet
San Mateo			x					C-063	GA Budget	C-063 GA Budget	GA- San Mateo required form. No match found from CalSAWS.	New Rec.	Program Budgets & Worksheets	GA/GR - Budget or Worksheet
San Mateo			x					C-418	GA Grant Allocation Worksheet	C-418 (Eng) GA Grant Allocation Worksheet	GA- San Mateo required form. No match found from CalSAWS.	New Rec.	Program Budgets & Worksheets	GA/GR - Budget or Worksheet
San Luis Obispo			x					DSS GA 1	Courtesy Application Tool.docx	GA consult screen worksheet	In SLO Co. only one office manages GA cases. Tool for outer office workers to screen GA applications that will then be forwarded to GA office. Applicants do not need to travel a particular office in SLO Co.	New Rec.	Program Budgets & Worksheets	GA/GR - Budget or Worksheet
San Luis Obispo			x					DSS GA 48	GA Employable Split Payment Worksheet.docx	GA worker tool to issue and record split payments	SLO Co. splits GA payments based on compliance (job search).	New Rec.	Program Budgets & Worksheets	GA/GR - Budget or Worksheet
Santa Clara			x					GA 10	General Assistance Budget Worksheet	Budget Worksheet	manual budget worksheet used when budget is incorrect in System or manual budget needs to be calculated- existing CalSAWS Documents do meet these needs	New Rec.	Program Budgets & Worksheets	GA/GR - Budget or Worksheet
Santa Clara			x					GA 10 H	General Assistance Budget Worksheet – Homeless	Budget Worksheet	manual budget worksheet used when budget is incorrect in System or manual budget needs to be calculated- existing CalSAWS Documents do meet these needs	New Rec.	Program Budgets & Worksheets	GA/GR - Budget or Worksheet

[illegible]

Sacramento																	SAC 2013_34C	Administrative Hearing Appointment Letter	hearing appt letter for CM and GA	Hearing appt letter for CMISP program and GA. A copy should be imaged into case file for record keeping	New Rec.	Court/Hearings Document	GA/GR Fair Hearing
Sacramento																	SAC 2014_34C	Administrative Hearing with Standby Telephone Appointment Letter	hearing appt letter for CM and GA	Hearing appt letter for CMISP program and GA. A copy should be imaged into case file for record keeping	New Rec.	Court/Hearings Document	GA/GR Fair Hearing
Napa				x													SSSD 4015	GA Notice of Intended Action and Right to Request a Hearing			Court/Hearings Document	Court/Hearings Document	GA/GR Fair Hearing
Ventura				x													56-07-040	GR IPV Evaluation	IPV Case Review	IPV Findings and Recommendation-No Match	New Rec.	GA/GR Forms	GA/GR Fiscal Form
Ventura				x													56-07-042	GR Notice of Request for Administrative Review and Aid Paid Pending Order	Admin Review Request & Aid Paid Pending Order	Admin Review Communication Memo-No Match	New Rec.	GA/GR Forms	GA/GR Fiscal Form
Butte																	BUGA 411	Lump Sum Notice	Gives Lump Sum information and rules		New Rec.	GA/GR Forms	GA/GR Fiscal Form
San Mateo				x													C-419	Food Checks Notification	C-419 (Eng) Food Checks Notification	GA- San Mateo required form. No match found from CalSAWS.	New Rec.	GA/GR Forms	GA/GR Fiscal Form
San Luis Obispo				x													DSS ACCT 75 Form 2275	Authorization to Disbursing Order for GA Transients.docx	Authorization to authorize GA payments for emergency assistance	Tracking document for Fiscal Dept.	New Rec.	GA/GR Forms	GA/GR Fiscal Form
San Francisco				x													REV 01-11-19	CAAP Benefit Package Disclosure	CAAP Benefit Package Disclosure	No available index listed in CalSAWS	New Rec.	GA/GR Forms	GA/GR Fiscal Form
San Bernardino				x													GR 711	Authorization For Payment Of General Relief	Authorizes GR payment	Used to authorize emergency GR payments - no comparable form	New Rec.	GA/GR Forms	GA/GR Fiscal Form
Sonoma				x													HSD308	Assignment of General Assistance Benefits [308]	Assignment of General Assistance Benefits [308]	General Assistance	New Rec.	GA/GR Forms	GA/GR Fiscal Form
Sonoma				x													HSD54	General Assistance Grant Allocation Distribution [54]	General Assistance Grant Allocation Distribution [54]	General Assistance	New Rec.	GA/GR Forms	GA/GR Fiscal Form
Initial - Kern																	KCDHS 761-GA	We May Owe you Money			New Rec.	GA/GR Forms	GA/GR Fiscal Form
Stanislaus				x													STAN GA 2	General Assistance (GA) Program Voucher Request	Work Related Shoes or Clothing Requested	Payment Voucher to be used for Customer's purchase. Similar form is not listed on Forms List	New Rec.	GA/GR Forms	GA/GR Fiscal Form
San Francisco																	2217	Notice of Proposed Action Benefit Held	To Hold Customer benefits for appointments or homeless residency verification.	There is no GA/GR index for holding customer benefits for appointments and homeless residency verification.	New Rec.	GA/GR Forms	GA/GR Housing
Alameda				x													90-156	General Assistance Application for Homeless Assistance	GA Application for Homeless Assistance	Form is specific to county General Assistance program	New Rec.	GA/GR Forms	GA/GR Housing
San Mateo				x													C-421 Form 2274	Savings for Permanent Housing	C-421 (Eng) Savings for Permanent Housing	GA- San Mateo required form. No match found from CalSAWS.	New Rec.	GA/GR Forms	GA/GR Housing
San Francisco				x													REV 01-01-19	CAAP Homeless Client Agreement	CAAP Homeless Client Agreement	No available index listed in CalSAWS	New Rec.	GA/GR Forms	GA/GR Housing
Sonoma				x													HSD12	General Assistance Rental Agreement [12]	General Assistance Rental Agreement [12]	General Assistance	New Rec.	GA/GR Forms	GA/GR Housing
Sonoma				x													HSD1320	GA Facility Rent Tracking [1320]	GA Facility Rent Tracking [1320]	General Assistance	New Rec.	GA/GR Forms	GA/GR Housing
Los Angeles				x													PA 6142	GRHSCMP Ineligible Notice		No possible map found in listing	New Rec.	GA/GR Forms	GA/GR Housing
Los Angeles				x													PA 6152	GRHSCMP Move-In Assistance Funds Request Form		No possible map found in listing	New Rec.	GA/GR Forms	GA/GR Housing
Los Angeles				x													PA 6169	GRHSCMP PA 4144 and W-9 Control Form		No possible map found in listing	New Rec.	GA/GR Forms	GA/GR Housing
Los Angeles				x													PA 6182	GRHSCMP Agreement		No possible map found in listing	New Rec.	GA/GR Forms	GA/GR Housing
Napa				x													SSSD 4004	GA Rental Agreement			New Rec.	GA/GR Forms	GA/GR Housing
Los Angeles				x													PA 6168	GRHSCMP Appointment Notice		No possible map found in listing	New Rec. CSF XXX	Appointment Letter	GA/GR Housing
Los Angeles				x													PA 6156	GRHSCMP TERMINATION NOTICE		No possible map found in listing	New Rec. New Rec.	Manual <Program> NOA GA/GR Forms	GA/GR Housing
Los Angeles				x													PA 6157	GRHSCMP MOVE-IN ASSISTANCE INELIGIBLE NOTICE		No possible map found in listing	New Rec. New Rec.	Manual <Program> NOA GA/GR Forms	GA/GR Housing
Los Angeles				x													PA 6165	GRHSCMP MOVE-IN ASSISTANCE APPROVAL NOTICE		No possible map found in listing	New Rec. New Rec.	Manual <Program> NOA GA/GR Forms	GA/GR Housing
San Diego																	11-102 HHSA	GR Overpayment Status Request	Request to Revenue & Recovery on status of collection of overpayment when a customer reapplies	No CalSAWS document - County specific instructions	New Rec.	GA/GR Forms	GA/GR Overpayment
Napa				x													SSSD 4018	GA Overpayment Balance Sheet			New Rec.	GA/GR Forms	GA/GR Overpayment
Ventura				x													56-07-467	GR Payment and Security Agreement	Lien Agreement	GR Specific Lien Agreement-No Match	New Rec.	GA/GR Forms	GA/GR Repayment Agreement
Butte				x													BUGA 420	Agreement to Repay	Customers agreement to repay GA Loan	Statement provided to client requesting signature ensuring that they understand that they agree to repay the GA assistance received	New Rec.	GA/GR Forms	GA/GR Repayment Agreement
Ventura				x													Fiscal	Repayment agreement	Captures terms of repayment agreement	Needed to capture terms of agreement - Possible match	New Rec.	GA/GR Forms	GA/GR Repayment Agreement
Napa				x													SSSD 4002	GA Repayment Agreement			New Rec.	GA/GR Forms	GA/GR Repayment Agreement
Napa				x													SSSD 4014	GA SSI Lump Sum Repayment Agreement			New Rec.	GA/GR Forms	GA/GR Repayment Agreement
Santa Barbara	x																W 153	CW GR CF REPAYMENT	DOCUMENTED REPAYMENTS FOR CF, GR, CW	USED AS VERIFICATION OF REPAYMENT	New Rec.	GA/GR Forms	GA/GR Repayment Agreement
Santa Barbara				x													W 200	AGREEMENT TO REIMBURSE COUNTY	GR GRANT	NEEDED FORM NOT ON TIER 1 LIST	New Rec.	GA/GR Forms	GA/GR Repayment Agreement

San Diego				x												11-22 HHSA	GR Grant of Lien	Legal document naming County as grantee of real property to repay GR	No CalSAWS document	New Rec.	GA/GR Forms	GA/GR Repayment Document
San Diego				x												11-5 HHSA	Assignment of Proceeds	Assigns proceeds from a claim to repay GR	No CalSAWS document - County specific instructions	New Rec.	GA/GR Forms	GA/GR Repayment Document
San Diego				x												11-5A HHSA	GR Referral for Assignment of Interest	Referral to Revenue & Recovery to claim against a third party for repayment of GR	No CalSAWS document - County specific instructions	New Rec.	GA/GR Forms	GA/GR Repayment Document
San Bernardino				x												AUD 190 Eng & SP	Request to Repay General Relief	Request to Repay GR	Notification to GR customer repayment must start - no comparable form	New Rec.	GA/GR Forms	GA/GR Repayment Document
San Bernardino				x												AUD 191 Eng & SP	Request to Repay GR; SBCo Received SSA Payment	Request to Repay GR	Notification to GR customer repayment must start - no comparable form	New Rec.	GA/GR Forms	GA/GR Repayment Document
Butte				x												BU GA 869 Repay Attachment	Information letter explaining that Revenue and Recovery now has clients GA records	Information and gives customers details on how determining the ability to pay back loan	Provides clients of payment arrangements and payback options for repaying GA Loan	New Rec.	GA/GR Forms	GA/GR Repayment Document
Stanislaus				x												GA 1	Affidavit and Promissory Note	Legal Document-Promise to Pay	Repayment of potential SSA, Pension, etc. Monies granted to customer to repay County of Stanislaus for monies used from General Fund	New Rec.	GA/GR Forms	GA/GR Repayment Document
Santa Clara				x												GA 18	General Assistance Mandatory Billing Form	Miscellaneous	There needs to be a generic miscellaneous category for documents that do not index to any of the existing existing CalSAWS Documents and it does not make business sense to create a new category	New Rec.	GA/GR Forms	GA/GR Repayment Document
Stanislaus																Lien 1	Grant Lien to County of Stanislaus (W&I Code 17109)	Property Lien	Treasurer-Tax Collector's Office Form is used for General Assistance recipients	New Rec.	GA/GR Forms	GA/GR Repayment Document
Santa Clara				x												SCD 174	GA Repayment Agreement	Client Request/Agreement	This form is a client request or agreement; county business needs require a generic category; existng CalSAWS documents do contain a general request and/or agreement	New Rec.	GA/GR Forms	GA/GR Repayment Document
Santa Clara				x												SCD 523	General Assistance Cooperation Agreement	Client Request/Agreement	This form is a client request or agreement; county business needs require a generic category; existng CalSAWS documents do contain a general request and/or agreement	New Rec.	GA/GR Forms	GA/GR Repayment Document
Santa Clara				x												SCD 523 U	GA Cooperation Agreement	Client Request/Agreement	This form is a client request or agreement; county business needs require a generic category; existng CalSAWS documents do contain a general request and/or agreement	New Rec.	GA/GR Forms	GA/GR Repayment Document
San Francisco				x												2152	CAAP Warning - Act of Negligent Failure	Warning for the 1st and 2nd failure for CAAP requirements and/or eligibilities.	There is no GA/GR index for warning of negligent failure.	New Rec.	GA/GR Forms	GA/GR Supporting Document
San Diego				x												11-104 HHSA	GR Request for Person over 65	Request to Manager to approve GR for a customer over 65	No CalSAWS document - County specific instructions	New Rec.	GA/GR Forms	GA/GR Supporting Document
San Diego				x												11-105 HHSA	Hardship Waiver Request	Request for Program Manager to review for a hardship waiver of GR rules	No CalSAWS document - County specific instructions	New Rec.	GA/GR Forms	GA/GR Supporting Document
San Francisco																2133 A	Supplemental (CAAP)	Supplemental (CAAP)	No available index listed in CalSAWS	New Rec.	GA/GR Forms	GA/GR Supporting Document
San Francisco				x												2133 Supplemental Questions (02/03/2020)	CAAP Supplemental Questions	CAAP Supplemental Questions	No available index listed in CalSAWS	New Rec.	GA/GR Forms	GA/GR Supporting Document
Solano				x												48-70-67	Child Separation Form	GA specific form allows client to indicate why living separate from minor children.	No match in the provided CalSAWS document. Form is specific to county General Assistance program	New Rec.	GA/GR Forms	GA/GR Supporting Document
Alameda																80-39	PST WARNING DENIAL NOTICE	inter-agency communication document		New Rec.	GA/GR Forms	GA/GR Supporting Document
Butte				x												BUGA 94	GA Sanction Process	Information regarding the sanction process	Provides requirements for Employable adults and explains why sanctions are implemented.	New Rec.	GA/GR Forms	GA/GR Supporting Document
San Luis Obispo				x												DSS GA 189	GA SDA Consult Guide.docx	GA Same Day Appt. consult guide	Worker tool to determine if GA application meets requirements for same day appointment. County specific.	New Rec.	GA/GR Forms	GA/GR Supporting Document
San Luis Obispo				x												DSS GA 30	Case Info Letter.docx	Informaiton letter for GA informing of Case#, GA/CF stagger dates and periodic report cycles	County specific informing notice for GA applicants/recipients. Includes worker contact information	New Rec.	GA/GR Forms	GA/GR Supporting Document
San Francisco																Form 2502 REV 08-01-18	VIP Outcome Report	VIP Outcome Report	No index for GA	New Rec.	GA/GR Forms	GA/GR Supporting Document
Los Angeles				x												GR 17	Bridges for Veterans Referral Form and SSV Referral Process		No possible map found in listing	New Rec.	GA/GR Forms	GA/GR Supporting Document
Los Angeles				x												GROW 23 WIOA	Workforce Innovation and Opportunity Act Two-Way Referral Form		No possible map found in listing	New Rec.	GA/GR Forms	GA/GR Supporting Document
Initial - Kern				x												KCDHS 1-A Reg	Client Information for GA Packet			New Rec.	GA/GR Forms	GA/GR Supporting Document
Initial - Kern				x												KCDHS 697-GA	CA Department of Rehabilitation Flyer			New Rec.	GA/GR Forms	GA/GR Supporting Document
Initial - Kern				x												KCDHS 747-GA	Need Help Flyer/Poster			New Rec.	GA/GR Forms	GA/GR Supporting Document
Initial - Kern				x												KCDHS 795-GA	GA Supervisor Review Sheet			New Rec.	GA/GR Forms	GA/GR Supporting Document
Solano				x												N/A	Reasonable Accommodations	General Assistance form allows for client to request a phone intake	No match in the provided CalSAWS document.	New Rec.	GA/GR Forms	GA/GR Supporting Document
Napa				x												SSSD 4019	GA Time Limit Tracking Sheet			New Rec.	GA/GR Forms	GA/GR Supporting Document
Santa Barbara																W 473	GR CASE REVIEW	GR CASE REVIEW	NEEDED FORM NOT ON TIER 1 LIST	New Rec.	GA/GR Forms	GA/GR Supporting Document
San Diego																11-121 HHSA	Request for Temporary Administrative Exemption from GR Employable Requirements	Request form to determine if a person can be temporarily exempted from work requirements	No CalSAWS document - County specific instructions	New Rec.	GA/GR Work and Activities Forms	GA/GR Supporting Work Document

San Diego				x												11-49M HHSA	GR Employable Program Requirements - MAPC	MAPC Employable Program Requirements	No CalSAWS document - County specific instructions	New Rec.		GA/GR Work and Activities Forms	GA/GR Supporting Work Document
San Diego				x												11-65 HHSA	Applicant's Statement of Employability	Statement from customer about ability to complete a work project	No CalSAWS document - County specific instructions	New Rec.		GA/GR Work and Activities Forms	GA/GR Supporting Work Document
San Diego				x												11-8 HHSA	GR Transportation to Resource Plan	Plan to get customer to resource	No CalSAWS document - County specific instructions	New Rec.		GA/GR Work and Activities Forms	GA/GR Supporting Work Document
Ventura				x												56-06-677	GPDR - Potholes & Detours (06/18)	Planning	Client goal planning-no match	New Rec.		GA/GR Work and Activities Forms	GA/GR Supporting Work Document
Ventura				x												56-07-044	GR 12-Step Meeting Attendance Card	12-Step Meeting Attendance Card	Attendance verification	New Rec.		GA/GR Work and Activities Forms	GA/GR Supporting Work Document
Santa Barbara					x											E 4A	GR FSET WORK HISTORY	GR FSET WORK HISTORY	NEEDED FORM NOT ON TIER 1 LIST	New Rec.		GA/GR Work and Activities Forms	GA/GR Supporting Work Document
Sonoma				x												HSD1380	Facility General Assistance Turning Point 31 Day Notice [1380]	Facility General Assistance Turning Point 31 Day Notice [1380]	General Assistance	New Rec.		GA/GR Work and Activities Forms	GA/GR Supporting Work Document
Santa Barbara				x												W 622	GENERAL RELIEF INCIDENT REPORT	GENERAL RELIEF INCIDENT REPORT	NEEDED FORM NOT ON TIER 1 LIST	New Rec.		GA/GR Work and Activities Forms	GA/GR Supporting Work Document
San Francisco																2185	Immigration Documentation Verification	Deadline and/or appointment for customers to submit document for their immigration status.	There is no GA/GR index for immigration.	New Rec.		GA/GR Forms	GA/GR Verification Form
San Diego																11-103 HHSA	GR Preponderance of ID	Documentation of preponderance of evidence for GR ID	No CalSAWS document - County specific instructions	New Rec.		GA/GR Forms	GA/GR Verification Form
San Diego				x												11-74 HHSA	GR Verification Checklist	Items needed at GR Intake appointment	No CalSAWS document - County specific instructions	New Rec.		GA/GR Forms	GA/GR Verification Form
Solano				x												48-70-32	General Assistance Verification Checklist	Verification checklist specific to General Assistance population	No match in the provided CalSAWS document.	New Rec.		GA/GR Forms	GA/GR Verification Form
Tehama				x												TEH/GA 4	GA Perjury Statement (English/Spanish)	GA Perjury Stmt	Specific to county business process for GA	New Rec.		GA/GR Forms	GA/GR Verification Form
San Diego				x												11-46M HHSA	GR Notice of MAPC Work Project Assignment	Notice to customer of their MAPC work assignment	No CalSAWS document - County specific instructions	New Rec.		GA/GR Work and Activities Forms	GA/GR Work Agreement
San Diego				x												11-49 HHSA	GR Employable Program Responsibilities	Employable Program Responsibilities	No CalSAWS document - County specific instructions	New Rec.		GA/GR Work and Activities Forms	GA/GR Work Agreement
Ventura				x												56-07-061	GR Contract	Services Agreement	GR Personal Responsibility and Services Agreement-No Match	New Rec.		GA/GR Work and Activities Forms	GA/GR Work Agreement
Ventura				x												56-07-061A	GR Contract ADP	Services Agreement	GR Personal Responsibility and Services Agreement-Drug and Alcohol Program-No Match	New Rec.		GA/GR Work and Activities Forms	GA/GR Work Agreement
Ventura				x												56-07-061F	GR Contract PHY	Services Agreement	GR Personal Responsibility and Services Agreement-Physical Disability-No Match	New Rec.		GA/GR Work and Activities Forms	GA/GR Work Agreement
Ventura				x												56-07-061K	GR Contract ES	Services Agreement	GR Personal Responsibility and Services Agreement-Employment-No Match	New Rec.		GA/GR Work and Activities Forms	GA/GR Work Agreement
Ventura				x												56-07-061M	GR Contract MH	Services Agreement	GR Personal Responsibility and Services Agreement-Mental Health-No Match	New Rec.		GA/GR Work and Activities Forms	GA/GR Work Agreement
Butte				x												BU CW-522	GA Employment Contact	Employment search for GA Clients	Provides information on GA recipients that are actively searching for employment	New Rec.		GA/GR Work and Activities Forms	GA/GR Work Agreement
Sonoma				x												HSD2	General Assistance Incapacitated Persons Agreement [2]	General Assistance Incapacitated Persons Agreement [2]	General Assistance	New Rec.		GA/GR Work and Activities Forms	GA/GR Work Agreement
Initial - Santa Cruz																WEL4043E	GA Incapacitated Person Agreement	GA Incapacitated Person Agreement		New Rec.		GA/GR Work and Activities Forms	GA/GR Work Agreement
San Diego				x												14-10	Transmittal of CMS/Medi-Cal information	Communication form between county workers and hospitals	The county uses this form to communicate application dispositions to hospitals	New Rec.		Worker/Worker Contact	General Worker Contact
San Diego															x	14-86	Citizenship/Identity Documentation Transmittal	Access uses form to transmit documents to FRCs	Used to send PII to FRCs.	New Rec.		Worker/Worker Contact	General Worker Contact
Alameda					x											42-101	WECSP Communication Form	EC/CDS I communication form	Form is used in a county-specific process	New Rec.		Worker/Worker Contact	General Worker Contact
Alameda					x											50-20e	Employment Services Case Routing Transfer Slip	Internal communication form	Form is used in a county-specific process	New Rec.		Worker/Worker Contact	General Worker Contact
Ventura																56-04-036	Guardianship Referral Notification (Non-Related Legal Guardian)	Internal form; contains guardian and case information	Completed by CBS to inform SW of new NRLG case received; provides necessary information to set up the child welfare case - No Match	New Rec.		Worker/Worker Contact	General Worker Contact
Ventura																56-04-037	Overpayment Explanation	Internal memo; contains overpayment details: dates, amount and details of what caused overpayment	Completed by CBS and provided to unit supervisor for overpayment tracking purposes; allows CFS management to monitor SW caused overpayments - No Match	New Rec.		Worker/Worker Contact	General Worker Contact
Ventura										x						56-12-425	Detention Alert E-mail Template	Contains placement and removal details	Completed by ER SW and provided to eligibility to notify them (along with others) that a child has been removed; could be scanned in with the 56-12-150 if that is an option in Cal SAWS - No Match	New Rec.		Worker/Worker Contact	General Worker Contact
Alameda				x												90-14	GA Case Information Update Request-SW	GA Internal communication document	Form is specific to county General Assistance program	New Rec.		Worker/Worker Contact	General Worker Contact
Sacramento																CF 2010_34C	Quality Control Request to Rescind Case Action (Sanction)	A notice sent to EW to remove the CF sanction off the case	When the customer starts to cooperate with QC this notice is generated to the EW to remove the sanction, it needs to be imaged and processed when received	New Rec.		Worker/Worker Contact	General Worker Contact
San Bernardino										x						FC 120	EFC Transmittal Form	Communication form	Used to communicate between FC EW and SW. no comparable form	New Rec.		Worker/Worker Contact	General Worker Contact
Contra Costa										x		x	x			GBC 3	SW Notice to GBC/Tech (Child Receives Other Benefits)			New Rec.		Worker/Worker Contact	General Worker Contact
Los Angeles					x											GN 6175	Early Compliance Phone Call Tracking Sheet	Tracking sheet used by GSWs/CCMs to track early compliance calls.	No possible map found in listing	New Rec.		Worker/Worker Contact	General Worker Contact
Los Angeles	x				x											GN 6184	CalWORKs Notice of Change	Used between the GAIN Regions and District Offices to communicate participant changes.	No possible map found in listing	New Rec.		Worker/Worker Contact	General Worker Contact

Los Angeles					x												GN 6410	Overpayment Repayment Gram	This is a gram used by GAIN and REP contracted staff and DPSS County Issuance Approval (CIA) staff to create, activate, adjust, or resolve an overpayment recovery account.	No possible map found in listing	New Rec.	Worker/Worker Contact	General Worker Contact
Solano																	N/A	Housing Programs Communication	Communication template for correspondence between housing programs	No match in the provided CalSAWS document.	New Rec.	Worker/Worker Contact	General Worker Contact
Santa Clara																x	SCD 1604	IEVS Communication	Miscellaneous	There needs to be a generic miscellaneous category for documents that do not index to any of the existing existing CalSAWS Documents and it does not make business sense to create a new category	New Rec.	Worker/Worker Contact	General Worker Contact
Santa Clara																	SCD 2491	RRR Notice to SW	Redetermination/Recertification Documents	Form is used for RRR purposes; existing CalSAWS categories are too specific to processes not utilized at Santa Clara county. A general category is being requested	New Rec.	Worker/Worker Contact	General Worker Contact
Santa Clara																	SCD 2492	RRR (NMD) Notice to SW	Redetermination/Recertification Documents	Form is used for RRR purposes; existing CalSAWS categories are too specific to processes not utilized at Santa Clara county. A general category is being requested	New Rec.	Worker/Worker Contact	General Worker Contact
Initial - Santa Cruz																	WEL3341	BR/ETS Communication Template	BR/ETS Communication Template		New Rec.	Worker/Worker Contact	General Worker Contact
Yolo																	YC 288A	Gift Card Transmittal	Documentation between employment services staff and Fiscal department when a gift card is issued.	Tracks issuance of gift cards.	New Rec.	Worker/Worker Contact	General Worker Contact
Los Angeles															x		ASH 271	Acknowledgment of Request for Hearing		No possible map found in listing	Court/Hearings Document	Court/Hearings Document	Hearing Request
Los Angeles															x		ASH271	Hearing Request Acknowledgment	ASH use only	No possible map found in listing	Court/Hearings Document	Court/Hearings Document	Hearing Request
Los Angeles															x		ASH271R	Hearing Request Acknowledgment for AR	ASH use only	No possible map found in listing	Court/Hearings Document	Court/Hearings Document	Hearing Request
San Bernardino																x	FC 960	Informal Hearing Request	Communication form	Used by Supervisor to communicate request for a hearing by a provider - no comparable form	Court/Hearings Document	Court/Hearings Document	Hearing Request
Santa Clara																x	NA Back 9	Your Hearing Rights	Appeals	Contains county specific information regarding hearing rights- existing CalSAWS Documents do not meet these needs	NA Back 9 is automatically sent on all system generated NOAs. Court/Hearings Document	Court/Hearings Document	Hearing Request
San Mateo															x			Notification of Hearing Request and Request for Case Record	Notification of Hearing Request and Request for Case Record	All Programs - San Mateo County required form. No match found from CalSAWS.	Court/Hearings Document	Court/Hearings Document	Hearing Request
Los Angeles															x		ASH 274	ASH Request to Appear as Witness at State Hearing	ASH use only	No possible map found in listing	Court/Hearings Document	Court/Hearings Document	Hearing Supporting Documentation
San Luis Obispo																x	DSS GA 405	SSI Administrative Law Judge Hearing Level.docx	Informing notice to GA applicant about SSA hearing. DSS unable to represent	County created correspondence to GA recipient and information to contact list of advocates and attorneys for SSA hearing. County specific form	Court/Hearings Document	Court/Hearings Document	Hearing Supporting Documentation
San Bernardino																x	FC 930	Informal Hearing Narrative	Tracks hearing information	Used by district manager to track information in regards to the informal hearing process - no comparable form	Court/Hearings Document	Court/Hearings Document	Hearing Supporting Documentation
Initial - Santa Cruz																x	FH Template	Fair Hearings Template	Fair Hearings Template		Court/Hearings Document	Court/Hearings Document	Hearing Supporting Documentation
San Francisco																x	Form 078	Initial contact with claimant	County form	This form documents initial contact with Appeals claimant	Court/Hearings Document	Court/Hearings Document	Hearing Supporting Documentation
Contra Costa																x	MC 129 A (3/16)	MC Compliance Notice State Hearing Decision			Court/Hearings Document	Court/Hearings Document	Hearing Supporting Documentation
Santa Clara																	SCD 143	Consent to Release Social Services Records to An Authorized Representative for a State Hearing	Appeals	For Appeals purses allows clients to consent to release to an AR- existing CalSAWS Documents do not meet these needs	Court/Hearings Document	Court/Hearings Document	Hearing Supporting Documentation
Santa Clara																x	SCD 2296	Appeals Case Review Check List	Appeals	Appeals purposes checklist for client; existing CalSAWS Documents do not meet these needs	Court/Hearings Document	Court/Hearings Document	Hearing Supporting Documentation
Santa Clara																x	SCD 555	Notice Of Filing Of Fair Hearing	Appeals	Appeals purposes- notice of action; existing CalSAWS documents do not meet these needs	Court/Hearings Document	Court/Hearings Document	Hearing Supporting Documentation
Los Angeles																x	ASH 1022	ASH Report Worksheet	ASH use only	Eligibility determination.	New Rec.	Court/Hearings Document	Hearing Supporting Documentation
Initial - Kern																	KCDHS 408-Gen	Administrative Review Hearing Notice Worksheet			Court/Hearings Document	Court/Hearings Document	Hearing Worksheet
Los Angeles																x	PA 1022	State Hearing Report Worksheet		No possible map found in listing	Court/Hearings Document	Court/Hearings Document	Hearing Worksheet
Sacramento																	SC 752	Administrative Hearing Interview Sheet for CMISP	Administrative hearing request for CMISP interview sheet	Completed by EW in preparation for a CMISP hearing, should be imaged into case file for record keeping	New Rec.	Court/Hearings Document	Hearing Worksheet
San Francisco																	-	Bridge - Final 03.07.17-EN	"MY JOURNEY TO CROSS THE BRIDGE TO WELL-BEING"	local Home Visiting Program - no existing index code in CalSAWS	New Rec.	Home Visit Program (HVP) Forms	Home Visit Form
San Francisco																	-	FaR Admission LTR	Families Rising Admission Letter	local Home Visiting Program - no existing index code in CalSAWS	New Rec.	Home Visit Program (HVP) Forms	Home Visit Form
San Francisco																	-	FaR Case Closure LTR-E	Families Rising Case Closure Letter (from Enrollment)	local Home Visiting Program - no existing index code in CalSAWS	New Rec.	Home Visit Program (HVP) Forms	Home Visit Form
San Francisco																	-	FaR Case Closure LTR-R	Families Rising Case Closure Letter (from Recruitment)	local Home Visiting Program - no existing index code in CalSAWS	New Rec.	Home Visit Program (HVP) Forms	Home Visit Form

San Francisco																-	FaR Disengagement LTR	Families Rising Disengagement Letter	local Home Visiting Program - no existing index code in CalSAWS	New Rec.	Home Visit Program (HVP) Forms	Home Visit Form	
San Francisco																-	FaR Non-Admission LTR	Families Rising Non-Admission Letter	local Home Visiting Program - no existing index code in CalSAWS	New Rec.	Home Visit Program (HVP) Forms	Home Visit Form	
San Francisco																-	FaR Opting Out LTR	Families Rising Opting Out Letter	local Home Visiting Program - no existing index code in CalSAWS	New Rec.	Home Visit Program (HVP) Forms	Home Visit Form	
San Francisco																-	FaR Unable to Reach LTR	Families Rising Unable to Reach Letter	local Home Visiting Program - no existing index code in CalSAWS	New Rec.	Home Visit Program (HVP) Forms	Home Visit Form	
San Francisco																	FC_-_ph_-_welcome_to_pat; RF_ParticipationAgreementAndConsentForServices-Fillable U	Welcome to Parents as Teachers; Participation Agreement and Consent for Services	local Home Visiting Program - no existing index code in CalSAWS	New Rec.	Home Visit Program (HVP) Forms	Home Visit Form	
Merced	x															24-3093	HSP Home Visit Budgeting Packet	Home visit notes & goals	Category does not exist in CalSAWS.	New Rec.	Home Visit Program (HVP) Forms	Home Visit Form	
Ventura																56-06-683	Home Visiting Initiative (HVI) Program Referral (03/19)	Referral	Referral to HVP-no match	New Rec.	Home Visit Program (HVP) Forms	Home Visit Form	
Butte																BU 27	Filed Visit Record	Field Visit Form	Field and Home Visit Form	New Rec.	Home Visit Program (HVP) Forms	Home Visit Form	
San Luis Obispo																x	DSS GEN 400	Home Visit Pre-Interview Questionnaire.docx	Generic pre-interview checklist and information for home visits.	Document used by Eligibility and CWS to gather facts prior to home visit.	New Rec.	Home Visit Program (HVP) Forms	Home Visit Form
Orange	x																F063-02-382	Home Call Letter	HVP Program	Assembly Bill 1811	New Rec.	Home Visit Program (HVP) Forms	Home Visit Form
																			Assembly Bill 1811 (Chapter 35, Statutes of 2018) appropriates funding for the implementation of the HVP within the CalWORKs program. The HVP will provide an opportunity to demonstrate the impact of home visiting services with the CalWORKs population.				
Orange	x																F063-30-968	Home Visiting Program (HVP)	HVP Program		New Rec.	Home Visit Program (HVP) Forms	Home Visit Form
																		Attendance form for providers to complete and allow WTW hours for participating in HVP					
Orange																	F063-41-440	Home Visiting Program (HVP) WTW Attendance	Home Visiting Program (HVP) WTW Attendance		New Rec.	Home Visit Program (HVP) Forms	Home Visit Form
																			This form is a client request or agreement; county business needs require a generic category; existing CalSAWS documents do contain a general request and/or agreement				
Santa Clara																	GA 66	Home Visit Request	Client Request/Agreement		New Rec.	Home Visit Program (HVP) Forms	Home Visit Form
Los Angeles																	GN 6414	HOME VISITATION WELFARE-TO-WORK PARTICIPANT ENROLLMENT RESULTS FORM	This form is completed by the Home Visitor and sent to the GSW/CCM/RCM to advise of the Home Visiting Program Enrollment Disposition	No possible map found in listing	New Rec.	Home Visit Program (HVP) Forms	Home Visit Form
Los Angeles																	GN 6415	HOME VISITATION WELFARE-TO-WORK PARTICIPANT PROGRESS REPORT	This form advises GSWs/CCMs/RCMs of the status of the participant's Home Visiting activity quarterly.	No possible map found in listing	New Rec.	Home Visit Program (HVP) Forms	Home Visit Form
Los Angeles																	GN 6417	NOTIFICATION OF CHANGE FROM HOME VISITING PROGRAM PROVIDER	This form is completed by the Home Visitor to advise the GSW/CCM/RCM of a change in the activity or a participant need.	No possible map found in listing	New Rec.	Home Visit Program (HVP) Forms	Home Visit Form
Sutter																	HSP16	home visit log	HSP home visits	to log visits to HSP customers	New Rec.	Home Visit Program (HVP) Forms	Home Visit Form
Initial - Kern	x																KCDHS 13-CW	CW Home Visitation (HVP) Timesheet			New Rec.	Home Visit Program (HVP) Forms	Home Visit Form
Los Angeles																	PA 6204	HOME VISITATION PROGRAM TERMINATION	This completed by the Home Visitor to advise the GSW/CCM/RCM or GAIN Program staff that the participant is no longer participating in the Home Visiting Program.	No possible map found in listing	New Rec.	Home Visit Program (HVP) Forms	Home Visit Form
Ventura	x																56-03-006	Homeless Assistance Control Sheet	Homeless Tracking form	Tracking of issuance of HA benefits outside the system. No Match	New Rec.	HSP and Homeless Assistance Forms	Homeless Tracking and Authorization
Placer																	ALL 90	Homeless Auth	Homeless		New Rec.	HSP and Homeless Assistance Forms	Homeless Tracking and Authorization
San Luis Obispo	x																DSS CW 217	Homeless Assistance Eligibility and Tracking.docx	THP and PHP tracking eligibility, payments and supervisor approval	Worker tool to record all steps needed to issue PSP and/or TSP. County specific	New Rec.	HSP and Homeless Assistance Forms	Homeless Tracking and Authorization
																			Sworn Statement to authorize release of information for staff to verify homelessness.				
Ventura	x																56-03-006A	Authorization to Verify Homelessness		To verify homelessness for initial THA payment. No match	New Rec.	HSP and Homeless Assistance Forms	Homeless Verification
																			Sworn Statement to authorize release of information for staff to verify homelessness if unable to verify during first contact.	To verify homelessness for subsequent THA payments. No match	New Rec.	HSP and Homeless Assistance Forms	Homeless Verification
Ventura	x																56-03-006B	Verification of Homelessness			New Rec.	HSP and Homeless Assistance Forms	Homeless Verification
Los Angeles	x																PA 6187	PHASE Homeless Consent and Release Agreement.		No possible map found in listing	New Rec.	HSP and Homeless Assistance Forms	Homeless Verification
Tehama	x																TEH 734	Permanent Housing Statement (English/Spanish)	Permanent Housing Statement	No comparable form in new system/state forms	New Rec.	HSP and Homeless Assistance Forms	Homeless Verification
San Francisco																	7073	HSP Screening Tool	CalWORKs Housing Support Program Housing Assistance Assessment Tool	local Housing Support Program - no existing index code in CalSAWS	New Rec.	HSP and Homeless Assistance Forms	Housing or Homeless Assessment
																			Form used by workers to complete assessment				
Merced																	24-4105	HDAP - Assessment		Category does not exist in CalSAWS.	New Rec.	HSP and Homeless Assistance Forms	Housing or Homeless Assessment
																			SLO Housing support intake form. Gathers all needed info and barriers of applicant and family members.	Form created for housing programs. BFH and HSP are State funded programs that SLO County has opted into.			
San Luis Obispo	x																DSS HSP 6	Housing Barrier Assessment.docx	information regarding homelessness	Data entry information for the HMIS	New Rec.	HSP and Homeless Assistance Forms	Housing or Homeless Assessment
Sutter	x																HMIS	Assessment			New Rec.	HSP and Homeless Assistance Forms	Housing or Homeless Assessment
Solano	x																N/A	vi-SPDAT	Housing vulnerability assessment tool	No match in the provided CalSAWS document.	New Rec.	HSP and Homeless Assistance Forms	Housing or Homeless Assessment
Los Angeles	x																PA 6019	Homeless Case Management Assessment Form		No possible map found in listing	New Rec.	HSP and Homeless Assistance Forms	Housing or Homeless Assessment
Los Angeles																	PA 6053	Barriers to Permanent Housing Assessment		No possible map found in listing	New Rec.	HSP and Homeless Assistance Forms	Housing or Homeless Assessment
																			Homeless Assistance (English/Spanish)				
Tehama	x																TEH 732	Homeless Assistance	Checklist for Homeless Requirements	No comparable form in new system/state forms	New Rec.	HSP and Homeless Assistance Forms	Housing or Homeless Assessment
Initial - Santa Cruz																	WEL3337	Housing Habitability Standards Evaluation Checklist	Housing Habitability Standards Evaluation Checklist		New Rec.	HSP and Homeless Assistance Forms	Housing or Homeless Assessment

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San Luis Obispo	x																	DSS HSP 210	One-Time HSP Exception Assistance Approval.docx	Approval NOA for 1 time housing assistance payment.	Form created for housing programs. BFH and HSP are State funded programs that SLO County has opted into.	New Rec. New Rec.	Manual <Program> NOA HSP and Homeless Assistance Forms	HSP Notice
Napa																		SSSD 2040	HSP Discontinuance - Landowner Notification			New Rec. New Rec.	Manual <Program> NOA HSP and Homeless Assistance Forms	HSP Notice
Napa																		SSSD 2043	HSP Customer Discontinuance Notification			New Rec. New Rec.	Manual <Program> NOA HSP and Homeless Assistance Forms	HSP Notice
Solano																		N/A	Housing Stability Plan	Housing Program assesment and plan for stable housing	No match in the provided CalSAWS document.	New Rec.	HSP and Homeless Assistance Forms	HSP Plan
Solano																		N/A	Housing Program Case Plan	Housing Program planning form/agreement	No match in the provided CalSAWS document.	New Rec.	HSP and Homeless Assistance Forms	HSP Plan
Yolo	x																	YC 380	CalWORKs Housing Support Allocation Housing Needs Assessment Questionnaire	HSP plan signed by client and HSP case manager towards housing goals.	Yolo County does not contract out HSP services. Since following a housing plan is part of HSP, Yolo County created its own plan for this program.	New Rec.	HSP and Homeless Assistance Forms	HSP Plan
San Francisco	x																	7085	CalWORKs Housing Support Program Case Tracking Checklist		local Housing Support Program - no existing index code in CalSAWS	New Rec.	HSP and Homeless Assistance Forms	HSP Supporting Form
Merced	x																	24-3091	HSP Exit Form	Form exiting the case file from HSP.	Category does not exist in CalSAWS.	New Rec.	HSP and Homeless Assistance Forms	HSP Supporting Form
Merced	x																	24-3095	HSP Questionnaire	Survey provided to clients to gather information about the effectiveness of HSP services	Category does not exist in CalSAWS.	Is this signed? Does it need to be imaged? New Rec.	HSP and Homeless Assistance Forms	HSP Supporting Form
Merced	x																	24-3109	HSP Steps to Service	Form explaining program services	Category does not exist in CalSAWS.	Is this signed? Does it need to be imaged? New Rec.	HSP and Homeless Assistance Forms	HSP Supporting Form
Merced	x																	24-3112A	HSP Habitability Follow-Up	Form used to notate areas that need follow up for any habitability re-inspection	Category does not exist in CalSAWS.	New Rec.	HSP and Homeless Assistance Forms	HSP Supporting Form
Merced	x																	24-3123	HSP Certificate of Homelessness	Form provided to community partners verifying homelessness	Captures client information and signature.- Category does not exist in CalSAWS.	New Rec.	HSP and Homeless Assistance Forms	HSP Supporting Form
Merced	x																	24-3127	HSP Follow-Up Home Visit	Form documenting monthly home visits	Category does not exist in CalSAWS.	New Rec.	HSP and Homeless Assistance Forms	HSP Supporting Form
Merced																		24-4109	HDAP - Exit Form	Form exiting the case file from HSP.	Category does not exist in CalSAWS.	New Rec.	HSP and Homeless Assistance Forms	HSP Supporting Form
Solano																		48-HSP-001	Pre Housing Inventory	Housing program assessment of inventory of HH goods at intake	No match in the provided CalSAWS document.	New Rec.	HSP and Homeless Assistance Forms	HSP Supporting Form
San Luis Obispo	x				x													DSS HDAP 401	Housing Disability and Advocacy Program opt in letter.docx	Form for GA/CW participants to opt into HDAP.	SLO Co. housing program for GA or CW linked individuals/families.	New Rec.	HSP and Homeless Assistance Forms	HSP Supporting Form
San Luis Obispo	x																	DSS HOME 19	BFH and HSP Trailer Addendum.docx	R&R for BFH and HSP housing programs.	Form created for housing programs. BFH and HSP are State funded programs that SLO County has opted into.	New Rec.	HSP and Homeless Assistance Forms	HSP Supporting Form
San Luis Obispo	x																	DSS HOME 20	BFH and HSP Prerequisites for Taking Tenancy.docx	Information notice (terms and conditions) for BFH and HSP housing programs.	Form created for housing programs. BFH and HSP are State funded programs that SLO County has opted into.	New Rec.	HSP and Homeless Assistance Forms	HSP Supporting Form
San Luis Obispo	x																	DSS HOME 204	BFH and HSP Home Visit Guide.docx	Home visit consult guide for BFH and HSP programs	Form created for housing programs. BFH and HSP are State funded programs that SLO County has opted into.	New Rec.	HSP and Homeless Assistance Forms	HSP Supporting Form
San Luis Obispo	x																	DSS HSP 17	Staffing Questionnaire.docx	Worker tool to summarize applicants needs, resources and barriers for housing programs	Form created for housing programs. BFH and HSP are State funded programs that SLO County has opted into.	New Rec.	HSP and Homeless Assistance Forms	HSP Supporting Form
Placer					x													Homestart Monthly Schedule	Homestart Monthly Schedule	WTW Participation		New Rec.	HSP and Homeless Assistance Forms	HSP Supporting Form
Sutter																		HSP	Move in Checklist	Check list for housing	Housing support specialist's move in check list	New Rec.	HSP and Homeless Assistance Forms	HSP Supporting Form
Sutter																		HSP10	housing preference worksheet	What they are looking for in housing	HSP form to determine what is needed housing wise	New Rec.	HSP and Homeless Assistance Forms	HSP Supporting Form
Sutter																		HSP17	survey	HSP after move in information	gather information on their experience with HSP	New Rec.	HSP and Homeless Assistance Forms	HSP Supporting Form
Solano																		N/A	HSP Home Furnishings List	Housing Program assessment of inventory of HH goods once housing is found	No match in the provided CalSAWS document.	New Rec.	HSP and Homeless Assistance Forms	HSP Supporting Form
Merced	x																	24-3107	HSP My Family Needs	Form used to calculate the rent budget	Capture signatures. -Category does not exist in CalSAWS.	New Rec.	HSP and Homeless Assistance Forms	HSP/Homeless Calculations
Merced	x																	24-3134	HSP Level of Assistance Determination Chart	Chart used to explain level of service	Category does not exist in CalSAWS.	New Rec.	HSP and Homeless Assistance Forms	HSP/Homeless Calculations
San Mateo	x																	C-271	Homeless Assistance Budget Worksheet	C-271 Homeless Assistance Budget Worksheet	CW- San Mateo required form. No match found from CalSAWS.	New Rec.	HSP and Homeless Assistance Forms	HSP/Homeless Calculations
San Luis Obispo	x																	DSS HOME 163	HOME Consult Guide.docx	Consult guide to screen application for SLO Co. housing programs	Form created for housing programs. BFH and HSP are State funded programs that SLO County has opted into.	Since this is a guide, is this actually imaged? New Rec.	HSP and Homeless Assistance Forms	HSP/Homeless Calculations
San Luis Obispo	x																		HSP Housing Sustainability Worksheet \$10.50 Minimum Wage.xlsx	Housing Support Program Sustainability Worksheet	Automated worksheet to determine if applicant is eligible, income needs and rental income limits. Optional housing programs. Budget based in employer size	New Rec. New Rec.	HSP and Homeless Assistance Forms	HSP/Homeless Calculations
San Luis Obispo	x																		HSP Housing Sustainability Worksheet.xlsx	Housing Support Program Sustainability Worksheet	Automated worksheet to determine if applicant is eligible, income needs and rental income limits. Optional housing programs. Budget based in employer size	New Rec. New Rec.	HSP and Homeless Assistance Forms	HSP/Homeless Calculations
San Luis Obispo	x																	DSS HSP 5	Client Informed Consent and Release of information for HMIS.docx	Informing and release for participant information to be added to HMIS database for tracking and statistics	Form created for housing programs. BFH and HSP are State funded programs that SLO County has opted into.	New Rec.	HSP and Homeless Assistance Forms	HSP/Homeless Consent Form
Solano																		N/A	HMIS intake	Form for HSP clients to consent to be entered into HMIS	No match in the provided CalSAWS document.	New Rec.	HSP and Homeless Assistance Forms	HSP/Homeless Consent Form
Solano																		N/A	HMIS ROI	Housing Program ROI through HMIS system sharing	No match in the provided CalSAWS document.	New Rec.	HSP and Homeless Assistance Forms	HSP/Homeless Consent Form

Solano																N/A	HSP Informed Consent	Housing program specific consent form for client ROI	No match in the provided CalSAWS document.	New Rec.	HSP and Homeless Assistance Forms	HSP/Homeless Consent Form
Contra Costa																AAP ICAMA 1	AAP ICAMA Request (07/08)			Other county drawer - AAP	AAP	ICAMA
Contra Costa																ICAMA 360	California ICAMA Inter-County Medi-Cal Transfer (ICT)			Other county drawer - AAP	AAP	ICAMA
Stanislaus																ICAMA Form 7	Iterstate Compact Adoption and Medical Assistance	Adoption Document-Medicaid	Required Form to receive Medi-Cal for AAP Child. Similar Form not found on Forms List	Other county drawer - AAP	AAP	ICAMA
Contra Costa																ICAMA RV LTR	ICAM RV Letter			Other county drawer - AAP	AAP	ICAMA
Santa Clara																SCD 2223	ICAMA Reminder	Application	Application related documents; existing CalSAWS documents are too specific to index to. In order to meet county needs we need generic categories	Other county drawer - AAP	AAP	ICAMA
Placer																Incoming ICT	Incoming ICT	Applications/SOF/ICT		New Rec.	ICT Forms	ICT Form
																			This form is used with every recipient coming into the county office requesting assistance to transfer the case from another county. This form is part of the application process and increases the workload for staff imaging/indexing documents to the case.			
Mendocino																MCDSS 845	In-Person Inter County Transfer Request	Provides information about a customer applying for benefits in Mendocino County and transferring from another county		New Rec.	ICT Forms	ICT Form
Sacramento																SAC 2002_34C	Outgoing ICT Reminder		ICT reminder for all programs, imaged in to case file for record keeping	New Rec.	ICT Forms	ICT Form
Santa Clara																SCD 2213	Out of State/ County Request for Information	Verification request	Form is used to request verification; existing CalSAWS categories are too specific to processes not utilized at Santa Clara county. A general category is being requested	New Rec.	ICT Forms	ICT Form
Tehama																TEH WTW 27	ICT Request for Info	Request WTW Information from Other County	Request WTW information from previous county	New Rec.	ICT Forms	ICT Form
Santa Barbara																W 387	DUPLICATE AID LETTER	DUPLICATE AID LETTER	GATHERS INFORMATION FROM OTHER COUNTY THAT ISSUED AID	New Rec.	ICT Forms	ICT Form
Santa Clara																SCD 14	CalWORKs Intercounty Overpayment Adjustment Request	Overpayment/Overissuance/Underpayment/Underissuance	Form is used for OP/OI and UI/UP purposes; existing CalSAWS categories are too specific to processes not utilized at Santa Clara county. A general category is being requested	New Rec.	ICT Forms	ICT OP/OI Collection Form
Santa Barbara																W-ICC1	IC COLLECTIONS REQ TRANSFER OUT	IC COLLECTIONS REQ TRANSFER OUT	NEEDED STATE FORM NOT ON TIER 1 LIST - REQUIRED	Assuming forms are related to ICT benefit recovery New Rec.	ICT Forms	ICT OP/OI Collection Form
Santa Barbara																W-ICC1A	IC COLLECTIONS REQ 2ND REQUEST	IC COLLECTIONS REQ 2ND REQUEST	NEEDED STATE FORM NOT ON TIER 1 LIST - REQUIRED	Assuming forms are related to ICT benefit recovery New Rec.	ICT Forms	ICT OP/OI Collection Form
Santa Barbara																W-ICC2	IC COLLECTIONS RECEIVING CTY RESP	IC COLLECTIONS RECEIVING CTY RESP	NEEDED STATE FORM NOT ON TIER 1 LIST - REQUIRED	Assuming forms are related to ICT benefit recovery New Rec.	ICT Forms	ICT OP/OI Collection Form
Santa Barbara																W-ICC3	IC COLLECTIONS REQ CLT NOTIFICATION	IC COLLECTIONS REQ CLT NOTIFICATION	NEEDED STATE FORM NOT ON TIER 1 LIST - REQUIRED	Assuming forms are related to ICT benefit recovery New Rec.	ICT Forms	ICT OP/OI Collection Form
San Francisco																N/A	DHCS IHSS County Investigation Quarterly Report	Mandated State form	Required form sent to the State for IHSS fraud investigation results. Please ask the vendor to provide a list of IHSS reports and other forms that will be or need to be in the system	Other county drawer - IHSS	IHSS	IHSS Fraud
San Francisco																SOC 2247	In-Home Supportive Services Unannounced Home Visit findings report	Mandated State form	Required form to send to the State outcomes of Unannounced Home visits by an Investigator; the State sends the roster of recipients to visit	Other county drawer - IHSS	IHSS	IHSS Fraud
San Francisco																SOC 2248	IHSS Complaint of Suspected Fraud	Mandated State form	Required form for IHSS staff to refer for client/provider investigation	Other county drawer - IHSS	IHSS	IHSS Fraud
San Diego																14-140	IHSS-MC Communication	Transmittal	Used to communicate between FRCs and IHSS for status of MC and IHSS SOC determination	Other county drawer - IHSS	IHSS	IHSS MC Status
Riverside																DPSS 3704	IHSS Summary/Change Notification	ASD	County specific correspondence from one division to another.	Other county drawer - IHSS	IHSS	IHSS MC Status
Los Angeles																IPW-1	IHSS Plus Waiver Medi-Cal Disposition	Used at MC intake by Eligibility Worker (EW) to communicate to the IHSS Social Worker (SW) the final results of an applicant's MC determination.	No possible map found in listing	Other county drawer - IHSS	IHSS	IHSS MC Status
Los Angeles																IPW-2	IHSS Plus Waiver (IPW) Medi-Cal Exchange of information	Exchanges MC informatin between MC EW and IHSS SW.	No possible map found in listing	Other county drawer - IHSS	IHSS	IHSS MC Status
San Francisco																DHCS 9094	Providers Referred to DHCS for Mandatory Provider Suspension	Mandated State form	Required form sent to the State for IHSS provider fraud investigation results	Other county drawer - IHSS	IHSS	IHSS Provider Form
San Francisco																Gen 1384	IHSS Retroactively Adjusted Medi-Cal Share of Cost; IHSS Provider Wage Reimbursement Claim Form	Mandated State form	Request reimbursement to provider for IHSS wages due to decrease in Medi-Cal SOC.	Other county drawer - IHSS	IHSS	IHSS Provider Form
Tehama																IHSS Fingerprint Voucher	IHSS Fingerprint Voucher	Voucher to Pay Livescan for IHSS	Voucher to pay IHSS livescan for participant	Other county drawer - IHSS	IHSS	IHSS Provider Form
Sacramento																SOC 2271	IHSS Provider Notification of Recipient Authorized Hours and Services	IHSS notice to provider regarding hours approved	IHSS notice sent to provider regarding approved hours of care, copy should be imaged into case file for record keeping	Other county drawer - IHSS	IHSS	IHSS Provider Form

San Diego			x													14-153	Referral to IHSS and HCBS Waiver Agencies	Informing Notice	Notifies customer to apply for IHSS or HCBS waiver to avoid MC discontinuance/change	Other county drawer - IHSS	IHSS	IHSS Recipient Form
Solano																N/A	ODAS Supplemental Questionnaire	Supplemental questionnaire specific to ODAS population	No match in the provided CalSAWS document.	Other county drawer - IHSS	IHSS	IHSS Recipient Form
San Francisco																SOC 8558	IHSS Program notice to Recipient of Provider Ineligibility	Mandated State form	This notifies IHSS recipients that their Provider has committed Tier 2 crimes e.g. sex offender, other felonies, Welfare Fraud	Other county drawer - IHSS	IHSS	IHSS Recipient Form
Sacramento																SOC 2261	In-Home Supportive Services (IHSS) Individual Provider Timesheet	Timesheet for in home supportive service worker	Timesheet completed for the IHSS case, should be imaged into case file for record keeping	Other county drawer - IHSS	IHSS	IHSS Timesheet
Santa Clara	x	x														SCD 2375	IN/ES Determination Sheet	Application	Application related documents; existing CalSAWS documents are too specific to index to. In order to meet county needs we need generic categories	New Rec.	Supporting CW Forms	Immediate Need
Ventura										x						56-04-044	Parent Fact Sheet	Contains case info; income and resources in the home of removal	Created by CBS and sent to parents to obtain income and resources available to the child in the month of removal; the form is completed by the parents and returned to the CBS - No Match	New Rec.	Foster Care Forms	Income and Foster Care
Riverside										x						CSD 4306	Foster Care Provider Monthly Report	Providers report children in their care	Used by STRTPs, GHs, and FFAs to report children in their care monthly. No comparable form.	New Rec.	Foster Care Forms	Income and Foster Care
San Luis Obispo										x						DSS FC 919	SILP Income Verification.docx	Verification provided to youth of payment amount	Provides 3rd party verification from DSS for SILP youth receiving grant. Can be provided by youth as proof of income. County created, no equivalent	New Rec.	Foster Care Forms	Income and Foster Care
Alameda										x						FC 50-10	Verification of Receipt of Foster Care Income	FC caregivers need income verification of funding	Form is specific to county Foster care program. Used to communicate between SIA unit and EW regarding receipt of SS/SSA - no comparable form.	New Rec.	Foster Care Forms	Income and Foster Care
San Bernardino										x						FC 808A	Notification of Supplemental Income	Communication form	USED IN DETERMINING ELIGIBILITY FOR THE FOSTER CARE PROGRAM	New Rec.	Foster Care Forms	Income and Foster Care
Santa Barbara										x						FC Q1	FOSTER CARE QUESTIONNAIRE	LISTS INCOME/ASSETS OF PARENTS OF CHILD	USED IN DETERMINING ELIGIBILITY FOR THE FOSTER CARE PROGRAM	New Rec.	Foster Care Forms	Income and Foster Care
Yuba										x						YCHHSD 320	Request for Information Foster Care	Income & Property foster child may have	Foster Care Legal Guardian Document	New Rec.	Foster Care Forms	Income and Foster Care
San Diego			x													14-124	MCIEP Cover Letter	Transmittal	Used to notify the county when an inmate is being released and needs MC	New Rec.	Jail/Inmate Forms and Notices	Inmate Form
San Diego			x													14-126	MCIEP Program Registration Information	Transmittal	Used to provide the county with the information needed to start a MC application	New Rec.	Jail/Inmate Forms and Notices	Inmate Form
San Diego			x													14-129	County Pre-Release Application Cover Letter	Transmittal	Used to notify HHSA when a jail inmate is being released and needs MC	New Rec.	Jail/Inmate Forms and Notices	Inmate Form
San Diego			x													14-88	Juvenile Pre-Release MC Application Transmittal Form	Referral form for Medi-Cal	Used to notify HHSA when a juvenile is about to be released and Medi-Cal is needed	New Rec.	Jail/Inmate Forms and Notices	Inmate Form
Ventura																56-04-033	Court Order Request	External memo; contains case information and court order requested	Completed by CBS and sent to Juvenile Courts to request a court order - No Match	New Rec.	Jail/Inmate Forms and Notices	Inmate Form
Ventura																56-08-284	Confirmation of Receipt of Ward's/Inmate's Health Care Application	Letter to confirm receipt of Inmate Pre-release Healthcare Application	Per MOU between DHCS and CDCR, confirm receipt of Inmate Pre-Release Healthcare application - No Match	Is this imaged? Or only send to the center? New Rec.	Jail/Inmate Forms and Notices	Inmate Form
Ventura																56-16-312	Felony / Probation / Parole Status Referral	Felony, Probation, Parole Status Referral	Request for FF and PPV status-No match	New Rec.	Jail/Inmate Forms and Notices	Inmate Form
Placer																Correctional Facility ID Ltr	Correctional Facility ID Ltr	Vitals		New Rec.	Jail/Inmate Forms and Notices	Inmate Form
Placer																DPS 524	Disqualified Recipient Report	Fraud/Felons		New Rec.	Jail/Inmate Forms and Notices	Inmate Form
San Luis Obispo															x	DSS GEN 422	Incarceration Letter.docx	All program informing notice to a CDC/Jail/Prison	Informing that dependent children have applied for benefits and need to verify length of incarceration with estimated release and request to be informed if released or transferred.	New Rec.	Jail/Inmate Forms and Notices	Inmate Form
Initial - Kern																KCDHS 661-Gen	Criminal Record Statement			New Rec.	Jail/Inmate Forms and Notices	Inmate Form
Sutter			x													SU 947	Medi-Cal Application Transmittal Information Form - Sutter County	Medi-Cal Application Transmittal for children in Juvenile Hall	This form is sent by the Probation department to the CWD when a child has been sentenced to Juvenile Hall and will be released- CWD uses as a Medi-Cal application for the child. Unable to match to an existing CalSAWS document.	New Rec.	Jail/Inmate Forms and Notices	Inmate Form
San Francisco															x	007	Intake Checklist	Intake Checklist--County Use Only	Screening tool used by staff, during interviews.	New Rec.	Application, Intake, or Screening	Intake Checklist
Placer															x	ALL 12	Eligibility Case Checklist	Application/SOF/ICT	Eligibility and Administrative communication document, no equivalent	New Rec.	Application, Intake, or Screening	Intake Checklist
Placer																ALL 1426	NAFS RRR phone Interview Checklist	Correspondence	Continuing eligibility interview form, no equivalent	New Rec.	Application, Intake, or Screening	Intake Checklist
San Luis Obispo			x		x											DSS CAP 10	CAPERS Checklist.docx	Pending application checklist	Worker tool for eligibility determination, County specific tool	New Rec.	Application, Intake, or Screening	Intake Checklist
San Bernardino					x											GR 127	General Relief Application Summary Sheet (E/S)	Intake tool	use to set orientation appointments, return appts and inform GR customers of verifs due - no comparable form	New Rec.	Application, Intake, or Screening	Intake Checklist
Initial - Kern																KCDHS 343-Gen	Interview Checklist			New Rec.	Application, Intake, or Screening	Intake Checklist
Initial - Kern																KCDHS 530-FC	Intake Log			Is this imaged? New Rec.	Application, Intake, or Screening	Intake Checklist
Initial - Kern																KCDHS 865-JC	Sheet for Field Intake			New Rec.	Application, Intake, or Screening	Intake Checklist

[illegible]

Ventura						x							56-04-069	Static Criteria Determination Letter	Informing letter; contains case information	Completed by CBS and sent to caregiver to inform them that the intensive rate they are receiving will be limited to 60 days - No Match	New Rec.	Foster Care Forms	Level of Care
Ventura						x							56-12-560	Intensive Treatment Foster Care Recommendation	Contains case information; ISFC status notes and ISFC start date	Completed by SW at ISFC staffing and provided to eligibility to confirm start date of ISFC rate - No Match	New Rec.	Foster Care Forms	Level of Care
Ventura						x							56-12-625	Resource Parent Report Tool (10/17)	Contains case information and needs of the child; informs LOC determination	Completed by caregiver to inform the SW of any special needs the child may have; supporting documentation for SOC 500 - No Match	New Rec.	Foster Care Forms	Level of Care
San Luis Obispo						x							DSS FC 690	LOC Resource Parent Tool.docx	RFA parent activities in support of child information	Tool to determine ability of RFA parents to care for children. County created questionnaire.	New Rec.	Foster Care Forms	Level of Care
Santa Barbara						x							FC LOC 1	LOC FORM	LEVEL OF CARE SCORE SHEET	DETERMINE LEVEL OF CARE NEEDED FOR CHILD IN FOSTER CARE	New Rec.	Foster Care Forms	Level of Care
Ventura						x							SOC 500	Level of Care (LOC) Digital Scoring Form	Provides the level of care rate	Completed by SW based on child/caregiver scoring and provide to eligibility to verify the rate - No Match	New Rec.	Foster Care Forms	Level of Care
Stanislaus						x							SOC 500	Level of Care Manual Scoring Form	Assessment	Assessment of Social Worker. Similar Form not found on Forms List	New Rec.	Foster Care Forms	Level of Care
Stanislaus						x							SOC 500A	Level of Care Digital Scoring Form	Assessment	Assessment of Social Worker. Similar Form not found on Forms List	New Rec.	Foster Care Forms	Level of Care
Los Angeles														Annual Disability Review	Disability verification	Eligibility determination.	New Rec.	Foster Care Forms	Level of Care
San Luis Obispo							x						NA AAP 791	NA 791 AAP Adoption Notice of Action.pdf	AAP notice of action	County created NOA for Adoption Assistance Payments - approval, change. Discontinuance, overpayment, potential fraud	New Rec.	Manual <Program> NOA	Manual AAP NOA
San Diego						x							24-801.1	Stage 1 Overpayment NOA		Form used for Child Care program, No CalSAWS document type name/substitute available	New Rec.	Manual <Program> NOA	Manual CC NOA
San Diego						x							24-803.1 (06-11)	Closed Stage 1 Overpayment NOA		Form used for Child Care program, No CalSAWS document type name/substitute available	New Rec.	Manual <Program> NOA	Manual CC NOA
Santa Clara						x							SCD 1736	Child Care Payment Adjustment Notice	Notice of Action	Notice of Action for employment and supportive services related changes; existing CAISAWS forms do not meet business needs.	New Rec.	Manual <Program> NOA	Manual CC NOA
Santa Clara						x							SCD 532	Trustline/Child Care Approval NA 832) Notice of Action	Notice of Action	Notice of Action for employment and supportive services related changes; existing CAISAWS forms do not meet business needs.	New Rec.	Manual <Program> NOA	Manual CC NOA
San Diego						x							09-90 E/SP	Replacement of Food Approval/Denial Notice	Approval/Denial Notice	notify customers with their Approval/Denial of replacement CalFresh	New Rec.	Manual <Program> NOA	Manual CF NOA
Ventura						x							56-02-120	CalFresh Employment & Training Program Transportation Denial	CalFresh Employment & Training Program Transportation Denial	Transportation Supportive Services Denial NOA- No Match	New Rec.	Manual <Program> NOA	Manual CF NOA
San Luis Obispo						x							DSS CF 676	ABAWD Waiver NOA.docx	ABAWD waiver NOA - SLO exempt from requirement	NOA to applicant/participant informing of SLO exemption, may be required to comply in other counties. County specific	New Rec.	Manual <Program> NOA	Manual CF NOA
Placer						x							GREAT 818	Notice of Action	CFET	This form is customized to our CF E&T Program	New Rec.	Manual <Program> NOA	Manual CF NOA
Placer						x							GREAT 818A	Notice of Action	CFET	This form is customized to our CF E&T Program	New Rec.	Manual <Program> NOA	Manual CF NOA
Sacramento													SC 239.2	EMERGENCY FOOD STAMP BENEFITS NOTICE Expedited Service	Form given to customers explaining ES	Provided to customers to inform regarding ES	New Rec.	Manual <Program> NOA	Manual CF NOA
Santa Barbara						x							W 256	REPLACEMENT OF CALFRESH DENIAL NOTICE	NOA EXPLAINING DENIAL	CLIENT REQUIRED NOTIFICATION	New Rec.	Manual <Program> NOA	Manual CF NOA
Santa Barbara						x							W 257	REPLACEMENT OF CALFRESHAPPROVAL NOTICE	NOA EXPLAINING APPROVAL	CLIENT REQUIRED NOTIFICATION	New Rec.	Manual <Program> NOA	Manual CF NOA
San Diego						x							07-340	Child Transitioned from CalWORKs to Foster Care Program Informing Notice	Form provides child's name and when CalWORKs benefits will end for that child	Used to inform relative caretaker on CalWORKs and Foster Care case that CalWORKs benefits will end due to child becoming eligible to Foster Care Program	New Rec.	Manual <Program> NOA	Manual CW NOA
Merced						x							24-3116	HSP Discontinuance/Denial Informing Notice	Informing notice provided to clients	Category does not exist in CalSAWS.	New Rec.	Manual <Program> NOA	Manual CW NOA
Merced						x							24-4103	HDAP – Discontinuance/Denial Informing Notice	Informing notice provided to clients	Category does not exist in CalSAWS.	New Rec.	Manual <Program> NOA	Manual CW NOA
Ventura						x							56-03-332	Child Support Good Cause Approval	Notice of Action for child support good cause approval	NOA approving child support good cause claim. No match	New Rec.	Manual <Program> NOA	Manual CW NOA
Ventura						x							56-03-333	Child Support Good Cause Denial	Notice of Action for child support good cause denial	NOA denial for child support good cause claim. No match	New Rec.	Manual <Program> NOA	Manual CW NOA
Ventura						x							56-03-343	Notice of Action Approval of CalWORKs 3-Month Exemption	Approval NOA for 3-Month exemption of former home	Approval NOA to approve the 3-Month exemption for a former home. No match	New Rec.	Manual <Program> NOA	Manual CW NOA
Ventura						x							56-08-004	Notice of Failure to Cooperate with the Department of Child Support Services	Notice to client that benefits are discontinued for failure to cooperate with Child Support	Notice to client that benefits are discontinued for failure to cooperate with Child Support. No match	New Rec.	Manual <Program> NOA	Manual CW NOA
Santa Clara						x							ABCD 239 7A	Notice of Administrative Disqualification California Work Opportunity and Responsibility To Kids (CalWORKS) Program	Notice of Action	Notice of Action for IEVS related changes; existing CAISAWS forms do not meet business needs.	New Rec.	Manual <Program> NOA	Manual CW NOA
Placer						x							ALL 1379A	CalWORKs Denial	Applications/SOF/ICT		New Rec.	Manual <Program> NOA	Manual CW NOA
Sacramento						x							CSN 06	60-day Approval for Cash Exemptions DHCS 7112 Denial for Trafficking and Crime Victims Assistance Program.docx	Notice of action provided to customer	NOA provided to customer in regards to approved benefits	New Rec.	Manual <Program> NOA	Manual CW NOA
San Luis Obispo						x							DHCS 7112		TCVAP denial NOA	denial NOA for participant - no equivalent	New Rec.	Manual <Program> NOA	Manual CW NOA

San Luis Obispo	x															DHCS 7113	DHCS 7113 Approval for Trafficking and Crime Victims Assistance Program.docx	TCVAP approval NOA	approval NOA for applicant - no equivalent	New Rec.	Manual <Program> NOA	Manual CW NOA
San Luis Obispo	x															DHCS 7114	DHCS 7114 Discontinuance for Trafficking and Crime Victims Assistance Program.docx	TCVAP disc. NOA	Disc. NOA for participant	New Rec.	Manual <Program> NOA	Manual CW NOA
San Luis Obispo	x															DSS CW 183	Diversion Denial.docx	CW Diversion denial and reason NOA	No diversion NOAs available	New Rec.	Manual <Program> NOA	Manual CW NOA
San Luis Obispo	x															DSS CW 771	Diversion Denial - Child Care Not Available.docx	CW Diversion denial and reason NOA	No diversion NOAs available	New Rec.	Manual <Program> NOA	Manual CW NOA
San Luis Obispo	x															DSS CW Diversion 109	Diversion Denial - Child Care Not Available (Sp).docx	CW Diversion denial and reason NOA	No diversion NOAs available	New Rec.	Manual <Program> NOA	Manual CW NOA
San Luis Obispo	x															DSS ES 324	PAS Employed Initial Notification.docx	Post CW informing notice	informs disc. Participatns of Post CW services and time frames	New Rec.	Manual <Program> NOA	Manual CW NOA
San Luis Obispo	x															DSS ES 325	PAS Employed Follow Up Notification.docx	Post CW informing notice -employed at disc.	informs disc. Participatns of Post CW services and time frames	New Rec.	Manual <Program> NOA	Manual CW NOA
San Luis Obispo	x															DSS ES 326	PAS Newly Employed Notification.docx	Post CW informing notice -new job, following disc. Of case	informs disc. Participatns of Post CW services and time frames	New Rec.	Manual <Program> NOA	Manual CW NOA
San Luis Obispo	x															DSS ES 327	PAS Unemployed Initial Notification.docx	Post CW informing notice of unemployed at CW disc.	informs disc. Participatns of Post CW services and time frames	New Rec.	Manual <Program> NOA	Manual CW NOA
San Luis Obispo	x															DSS ES 328	PAS Unemployed Follow Up Notification.docx	2nd notice - Post CW informing notice of unemployed at CW disc.	informs disc. Participatns of Post CW services and time frames	New Rec.	Manual <Program> NOA	Manual CW NOA
San Luis Obispo	x															DSS ES 750	4-Month Rental Assistance Approval.docx	4 month rental assistance approval NOA	County specific NOA, no 4 month rental assistance NOAs	New Rec.	Manual <Program> NOA	Manual CW NOA
San Luis Obispo	x															DSS ES 751	4-Month Rental Assistance Denial.docx	4 month rental assistance denial NOA	County specific NOA, no 4 month rental assistance NOAs	New Rec.	Manual <Program> NOA	Manual CW NOA
San Luis Obispo	x															DSS ES 752	4-Month Rental Assistance Discontinuance.docx	4 month rental assistance disc. NOA	County specific NOA, no 4 month rental assistance NOAs	New Rec.	Manual <Program> NOA	Manual CW NOA
San Luis Obispo	x															DSS ES 753	4-Month Rental Assistance Reinstatement.docx	4 month rental assistance reinstatement NOA	County specific NOA, no 4 month rental assistance NOAs	New Rec.	Manual <Program> NOA	Manual CW NOA
San Luis Obispo	x															DSS HOME 105	BFH and HSP Step Down.docx	Approval NOA for housing programs informing participant of rental obligation	Form created for housing programs. BFH and HSP are State funded programs that SLO County has opted into.	New Rec.	Manual <Program> NOA	Manual CW NOA
San Luis Obispo	x															DSS HOME 105A	BFH and HSP Step Down - Roommate.docx	Approval NOA for housing programs informing participant of rental obligation with roommate	Form created for housing programs. BFH and HSP are State funded programs that SLO County has opted into.	New Rec.	Manual <Program> NOA	Manual CW NOA
San Luis Obispo	x															DSS HOME 107	BFH and HSP Step Down Extension.docx	Change NOA for housing programs informing participant rental subsidy extension and amounts by month	Form created for housing programs. BFH and HSP are State funded programs that SLO County has opted into.	New Rec.	Manual <Program> NOA	Manual CW NOA
San Luis Obispo	x															DSS HOME 107A	BFH and HSP Step Down Extension - Roommate.docx	Change NOA for housing programs informing participant rental subsidy extension and amounts by month (with roommate)	Form created for housing programs. BFH and HSP are State funded programs that SLO County has opted into.	New Rec.	Manual <Program> NOA	Manual CW NOA
San Luis Obispo	x															DSS HOME 108	BFH and HSP Notice of One-Month Rental Subsidy.docx	Approval NOA for housing programs informing participant of rental obligation, 1 month subsidy	Form created for housing programs. BFH and HSP are State funded programs that SLO County has opted into.	New Rec.	Manual <Program> NOA	Manual CW NOA
San Luis Obispo	x															DSS HSP 102	CW HSP Denial NOA.docx	Application denial NOA for CW housing support program.	Form created for housing programs. BFH and HSP are State funded programs that SLO County has opted into.	New Rec.	Manual <Program> NOA	Manual CW NOA
San Luis Obispo	x															DSS HSP 103	CW HSP Notice of Program Discontinuance.docx	Discontinuance noa for CW housing support program.	Form created for housing programs. BFH and HSP are State funded programs that SLO County has opted into.	New Rec.	Manual <Program> NOA	Manual CW NOA
San Luis Obispo	x															DSS TCV 101	MC TCVAP Approval.docx	TCVAP approval NOA and services approved.	County created NOA for TCVAP approval. Indicates SOC or no SOC	New Rec.	Manual <Program> NOA	Manual CW NOA
San Luis Obispo	x															DSS TCV 201	MC TCVAP Discontinuance.docx	TCVAP discontinuance NOA	County created disc NOA for TCVAP and listing reason for disc.	New Rec.	Manual <Program> NOA	Manual CW NOA
San Luis Obispo	x															DSS TCV 301	MC TCVAP Denial.docx	TCVAP denial NOA	County create denial NOA for TCVAP and denial reason	New Rec.	Manual <Program> NOA	Manual CW NOA
Los Angeles	x															GN 6007B	CalWORKS Supportive Services Enrollment Termination Notice	This form is completed by the treatment service providers to notify the GSW / CCM whenever a CalWORKs participant is no longer receiving treatment services at their agency, such as dropped-out, change of provider, or completed.	No possible map found in listing	New Rec.	Manual <Program> NOA	Manual CW NOA
Sutter	x															HSP	Denial form	NOA	Housing Support Program denial- Homeless	New Rec.	Manual <Program> NOA	Manual CW NOA
Placer	x															HSP 381	Housing Support Approval/Denial	Homeless		New Rec.	Manual <Program> NOA	Manual CW NOA
Placer	x															HSP 382	Housing Support Discontinuance	Homeless		New Rec.	Manual <Program> NOA	Manual CW NOA
Orange	x															M20-353C	Penalty Applied to AU NOA	Used to notify client of change to their penalty	State NOA, not found in CalWIN. penalty change	New Rec.	Manual <Program> NOA	Manual CW NOA
San Luis Obispo	x															M40-129A	M40-129A Immediate Need Denial - Needs Met.docx	CW immediate new NOA	SLO Co. version of State Notice of Action Documents M series	New Rec.	Manual <Program> NOA	Manual CW NOA
San Luis Obispo	x															M40-129B	M40-129B Approve IN Full Payment.docx	CW immediate new NOA	SLO Co. version of State Notice of Action Documents M series	New Rec.	Manual <Program> NOA	Manual CW NOA
San Luis Obispo	x															M40-129C	M40-129C Immediate Need Denial - Ineligible to CalWORKs or IN.docx	CW immediate new NOA	SLO Co. version of State Notice of Action Documents M series	New Rec.	Manual <Program> NOA	Manual CW NOA
San Luis Obispo	x															M40-129D	M40-129D Immediate Need Denial - No Emergency.docx	CW immediate new NOA	SLO Co. version of State Notice of Action Documents M series	New Rec.	Manual <Program> NOA	Manual CW NOA
San Luis Obispo	x															M40-171D	M40-171D Basic CW Approval with SB 380 Child.docx	CW immediate new NOA	SLO Co. version of State Notice of Action Documents M series	New Rec.	Manual <Program> NOA	Manual CW NOA
Los Angeles	x	x														M43- 119.221 LA	Sponsored Eligible Non-Citizen, Indequence Exemption (Change)		No possible map found in listing	New Rec.	Manual <Program> NOA	Manual CW NOA
Los Angeles	x	x														M43- 119.221A LA	Sponsored Eligible Non-Citizen, Indequence Exemption (Approval)		No possible map found in listing	New Rec.	Manual <Program> NOA	Manual CW NOA
Los Angeles	x	x														M43- 119.222 LA	Sponsored Eligible Non-Citizen, Battery Exemption End (Change)		No possible map found in listing	New Rec.	Manual <Program> NOA	Manual CW NOA

Los Angeles	x	x																M43- 119.222A LA	Sponsored Eligible Non-Citizen, Indeigence Exemption (Approval)		No possible map found in listing	New Rec.	Manual <Program> NOA	Manual CW NOA
Los Angeles	x	x																M43- 119.222T LA	Sponsored Eligible Non-Citizen, Indeigence Exemption End (Discontinuance)		No possible map found in listing	New Rec.	Manual <Program> NOA	Manual CW NOA
Los Angeles	x	x																M43- 119A LA	Sponsored Non-Citizen - Excluded From AU (Approval)		No possible map found in listing	New Rec.	Manual <Program> NOA	Manual CW NOA
Los Angeles	x	x																M43- 119A LA (C)	Sponsored Non-Citizen - Excluded From AU		No possible map found in listing	New Rec.	Manual <Program> NOA	Manual CW NOA
Los Angeles	x	x																M43-119.221T LA	Sponsored Eligible Non-Citizen, Indeigence Exemption End (Discontinuance)		No possible map found in listing	New Rec.	Manual <Program> NOA	Manual CW NOA
Los Angeles	x																	M44- 211 (A) (THAP)+14 (LA)	Temporary Homeless Assistance Program (THAP) +14 Approval		No possible map found in listing	New Rec.	Manual <Program> NOA	Manual CW NOA
Los Angeles	x																	M44- 211 (A) RA (LA)	Rental Assistance (RA)- Approval		No possible map found in listing	New Rec.	Manual <Program> NOA	Manual CW NOA
Los Angeles	x																	M44- 211 (D) THAP+14 (LA)	Temporary Homeless Assistance Program (THAP) +14 Denial		No possible map found in listing	New Rec.	Manual <Program> NOA	Manual CW NOA
Los Angeles	x																	M69- 202T LA	RCA Termination		No possible map found in listing	New Rec.	Manual <Program> NOA	Manual CW NOA
Los Angeles	x																	M69- 205C	RCA/MC - Decrease /Expiration (Time- Expiration) - Iraqi and Afghan Special Immigrant Visa Holders		No possible map found in listing	New Rec.	Manual <Program> NOA	Manual CW NOA
Los Angeles	x																	M69- 210A LA	RCA Add Household Member (Change)		No possible map found in listing	New Rec.	Manual <Program> NOA	Manual CW NOA
Los Angeles	x																	M69- 210C LA	RCA Change In Income		No possible map found in listing	New Rec.	Manual <Program> NOA	Manual CW NOA
Los Angeles	x																	M69- 210D	RCA Application Denial - - Iraqi and Afghan Special Immigrant Visa Holders		No possible map found in listing	New Rec.	Manual <Program> NOA	Manual CW NOA
Los Angeles	x																	M69-202A LA	RCA Application (Approval)		No possible map found in listing	New Rec.	Manual <Program> NOA	Manual CW NOA
Los Angeles	x																	M69-202A.1 LA	RCA Application Approval - Iraqi /Afghan Special Immigrant Visa Holders		No possible map found in listing	New Rec.	Manual <Program> NOA	Manual CW NOA
Los Angeles	x																	M69-202D LA	RCA Application (Denial)		No possible map found in listing	New Rec.	Manual <Program> NOA	Manual CW NOA
Los Angeles	x																	M69-202P LA	RCA Partial Approval		No possible map found in listing	New Rec.	Manual <Program> NOA	Manual CW NOA
Los Angeles	x																	M70- 100A Temp (LA)	TCVAP Application Approval		No possible map found in listing	New Rec.	Manual <Program> NOA	Manual CW NOA
Los Angeles	x																	M70- 100B (LA)	TCVAP (RCA) Partial Approval		No possible map found in listing	New Rec.	Manual <Program> NOA	Manual CW NOA
Los Angeles	x																	M70- 100C Temp (LA)	TCVAP Change in Benefits/ Program Conversion		No possible map found in listing	New Rec.	Manual <Program> NOA	Manual CW NOA
Los Angeles	x																	M70- 100D Temp (LA)	TCVAP Application Denial		No possible map found in listing	New Rec.	Manual <Program> NOA	Manual CW NOA
Los Angeles	x																	M70- 100E (LA)	Change SB 1569/TCVAP (Change)		No possible map found in listing	New Rec.	Manual <Program> NOA	Manual CW NOA
Los Angeles	x																	M70- 100T Temp (LA)	TCVAP Discontinuance		No possible map found in listing	New Rec.	Manual <Program> NOA	Manual CW NOA
San Luis Obispo	x																	M82-812	M82-812 Family Reunification Zero Grant NOA.docx	CW immediate new NOA	Notice of Action for MC-related changes; existing CAISAWS forms do not meet business needs.	New Rec.	Manual <Program> NOA	Manual CW NOA
Santa Clara	x																	M82-820A	No Eligible Person	Notice of Action	Notice of Action for MC-related changes; existing CAISAWS forms do not meet business needs.	New Rec.	Manual <Program> NOA	Manual CW NOA
San Luis Obispo	x																	M82-832G	M82-832G Eligible Mandatory Optional Person Leaving AU (SB 380).docx	CW immediate new NOA	SLO Co. version of State Notice of Action Documents M series	New Rec.	Manual <Program>	

[illegible]

San Francisco				x											031 1	CAAP Discontinuation: Refused Employment	CAAP Discontinuation: Refused Employment	There is no index for GA	New Rec.	Manual <Program> NOA	Manual GA/GR NOA
San Francisco				x											033 1	CAAP Discontinuation: Failure to Attend Evaluation	CAAP Discontinuation: Failure to Attend Evaluation	There is no index for GA	New Rec.	Manual <Program> NOA	Manual GA/GR NOA
San Francisco				x											037c 1	CAAP Discontinuation: Not Enough Job Searches	CAAP Discontinuation: Not Enough Job Searches	There is no index for GA	New Rec.	Manual <Program> NOA	Manual GA/GR NOA
San Francisco				x											042 1	CAAP Discontinuation: Failure to Apply for Other Income	CAAP Discontinuation: Failure to Apply for Other Income	There is no index for GA	New Rec.	Manual <Program> NOA	Manual GA/GR NOA
San Francisco				x											047 1	CAAP Discontinuation: Fleeing Felon (non-fraud)	CAAP Discontinuation: Fleeing Felon (non-fraud)	There is no index for GA	New Rec.	Manual <Program> NOA	Manual GA/GR NOA
San Diego				x											099-0	GR Disc Other Reasons	Notice to customer of GR discontinuance	No CalSAWS document	New Rec.	Manual <Program> NOA	Manual GA/GR NOA
San Diego				x											11-21 HHSA	Computation of Need and Notification of Payment for GR	Notice to customer of GR grant approval and budget	No CalSAWS document	New Rec.	Manual <Program> NOA	Manual GA/GR NOA
San Diego				x											11-43 HHSA	GR Notice of Denial	Notice to GR customer of their GR denial	No CalSAWS document - County specific instructions	New Rec.	Manual <Program> NOA	Manual GA/GR NOA
San Diego				x											11-50D HHSA	Employable Discontinuation	Notice to GR customer of Employable discontinuance	No CalSAWS document - County specific instructions	New Rec.	Manual <Program> NOA	Manual GA/GR NOA
San Diego				x											11-50M HHSA	MAPC Informing Notice	Notice to GR customer of Employable discontinuance and MAPC eligibility	No CalSAWS document - County specific instructions	New Rec.	Manual <Program> NOA	Manual GA/GR NOA
San Diego				x											11-61 HHSA	Employable NOA - MAPC	Approval of GR under MAPC	No CalSAWS document - County specific instructions	New Rec.	Manual <Program> NOA	Manual GA/GR NOA
San Francisco				x											2155A	CAAP Denial with Payment - Excess Anticipated Income	CAAP Denial with Payment - Excess Anticipated Income	There is no index for GA	New Rec.	Manual <Program> NOA	Manual GA/GR NOA
San Francisco				x											2158B	Discontinuation-Failure for Workfare, Alternative WF, LDCS Requirement	Discontinuation for CAAP work activity requirements.	There is no GA/GR index for work activity requirement.	New Rec.	Manual <Program> NOA	Manual GA/GR NOA
San Francisco				x											2160A	CAAP Fraud Discontinuation (Duplicate Cashed Warrant)	CAAP Fraud Discontinuation (Duplicate Cashed Warrant)	There is no index for GA	New Rec.	Manual <Program> NOA	Manual GA/GR NOA
San Francisco				x											2160B	CAAP Fraud (Failure to Report Unearned Income)	CAAP Fraud (Failure to Report Unearned Income)	There is no index for GA	New Rec.	Manual <Program> NOA	Manual GA/GR NOA
San Francisco				x											2160C	CAAP Fraud Discontinuation (Failure to Report Earned Income)	CAAP Fraud Discontinuation (Failure to Report Earned Income)	There is no index for GA	New Rec.	Manual <Program> NOA	Manual GA/GR NOA
San Francisco				x											2160E	CAAP Fraud Discontinuation (Duplicate Aid)	CAAP Fraud Discontinuation (Duplicate Aid)	There is no index for GA	New Rec.	Manual <Program> NOA	Manual GA/GR NOA
San Francisco				x											2160G	CAAP Fraud Discontinuation (Fleeing Felon)	CAAP Fraud Discontinuation (Fleeing Felon)	There is no index for GA	New Rec.	Manual <Program> NOA	Manual GA/GR NOA
San Francisco				x											2160H	CAAP Fraud Discontinuation (Falsified Documentation)	CAAP Fraud Discontinuation (Falsified Documentation)	There is no index for GA	New Rec.	Manual <Program> NOA	Manual GA/GR NOA
San Francisco				x											2160I	CAAP Fraud Discontinuation (Failure to Report All Facts)	CAAP Fraud Discontinuation (Failure to Report All Facts)	There is no index for GA	New Rec.	Manual <Program> NOA	Manual GA/GR NOA
Merced				x											24-4002	Notice of Action	Approval NOA	Used to notify employable GA clients when their benefits have been approved and will begin - Do not see similar form	New Rec.	Manual <Program> NOA	Manual GA/GR NOA
Merced				x											24-4002A	Notice of Action	Denial NOA	Used to notify GA applicants their application has been denied and why - Do not see similar form	New Rec.	Manual <Program> NOA	Manual GA/GR NOA
Merced				x											24-4002C	Notice of Action	Discontinuation NOA	Used to notify GA clients when their benfits will end and why - Do not see similar form	New Rec.	Manual <Program> NOA	Manual GA/GR NOA
Merced				x											24-4002E	Notice of Action	Approval NOA	Used to notify INCAP GA clients when their benefits have been approved and will begin - Do not see similar form	New Rec.	Manual <Program> NOA	Manual GA/GR NOA
Merced				x											24-4116	Notice of Action	Discontinuation NOA	Used to notify employable GA client when their benefits will end - Do not see similar form	New Rec.	Manual <Program> NOA	Manual GA/GR NOA
Ventura				x											56-07-239A	GR NOA Approval	GR Benefits Approval Notice of Action	GR Benefits Approval Notice of Action-No Match	New Rec.	Manual <Program> NOA	Manual GA/GR NOA
Ventura				x											56-07-239C	GR NOA Change	GR Benefits Change Notice of Action	GR Benefits Change Notice of Action-No Match	New Rec.	Manual <Program> NOA	Manual GA/GR NOA
Ventura				x											56-07-239D	GR NOA Denial-Disc	GR Benefits Denial-Discontinuation Notice of Action	GR Benefits Denial-Discontinuation Notice of Action-No Match	New Rec.	Manual <Program> NOA	Manual GA/GR NOA
Ventura				x											56-07-239F	GR NOA Discontinuation	GR Benefits Discontinuation Notice of Action	GR Benefits Discontinuation Notice of Action-No Match	New Rec.	Manual <Program> NOA	Manual GA/GR NOA
Ventura				x											56-07-239H	GR NOA Change - Aid Paid Pending	Aid Paid Pending Approval NOA	Aid Paid Pending Approval NOA-No Match	New Rec.	Manual <Program> NOA	Manual GA/GR NOA
Ventura				x											56-07-239I	GR NOA IPV	Intentional Program Violation Disqualification NOA	GR Specific Intentional Program Violation Disqualification NOA-No Match	New Rec.	Manual <Program> NOA	Manual GA/GR NOA
Butte				x											BUGA 425	3-month Employable Disc NOA	NOA explaining the Disc of Employable GA	Used to notify clients of the Disc and when they might be eligible to the program again.	New Rec.	Manual <Program> NOA	Manual GA/GR NOA
Butte				x											BUGA 429	GA Grant	Informing NOA explaining that GA has been granted	Notificaiton of GA grant and MAP Amounts. Also provides proratons and amounts paid.	New Rec.	Manual <Program> NOA	Manual GA/GR NOA
Butte				x											BUGA 430	Change Grant NOA	Case change notification to customer	Provides client information regarding changes such as increase/decrease to GA Pgmm includes budget and explains the reasoning behind the change	New Rec.	Manual <Program> NOA	Manual GA/GR NOA
Butte				x											BUGA 432	GA Repay NOA	Summary of GA paid to client with Month/Year	Provides the client with the amounts of GA that they have to repay and hearing rights	New Rec.	Manual <Program> NOA	Manual GA/GR NOA
Butte				x											BUGA 432a Repay page 2	Notice of intended action GA- Employment notice of repayment	Noa that gives explanation of overpayment assessed for GA program	Explains why there is an overpayment and includes summary of prior aid and hearing rights	New Rec.	Manual <Program> NOA	Manual GA/GR NOA
Butte				x											BUGA 441	Disc for BUA 61 GA Disability	Notice explaining disc of GA due to disability verifications	Informs customer of disc due to disability expiration or if the customer is not disabled	New Rec.	Manual <Program> NOA	Manual GA/GR NOA

Butte				x												BUGA 448 GA OP	Notice of Action-Overpayment GA	Noa explaining GA OP	Explains why there is an overpayment and has budget and hearing rights	New Rec.	Manual <Program> NOA	Manual GA/GR NOA
Butte				x												BUGA 455	Sar Disc NOA	GA Disc Noa for no Sar received or incomplete Sar	Explains discontinuance for no sar 7 or incomplete. Explains how to stop action and includes hearing rights.	New Rec.	Manual <Program> NOA	Manual GA/GR NOA
Butte				x												BUGA434	GA Lump Sum Disc NOA	NOA explaining Disc of GA due to receipt of Lump Sum	informs customer of disc and lists budget also informs of hearing rights	New Rec.	Manual <Program> NOA	Manual GA/GR NOA
San Mateo				x												C-324	Notice Regarding Method of GA Payment	C-324 (Eng) Notice Regarding Method of GA Payment	GA- San Mateo required form. No match found from CalSAWS.	New Rec.	Manual <Program> NOA	Manual GA/GR NOA
San Francisco				x												CalWIN 1-San Francisco	Generic GA/GR Approval - San Francisco	Generic GA/GR Approval - San Francisco	There is no index for GA	New Rec.	Manual <Program> NOA	Manual GA/GR NOA
San Francisco				x												CalWIN 2-San Francisco	Generic GA/GR Change - San Francisco	Generic GA/GR Change - San Francisco	No available index listed in CalSAWS	New Rec.	Manual <Program> NOA	Manual GA/GR NOA
San Francisco				x												CalWIN 3-San Francisco	Generic GA/GR Denial for Verification Checklist (VCL) Items - San Francisco	Generic GA/GR Denial for Verification Checklist (VCL) Items - San Francisco	There is no index for GA	New Rec.	Manual <Program> NOA	Manual GA/GR NOA
San Francisco				x												CalWIN 4-San Francisco	Generic GA/GR Disc for Verification Checklist (VCL) Items - San Francisco	Generic GA/GR Disc for Verification Checklist (VCL) Items - San Francisco	There is no index for GA	New Rec.	Manual <Program> NOA	Manual GA/GR NOA
San Francisco				x												CP 1	CAAP Denial - Failed Initial Intake Appointment	Denial for Failed Intake Appt	There is no index for GA	New Rec.	Manual <Program> NOA	Manual GA/GR NOA
San Francisco				x												CP 10	CAAP Denial - Excess Assets in Savings/Checking Account(s)	CAAP Denial - Excess Assets in Savings/Checking Account(s)	There is no index for GA	New Rec.	Manual <Program> NOA	Manual GA/GR NOA
San Francisco				x												CP 12	CAAP Denial - Excess Value of Automobile	CAAP Denial - Excess Value of Automobile	There is no index for GA	New Rec.	Manual <Program> NOA	Manual GA/GR NOA
San Francisco				x												CP 13	CAAP Denial - Own More than One Automobile	CAAP Denial - Own More than One Automobile	There is no index for GA	New Rec.	Manual <Program> NOA	Manual GA/GR NOA
San Francisco				x												CP 14	CAAP Denial - Paid Expenses Exceed Monthly Income/Assets	CAAP Denial - Paid Expenses Exceed Monthly Income/Assets	There is no index for GA	New Rec.	Manual <Program> NOA	Manual GA/GR NOA
San Francisco				x												CP 15	CAAP Denial - Student Status Not Acceptable	CAAP Denial - Student Status Not Acceptable	There is no index for GA	New Rec.	Manual <Program> NOA	Manual GA/GR NOA
San Francisco				x												CP 16	CAAP Denial - 45-day Job Quit	CAAP Denial - 45-day Job Quit	There is no index for GA	New Rec.	Manual <Program> NOA	Manual GA/GR NOA
San Francisco				x												CP 17	CAAP Denial - CalWORKS Eligible/Recipient	CAAP Denial - CalWORKS Eligible/Recipient	There is no index for GA	New Rec.	Manual <Program> NOA	Manual GA/GR NOA
San Francisco				x												CP 18	CAAP Denial - CalWORKS Discontinuance due to Drug Felony Conviction	CAAP Denial - CalWORKS Discontinuance due to Drug Felony Conviction	There is no index for GA	New Rec.	Manual <Program> NOA	Manual GA/GR NOA
San Francisco				x												CP 20	CAAP Denial - Fleeing Felon	CAAP Denial - Fleeing Felon	There is no index for GA	New Rec.	Manual <Program> NOA	Manual GA/GR NOA
San Francisco				x												CP 21	CAAP Denial - SSI Recipient	CAAP Denial - SSI Recipient	There is no index for GA	New Rec.	Manual <Program> NOA	Manual GA/GR NOA
San Francisco				x												CP 23	CAAP Denial - Failed Requirements for Other Income	CAAP Denial - Failed Requirements for Other Income	There is no index for GA	New Rec.	Manual <Program> NOA	Manual GA/GR NOA
San Francisco				x												CP 27	CAAP Denial - Non-Cooperation to Secure Photo Identification	CAAP Denial - Non-Cooperation to Secure Photo Identification	There is no index for GA	New Rec.	Manual <Program> NOA	Manual GA/GR NOA
San Francisco				x												CP 28	CAAP Denial - Failure to Submit CID Receipt	CAAP Denial - Failure to Submit CID Receipt	There is no index for GA	New Rec.	Manual <Program> NOA	Manual GA/GR NOA
San Francisco				x												CP 29	CAAP Denial - Failure to Provide DMV ID	CAAP Denial - Failure to Provide DMV ID	There is no index for GA	New Rec.	Manual <Program> NOA	Manual GA/GR NOA
San Francisco				x												CP 3	CAAP Denial - Failure to Establish SF Residency/Intent to Reside	Denial for Failure to Establish SF Residency	There is no index for GA	New Rec.	Manual <Program> NOA	Manual GA/GR NOA
San Francisco				x												CP 30	CAAP Denial - Failed Social Security Card Process	CAAP Denial - Failed Social Security Card Process	There is no index for GA	New Rec.	Manual <Program> NOA	Manual GA/GR NOA
San Francisco				x												CP 32	CAAP Denial - Failed Final Intake Appointment	CAAP Denial - Failed Final Intake Appointment	There is no index for GA	New Rec.	Manual <Program> NOA	Manual GA/GR NOA
San Francisco				x												CP 33	CAAP Denial - Failure to Report Necessary Information	CAAP Denial - Failure to Report Necessary Information	There is no index for GA	New Rec.	Manual <Program> NOA	Manual GA/GR NOA
San Francisco				x												CP 36	CAAP Denial - Institutionalized	CAAP Denial - Institutionalized	There is no index for GA	New Rec.	Manual <Program> NOA	Manual GA/GR NOA
San Francisco				x												CP 37	CAAP Denial - Not Eligible for ABD Medi-Cal	CAAP Denial - Not Eligible for ABD Medi-Cal	There is no index for GA	New Rec.	Manual <Program> NOA	Manual GA/GR NOA
San Francisco				x												CP 4	CAAP Denial - Failed 15-day Residency Requirement	Failed 15-day Residency Requirement	There is no index for GA	New Rec.	Manual <Program> NOA	Manual GA/GR NOA
San Francisco				x												CP 6	CAAP Denial - Failed Residency due to Probation/Parole Restriction	CAAP Denial - Failed Residency due to Probation/Parole Restriction	There is no index for GA	New Rec.	Manual <Program> NOA	Manual GA/GR NOA
San Francisco				x												CP 7	CAAP Denial - Failed Residence/Immigration Requirements	CAAP Denial - Failed Residence/Immigration Requirements	There is no index for GA	New Rec.	Manual <Program> NOA	Manual GA/GR NOA
San Francisco				x												CP 8	CAAP Denial - On Aid in Another County/State	CAAP Denial - On Aid in Another County/State	There is no index for GA	New Rec.	Manual <Program> NOA	Manual GA/GR NOA
San Francisco				x												CP 9	CAAP Denial - Excess Cash Assets	CAAP Denial - Excess Cash Assets	There is no index for GA	New Rec.	Manual <Program> NOA	Manual GA/GR NOA
San Luis Obispo				x												DSS GA 226 A	GA Employable Program Approval Notice.docx	County specific GA approval NOA	County created NOA action. For use outside of CalWIN and imaged	New Rec.	Manual <Program> NOA	Manual GA/GR NOA
San Luis Obispo				x												DSS GA 226 B	GA Disabled Program Conditional Approval Discontinuance Notice.docx	County specific GA NOA	County created NOA action. For use outside of CalWIN and imaged	New Rec.	Manual <Program> NOA	Manual GA/GR NOA
San Luis Obispo				x												DSS GA 226 C	GA Denial Discontinuance Receiving SSI.docx	County specific GA denial/disc in receipt of SSI NOA	County created NOA action. For use outside of CalWIN and imaged	New Rec.	Manual <Program> NOA	Manual GA/GR NOA
San Luis Obispo				x												DSS GA 239-D	GA Denial-Discontinuance Notice.docx	County specific GA disc./denial NOA	County created NOA action. For use outside of CalWIN and imaged	New Rec.	Manual <Program> NOA	Manual GA/GR NOA
San Luis Obispo				x												DSS GA 3	GA Approval Disabled Program Notice.docx	SLO GA approval NOA for GA disabled program	County specific NOA	New Rec.	Manual <Program> NOA	Manual GA/GR NOA
San Luis Obispo				x												DSS GA 4	GA Change in Income Notice.docx	SLO GA change NOA Income increase/decrease	County specific NOA	New Rec.	Manual <Program> NOA	Manual GA/GR NOA
San Luis Obispo				x												DSS GA 408	GA SSI Claim No Active GA Case.docx	Informing notice to GA recipients and Benefit Advocate can no longer represent.	County created letter to inform recipients that GA disc. Results in DSS Benefit Advocate no longer representing client. Provides references to advocates and attorneys	New Rec.	Manual <Program> NOA	Manual GA/GR NOA
San Luis Obispo				x												DSS GA 7	GA Employable Discontinuance Notice.docx	SLO GA employable disc. NOA	County specific NOA	New Rec.	Manual <Program> NOA	Manual GA/GR NOA

San Luis Obispo				x												DSS GA 901	GA Discontinuance Notice Not Disabled.docx	County specific GA approval NOA	County created NOA action. For use outside of CalWIN and imaged	New Rec.	Manual <Program> NOA	Manual GA/GR NOA
San Luis Obispo				x												DSS GA 902	GA Disabled Program Non-Compliance Denial-Discontinuance Notice.docx	County specific GA approval NOA	County created NOA action. For use outside of CalWIN and imaged	New Rec.	Manual <Program> NOA	Manual GA/GR NOA
Tehama				x												GA 10d	Disabled Discontinuance NOA (English/Spanish)	GA Disabled Disc NOA	Specific to county business process for GA	New Rec.	Manual <Program> NOA	Manual GA/GR NOA
Tehama				x												GA 10e	Employable Discontinuance NOA (English/Spanish)	GA Employable Disc NOA	Specific to county business process for GA	New Rec.	Manual <Program> NOA	Manual GA/GR NOA
Santa Clara				x												GA 18 A	Notice to Facility Operator	Notice of Action	Notice of Action for County specific program (GA); existing CAISAWS forms do not meet business needs.	New Rec.	Manual <Program> NOA	Manual GA/GR NOA
Santa Clara				x												GA 201	GA- Transportation Approval	Notice of Action	Notice of Action for County specific program (GA); existing CAISAWS forms do not meet business needs.	New Rec.	Manual <Program> NOA	Manual GA/GR NOA
Santa Clara				x												GA 239	General Assistance Program	Notice of Action	Notice of Action for County specific program (GA); existing CAISAWS forms do not meet business needs.	New Rec.	Manual <Program> NOA	Manual GA/GR NOA
Tehama				x												GA 8	Grant NOA (English/Spanish)	GA Grant NOA	Specific to county business process for GA	New Rec.	Manual <Program> NOA	Manual GA/GR NOA
Santa Clara				x												GA 8	Standard failure to respond Letter	Notice of Action	Notice of Action for County specific program (GA); existing CAISAWS forms do not meet business needs.	New Rec.	Manual <Program> NOA	Manual GA/GR NOA
Tehama				x												GA 9	Denial NOA (English/Spanish)	GA Denial NOA	Specific to county business process for GA	New Rec.	Manual <Program> NOA	Manual GA/GR NOA
Lake				x												LAK 00801 D	Denial 30 Day	General Relief	Lake County form-not found on list-only has NSA denial & termination notice	New Rec.	Manual <Program> NOA	Manual GA/GR NOA
Los Angeles				x												PA 6167	GRHSMP Approval Notice		No possible map found in listing	New Rec.	Manual <Program> NOA	Manual GA/GR NOA
Napa				x												SSSD 4001	GA Discontinuance NOA			New Rec.	Manual <Program> NOA	Manual GA/GR NOA
Napa				x												SSSD 4007	GA Notice of Denial			New Rec.	Manual <Program> NOA	Manual GA/GR NOA
Napa				x												SSSD 4016	GA Notice of GA Decrease			New Rec.	Manual <Program> NOA	Manual GA/GR NOA
Napa				x												SSSD 4022	GA Notice to Applicants			New Rec.	Manual <Program> NOA	Manual GA/GR NOA
Stanislaus				x												STAN GA 960	Notice of Action General Assistance Program	General Assistance Discontinuance	Stop General Assistance Benefits due to Monthly Report not received. Similar Form not listed on Forms List	New Rec.	Manual <Program> NOA	Manual GA/GR NOA
San Francisco				x												Y 3	CAAP Discontinuance: CAAP-1 Incomplete	CAAP Discontinuance: CAAP-1 Incomplete	There is no index for GA	New Rec.	Manual <Program> NOA	Manual GA/GR NOA
San Francisco				x												Y3	CAAP Discontinuance - CAAP 1 Incomplete	Discontinuance for Incomplete CAAP 1 (monthly income report) or missing documents	There is no index for incomplete monthly income report or missing documents	New Rec.	Manual <Program> NOA	Manual GA/GR NOA
Contra Costa										x						KG 149	KINGAP Discontinuance			New Rec.	Manual <Program> NOA	Manual KG NOA
Contra Costa										x						KG 880	KinGAP Approval			New Rec.	Manual <Program> NOA	Manual KG NOA
Contra Costa										x						KG 885	KinGAP Increase			New Rec.	Manual <Program> NOA	Manual KG NOA
Contra Costa										x						KG 891	KinGap Decrease			New Rec.	Manual <Program> NOA	Manual KG NOA
Santa Clara													x			NA 1261 B	Notice of Action for Kinship-Guardians Only	Notice of Action	Notice of Action for FC related changes; existing CAISAWS forms do not meet business needs.	New Rec.	Manual <Program> NOA	Manual KG NOA
San Francisco				x												007 0 (09/03)	CALM Discontinuance - Not Eligible for ABD Medi-Cal	CALM Discontinuance - Not Eligible for ABD Medi-Cal	There is no index for GA	New Rec.	Manual <Program> NOA	Manual MC NOA
San Diego				x												14-128	Suspension of MC Benefits - Removal of Suspension	Notice of Action	Notifies customer that they are suspended/suspension removed	New Rec.	Manual <Program> NOA	Manual MC NOA
San Diego				x												14-135	MC Denial for MCIEP	Notice of Action	Notifies applicant of denial of MCIEP	New Rec.	Manual <Program> NOA	Manual MC NOA
San Diego				x												14-136	MCIEP Discontinuance	Notice of Action	Notifies customer of discontinuance of MCIEP	New Rec.	Manual <Program> NOA	Manual MC NOA
San Diego				x												14-138	Approval of Refugee Medical Assistance	Notice of Action	Notifies customer of approval of RMA	New Rec.	Manual <Program> NOA	Manual MC NOA
San Diego				x												14-144	MC Disc NOA Over Income	Notice of Action	Notifies customer of MC discontinuance for over income limits	New Rec.	Manual <Program> NOA	Manual MC NOA
San Diego				x												14-91	No Determination Contact Form	Notice of Action	Notifies customer that they are being denied disability MC for not cooperating with DDSD	New Rec.	Manual <Program> NOA	Manual MC NOA
San Diego				x												14-94	Appeals Rescinding Notice	Notice of Action	Notifies customer of rescission of denial of MC due to hearing decision	New Rec.	Manual <Program> NOA	Manual MC NOA
Merced				x												24-4030	Aged and Disabled Medi-Cal Worksheet	NOA	To determine amount of Other Healthcare coverage that needs to be purchased in order for HH to have \$0 SOC for Medi-Cal. No similar forms on CalSAWS list.	New Rec.	Manual <Program> NOA	Manual MC NOA
Ventura				x												56-08-118	Courtesy Letter Regarding Your Closed Medi-Cal Case	Notifies client that we received verification, but it is incomplete and the case cannot be restored.	Notifies the client that we received verification, but it is incomplete and the case cannot be restored. No match	New Rec.	Manual <Program> NOA	Manual MC NOA
Ventura				x												56-08-263	Notice of Action-Removal of Suspension and Reinstatement of Medi-Cal Benefits	NOA to inform inmate of benefits are no longer suspended	Notice of Action used when Medi-Cal benefits are reinstated, no longer suspended (inmate beneficiary is released within one year) - No Match	New Rec.	Manual <Program> NOA	Manual MC NOA
Ventura				x												56-08-274	Information Notice for Refugee Medical Assistance Beneficiaries	Informing RMA beneficiaries of other programs - ACWDL 14-16	NOA for RMAs - No Match	New Rec.	Manual <Program> NOA	Manual MC NOA
Ventura				x												56-08-275	Notice of Action Approval of Medi-Cal for Refugee Medical Assistance Beneficiaries	Notice of Action for RMA beneficiaries - ACWDL 14-16	NOA for RMAs - No Match	New Rec.	Manual <Program> NOA	Manual MC NOA
Ventura				x												56-08-277	Notice of Action Approval of Medi-Cal Inmate Eligibility Program	NOA - ACWDL 14-24	Approval NOA for MCIEP program - No Match	New Rec.	Manual <Program> NOA	Manual MC NOA
Ventura				x												56-08-279	Upcoming Change to Your Medi-Cal Coverage	NOA - FFY - ACWDL 15-32	NOA sent to FFY when they are approaching 26 years and need to complete the redetermination- No Match	New Rec.	Manual <Program> NOA	Manual MC NOA
Ventura				x												56-08-286	Notice of Action - Denial of Benefits - Over Income for MAGI Medi-Cal	NOA - MAGI Medi-Cal denial, over income	Notice of Action denying MAGI applicant due to income - No Match	New Rec.	Manual <Program> NOA	Manual MC NOA

Ventura			x														56-08-290	Notice of Action - Denial for Non-Modified Adjusted Gross Income Medi-Cal	NOA - Non-MAGI Denial, no linkage	Notice of Action - Non-MAGI denial for no linkage - No Match	New Rec.	Manual <Program> NOA	Manual MC NOA
Ventura			x														56-08-291	Notice of Action - Discontinuance for Non-Modified Adjusted Gross Income Medi-Cal	NOA - Non-MAGI Discontinuance, no linkage	Notice of Action - Non-MAGI discontinuance for no linkage - No Match	New Rec.	Manual <Program> NOA	Manual MC NOA
Ventura			x														56-08-292	Notice of Action - Denial of Retro Benefits - Over income for MAGI Medi-Cal	NOA - Retro Denial, over income for MAGI Medi-Cal	Notice of Action - over income for MAGI - No Match	New Rec.	Manual <Program> NOA	Manual MC NOA
Ventura			x														56-08-294	Discontinuance of Benefits Under the 250% Working Disabled Program	NOA - Discontinuance for 250% Working Disabled Program	Notice of Action - discontinuance for 250% Working Disabled Program - No Match	New Rec.	Manual <Program> NOA	Manual MC NOA
San Luis Obispo			x														DSS MC 199	LTC Approval - POI Expired.docx	Informing letter regarding POI for LTC	Staff can inform applicant/recipient of POI ending date and date MC without restrictions begins.	New Rec.	Manual <Program> NOA	Manual MC NOA
San Luis Obispo			x														DSS MC 473	RRR Completed.docx	Informing notice that MC annual determination has been completed.	Informing notice that MC annual redetermination has been completed. CalWIN will generate change NOAs, nothing if no changes to eligibility.	New Rec.	Manual <Program> NOA	Manual MC NOA
San Luis Obispo			x														DSS MC 473-M	M MAGI MC RRR Completed.docx	Informing notice that MAGI MC annual determination has been completed.	Informing notice that MAGI MC annual redetermination has been completed. CalWIN will generate change NOAs, nothing if no changes to eligibility.	New Rec.	Manual <Program> NOA	Manual MC NOA
San Luis Obispo			x														DSS MC 657	DDS Waiver Approval.docx	Approval NOA for MC DDS Waiver program	County specific NOA	New Rec.	Manual <Program> NOA	Manual MC NOA
San Luis Obispo			x														DSS MC 734	Minor Consent Approval Notice.docx	MC Minor Consent approval	County specific NOA for Minor Consent, includes benefits approved and SOC	New Rec.	Manual <Program> NOA	Manual MC NOA
San Luis Obispo			x														DSS MC 841	Approval of 4M for Former FC Children.docx	Approval NOA for Former Foster Care Children	County created NOA informing youth of approval to Former Foster Care Children until at 26.	New Rec.	Manual <Program> NOA	Manual MC NOA
San Luis Obispo			x														DSS MCI 101	Inmate Medi-Cal Suspension.docx	MC NOA for suspension of benefits	County created NOA to inform recipient that MC is suspended due being an inmate of a public institution.	New Rec.	Manual <Program> NOA	Manual MC NOA
San Luis Obispo			x														DSS MCI 201	Inmate Medi-Cal Suspension Removed.docx	MC NOA for suspension of benefits removed.	County created NOA to inform recipient that MC is suspended due being an inmate of a public institution has been removed	New Rec.	Manual <Program> NOA	Manual MC NOA
Santa Clara			x														MC 0337	Notice of Action Approval Of Medi-Cal Inmate - Fullscope	Notice of Action	Notice of Action for MC-related changes; existing CAISAWS forms do not meet business needs.	New Rec.	Manual <Program> NOA	Manual MC NOA
Santa Barbara			x														MC 0377-2B	MEDI-CAL BENEFITS REMOVAL OF SUSPENSION	INFORMING LETTER	NEEDED FORM NOT ON TIER 1 LIST -REQUIRED	New Rec.	Manual <Program> NOA	Manual MC NOA
Contra Costa			x														MC 129 (9/12)	NOA Conditional Withdrawal of Hearing Request/Aid Paid Pending/Hearing Decision Compliance			New Rec.	Manual <Program> NOA	Manual MC NOA
Santa Clara			x														MC 239 A LIS Denial	Medi-Cal Notice of Action Denial of Benefits	Notice of Action	Notice of Action for MC-related changes; existing CAISAWS forms do not meet business needs.	New Rec.	Manual <Program> NOA	Manual MC NOA
Santa Clara			x														MC 239 A MAGI Denial	MAGI Medi-Cal Notice of Action Denial of Benefits	Notice of Action	Notice of Action for MC-related changes; existing CAISAWS forms do not meet business needs.	New Rec.	Manual <Program> NOA	Manual MC NOA
Santa Clara			x														MC 239 A MAGI Discontinuance	MAGI Medi-Cal Notice of Action Discontinuance of Benefits	Notice of Action	Notice of Action for MC-related changes; existing CAISAWS forms do not meet business needs.	New Rec.	Manual <Program> NOA	Manual MC NOA
Santa Clara			x														MC 239 A Non-MAGI Discontinuance	Non-MAGI Medi-Cal Notice of Action Discontinuance of Benefits	Notice of Action	Notice of Action for MC-related changes; existing CAISAWS forms do not meet business needs.	New Rec.	Manual <Program> NOA	Manual MC NOA
Contra Costa			x														MC 239 COLA (11/08)	Medi-Cal Notice of Change - COLA			New Rec.	Manual <Program> NOA	Manual MC NOA
Santa Barbara			x														MC 239 MC DENIAL	MC DENIAL NON-MODIFIED ADJUSTED GROSS INCOME-NO LINKAGE	INFORMING NOTICE	NEEDED STATE FORM NOT ON TIER 1 LIST - REQUIRED	New Rec.	Manual <Program> NOA	Manual MC NOA
Santa Barbara			x														MC 239 MC DISC	MC DISCONTINUANCE FOR NON-MODIFIED ADJUSTED GROSS INCOME-NO LINKAGE	INFORMING NOTICE	NEEDED STATE FORM NOT ON TIER 1 LIST - REQUIRED	New Rec.	Manual <Program> NOA	Manual MC NOA
Santa Barbara			x														MC 239 SOCR PART B	REDUCTION IN SHARE-OF-COST DUE TO PAYMENT OF PART B PREMIUM	INFORMING NOTICE	NEEDED STATE FORM NOT ON TIER 1 LIST - REQUIRED	New Rec.	Manual <Program> NOA	Manual MC NOA
Santa Barbara			x														MC 239 TMC-2	TMC DENIAL OR DISCONTINUANCE	INFORMING NOTICE	NEEDED STATE FORM NOT ON TIER 1 LIST - REQUIRED	New Rec.	Manual <Program> NOA	Manual MC NOA
San Luis Obispo			x														MC 239A	MC239A Denial Discontinuance of Medi-Cal Benefits.docx	MC denial/discontinuance NOA	County created MC denial/discontinuance NOA - Hearing info refers to State Hearings Division, not County	New Rec.	Manual <Program> NOA	Manual MC NOA
Placer			x														MC 368	NOA&Supp Form-Express Enroll Apps	Applications/SOF/ICT		New Rec.	Manual <Program> NOA	Manual MC NOA
Contra Costa			x														MCC 500 (7/18)	Medi-Cal Notice of Action Discontinuance For Non-Modified Adjusted Gross Income Medi-Cal			New Rec.	Manual <Program> NOA	Manual MC NOA
Contra Costa			x														MCC 501 (7/18)	Medi-Cal Notice of Action Denial for Non-Modified Adjusted Gross Income Medi-Cal			New Rec.	Manual <Program> NOA	Manual MC NOA
Los Angeles			x														PA 4048	DPSS MC Letter of Authorization (LOA)/MC 180 Request Form	Certifies that the MC 180 request has been reviewed and approved.	No possible map found in listing	New Rec.	Manual <Program> NOA	Manual MC NOA

Los Angeles			x													PA 4049	DPSS MC Letter of Authorization (LOA)/MC 180 Checklist	Records the MC approval effective date and the Medical service date. Also, identifies the condition for issuing the MC 180 and the required documentation.	No possible map found in listing	New Rec.	Manual <Program> NOA	Manual MC NOA
Santa Clara			x													SCD 1225	Medi-Cal Notice of Action - Approval/Termination of One-Month Medi-Cal	Notice of Action	Notice of Action for MC-related changes; existing CAISAWS forms do not meet business needs.	New Rec.	Manual <Program> NOA	Manual MC NOA
Santa Clara			x													SCD 2330	Notice of Action Approval of Med-Cal Benefits	Notice of Action	Notice of Action for MC-related changes; existing CAISAWS forms do not meet business needs.	New Rec.	Manual <Program> NOA	Manual MC NOA
Santa Clara			x													SCD 2368	Notice of Action Approval of Medi-Cal for Refugee Medical Assistance Beneficiaries	Notice of Action	Notice of Action for MC-related changes; existing CAISAWS forms do not meet business needs.	New Rec.	Manual <Program> NOA	Manual MC NOA
Santa Clara			x													SCD 2369	Information Notice for Refugee Medical Assistance Beneficiaries	Notice of Action	Notice of Action for MC-related changes; existing CAISAWS forms do not meet business needs.	New Rec.	Manual <Program> NOA	Manual MC NOA
Santa Clara			x													SCD 692	Federal Medi card/Title IV - Elig./Inelig. And Medi-Cal/Financial Plan	Notice of Action	Notice of Action for MC-related changes; existing CAISAWS forms do not meet business needs.	New Rec.	Manual <Program> NOA	Manual MC NOA
Santa Clara			x													Spltr 744	Notice of requirement to apply for Medicare insurance benefits	Notice of Action	Notice of Action for MC-related changes; existing CAISAWS forms do not meet business needs.	New Rec.	Manual <Program> NOA	Manual MC NOA
Placer			x													TPL-CAS-134	HIPP Program Approval NOA	OHC/TPL/MEDS 1		New Rec.	Manual <Program> NOA	Manual MC NOA
Santa Barbara			x													W 373	NOTICE TO FNS FACILITY AUTHORIZED REPRESENTATIVES	NOA TO FNS AUTHORIZED REPS	REQUIRED NOTIFICATION	New Rec.	Manual <Program> NOA	Manual MC NOA
Santa Barbara			x													W 374	NOTICE TO FNS FACILITIES	NOA TO FNS FACILITIES	REQUIRED NOTIFICATION	New Rec.	Manual <Program> NOA	Manual MC NOA
Tulare						x										1934A TW	Family Stabilization Service Approval Notice	Approval for Family Stabilization	This is a notice that is sent to the client when they have been approved to participate in the Family Stabilization program. There is no form on the CalSAWS listing that has information close to what this form is requesting	New Rec.	Manual <Program> NOA	Manual WTW NOA
Tulare						x										1934D TW	Family Stabilization Services Discontinuance Notice	Discontinuance from Famil Stabilization	This is a notice that is sent to the client when they have been discontinued from the Family Stabilization program. There is no form on the CalSAWS listing that has information close to what this form is requesting	New Rec.	Manual <Program> NOA	Manual WTW NOA
Tulare						x										1945 TW	Self Employment Approval/Denial Notice	Self Employment Approval/Denial Notice	This is the notice given to the client to inform them of their approval or denial of self employment status for the Employment Services Program. There is no form on the CalSAWS listing that has information close to what this form is requesting	New Rec.	Manual <Program> NOA	Manual WTW NOA
Ventura						x										56-06-684	Job Retention Services Ending (10/19)	Notification	Notice of Job Retention ending-no match	New Rec.	Manual <Program> NOA	Manual WTW NOA
Placer						x										Cal-Learn Notices of Action ALL	Cal-Learn Notices of Action ALL	WTW Cal Learn		New Rec.	Manual <Program> NOA	Manual WTW NOA
Sacramento						x										CF 3003 34N	Family Stabilization Discontinuance NOA	Notice of action for Family Stabilization Services	Used to notify customers of the Family Stabilization discontinuance	New Rec.	Manual <Program> NOA	Manual WTW NOA
Los Angeles						x										GN 6007	Notification of Change from Service Provider	GN 6007 is completed by contracted service providers to notify the GSW/CCM of participation changes for all CalWORKs participants.	No possible map found in listing	New Rec.	Manual <Program> NOA	Manual WTW NOA
Los Angeles						x										GN 6007A	Notification of Change from Specialized Supportive Services Provider	Form is completed by service providers to notify WTW staff of changes in the participant's ability to participate full-time or concurrently in other WTW activities.	No possible map found in listing	New Rec.	Manual <Program> NOA	Manual WTW NOA
Los Angeles						x										GN 6046-T	Overpayment Notice: Transportation Expenses	Notice sent when a participant fails to provide a receipt for specific transportation expenses.	No possible map found in listing	New Rec.	Manual <Program> NOA	Manual WTW NOA
Los Angeles						x										GN 6046-TN	Underpayment/Overpayment Notice: Transportation Expenses	Notice sent when a participant is a no show to a WTW activity and transportation was issued.	No possible map found in listing	New Rec.	Manual <Program> NOA	Manual WTW NOA
Placer						x										HVI 382	Discontinuance	WTW Supportive Services		New Rec.	Manual <Program> NOA	Manual WTW NOA
Placer						x										M42-69a	Cal-Learn penalty			New Rec.	Manual <Program> NOA	Manual WTW NOA
Los Angeles						x										M42-769	Approve Cal-Learn Bonus		No possible map found in listing	New Rec.	Manual <Program> NOA	Manual WTW NOA
Santa Clara						x										NA 844	Notice of Action - CaLearn Adequate Progress	Notice of Action	Notice of Action for employment and supportive services related changes; existing CAISAWS forms do not meet business needs.	New Rec.	Manual <Program> NOA	Manual WTW NOA
Placer						x										NA-844	No Bonus, no penalty-Cal Learn			New Rec.	Manual <Program> NOA	Manual WTW NOA
Los Angeles						x										NOA 992	Vehicle Repair NOA	This NOA is used to approve GAIN participants' Vehicle Diagnosis/Repair.	No possible map found in listing	New Rec.	Manual <Program> NOA	Manual WTW NOA
Los Angeles						x										NS-NOA001	Manually Generated Notice of Actions		No possible map found in listing	New Rec.	Manual <Program> NOA	Manual WTW NOA
Los Angeles						x										NS-NOA001	Manually Generated Notice of Actions		No possible map found in listing	New Rec.	Manual <Program> NOA	Manual WTW NOA
Placer						x										P-19	Deregistration Notification	WTW Correspondence		New Rec.	Manual <Program> NOA	Manual WTW NOA
Santa Clara						x										SCD 1779	CWES Notice of Missed Participation Problem Cause Determination and Compliance Appointment Failed Telephone Attempt	Notice of Action	Notice of Action for employment and supportive services related changes; existing CAISAWS forms do not meet business needs.	New Rec.	Manual <Program> NOA	Manual WTW NOA

[illegible]

San Luis Obispo			x														DSS MC 16-LTS-RRR	LTC-RRR Long Term Care RRR Checklist.docx	Checklist of all criteria needed to process MC LTC case redetermination.	County created worker tool required by SLO Co. Checklist of all program requirements and also requires worker date and signature.	New Rec.	Worker Use-Program Checklists	MC - Worker Use Checklists
San Luis Obispo			x														DSS MC 222	DDSD Checklist.docx	MC DDSD checklist	County created document to track DDSD applications and checklist that proper paperwork was received and correct processing of application.	New Rec.	Worker Use-Program Checklists	MC - Worker Use Checklists
Contra Costa			x														INTAKE MC 01 (07/09)	Medi-Cal Intake LSupervisor Review Checklist			New Rec.	Worker Use-Program Checklists	MC - Worker Use Checklists
Napa			x														SSSD 1004	CMSP Review Checklist			New Rec.	Worker Use-Program Checklists	MC - Worker Use Checklists
Placer			x														MC 176 S	Medi-Cal Status Report	Income Reports/Budgets		New Rec.	Periodic Reporting	MC 176S - Medi-Cal Status Report
San Diego																	09-83	Good News for CA families receiving CalFresh	Referral/Request for Medi-Cal	Outreach for CFHH to apply for MC	New Rec.	Non-Fraud Referral or Request	Medi-Cal Referral
San Diego																	14-141	TLICP Premium Refund-Waiver Request	Transmittal	Used to communicate with vendor for TLICP premium refunds or premium waiver requests	New Rec.	Non-Fraud Referral or Request	Medi-Cal Referral
Solano	x	x															48-30-4	CalWORKs/FS to Medi-cal Referral Form	Transfer referral form to Medi-Cal only	No match in the provided CalSAWS document.	New Rec.	Non-Fraud Referral or Request	Medi-Cal Referral
Ventura																	56-04-021	Medicaid Request	Verification of Title IV-E eligibility letter for Medicaid	Completed by CBS and sent to caregiver to verify Title IV-E eligibility for out of state Medicaid - No Match	New Rec.	Non-Fraud Referral or Request	Medi-Cal Referral
Ventura			x														56-08-148	Department of Developmental Services (DDS) Waiver Referral Cover Sheet	Cover letter for MC application when a DDS waiver is received	Cover letter for Medi-Cal application with due date when a DDS waiver referral is received - No Match	New Rec.	Non-Fraud Referral or Request	Medi-Cal Referral
Placer																	MC 364	CDA Waiver Referral	Applications/SOF/ICT		New Rec.	Non-Fraud Referral or Request	Medi-Cal Referral
Santa Clara			x														SCD 558	Statement Of Need For Mental Health Services Medi-Cal Minor Consent	Application	Application related documents; existing CalSAWS documents are too specific to index to. In order to meet county needs we need generic categories	New Rec.	Non-Fraud Referral or Request	Medi-Cal Referral
San Diego			x														11-114 HHSA	Waitlist Attendance Log	GR log for attendance if customer is put on a waitlist for Substance Abuse Services	No CalSAWS document - County specific instructions	Is this imaged to a specific case/person? New Rec.	GA/GR Work and Activities Forms	Medical Statement or Form
San Diego			x														11-45 HHSA	GR Medical Statement	Statement from doctor on a GR customer's ability to complete a work project	No CalSAWS document - County specific instructions	New Rec.	GA/GR Work and Activities Forms	Medical Statement or Form
San Diego			x														11-45G HHSA	GREE Medical Statement	Statement from GREE provider on customer's ability to complete a work project	No CalSAWS document - County specific instructions	New Rec.	GA/GR Work and Activities Forms	Medical Statement or Form
Ventura			x														56-07-067	GR Employability Evaluation	Authorization to Release Medical Information	GR specific employability assesment-No Match	New Rec.	GA/GR Work and Activities Forms	Medical Statement or Form
Alameda			x														90-151	Informed Consent For Health Questionnaire	GA Health form	Form is specific to county General Assistance program	New Rec.	GA/GR Work and Activities Forms	Medical Statement or Form
Alameda			x														90-2	Medical Statement Doctors Confidential Report	GA Medical Statement from provider	Form is specific to county General Assistance program	New Rec.	GA/GR Work and Activities Forms	Medical Statement or Form
Alameda			x														90-2MH	Mental Health Clinicians Confidential Report	GA Mental Health Statement from provider	Form is specific to county General Assistance program	New Rec.	GA/GR Work and Activities Forms	Medical Statement or Form
San Luis Obispo			x														DSS GA 253	GA Disabled Status After SSA Disability Denial.docx	Request for verifaicon following SSI/SSP denial	SLO County process for GA applicants. Required to comply with SLO GA rules following SSI/SSP denial. Noncompliance results in disc.	New Rec.	GA/GR Work and Activities Forms	Medical Statement or Form
San Luis Obispo			x														DSS GA 50	GA Disability Tracking.docx	GA worker tracking tool for disabilities and exemption form dates.	Medical exemption forms tracked and reminders for request of expiring medical exemptions. Also used to determine eligibility time frames. County specific	New Rec.	GA/GR Work and Activities Forms	Medical Statement or Form
Ventura																	56-00-103	MEDS Research and Clearance	used to make sure case information and MEDS case information match	No match - checklist needed to insure case information matches MEDS, also used by Foster Care	New Rec.	MEDS Related - Clearance, Updates, Requests	MEDS Form
Ventura																	56-02-144	MEDS ABAWD Online Request (07/18)	MEDS Online ABAWD Request. No match.	Update ABAWD time clock in MEDS- no match	New Rec.	MEDS Related - Clearance, Updates, Requests	MEDS Form
Ventura																	56-08-097	Accelerated Enrollment (AE) MEDS On-line Denial	Specific MEDS online request to term Accelerated Enrollment when MC denied	Communication from worker to MEDS operator to request an AP18 online transaction to term an 8E aid code. No match	New Rec.	MEDS Related - Clearance, Updates, Requests	MEDS Form
Ventura																	56-08-098	Craig V. Bonta MEDS Online Denial	Specific MEDS online request to term Craig v Bonta when MC denied	Communication from worker to MEDS operator to request an AP18 online transaction to term a 1E, 2E, or 6E aid code. No match	New Rec.	MEDS Related - Clearance, Updates, Requests	MEDS Form
Ventura																	56-08-136	Citizenship/ID Request AP 19	MEDS form used to request CA birth match or to update DRA information	MEDS form needed to update DRA citizenship/ID record or to request CA birth match - No Match	New Rec.	MEDS Related - Clearance, Updates, Requests	MEDS Form
Butte																	BU558	Meds Email Request for Online	Request for Online or Emergent Meds	Advises Meds clerks that an online is needed	New Rec.	MEDS Related - Clearance, Updates, Requests	MEDS Form
Riverside																x	DPSS 3841	AP 19 - Report Citizenship and Identity to MEDS	MEDS request form	to request MEDS staff to update Citizenship information for a client into MEDS	New Rec.	MEDS Related - Clearance, Updates, Requests	MEDS Form
Riverside																x	DPSS 3841 A	AP 10 - Request for California Birth Record	MEDS request form	to request MEDS staff to request a California Birth Record Match in MEDS for a client	New Rec.	MEDS Related - Clearance, Updates, Requests	MEDS Form
Riverside																x	DPSS 640	CIV Data Input & MEDS Research Document (part of DOC 0612)	C-IV and MEDS research form for customers	Office Support's internal process. Used to review customer collected information.	New Rec.	MEDS Related - Clearance, Updates, Requests	MEDS Form
Initial - Santa Cruz																	Emergency MC Update Form	CCAH Emergency MC Update Form	CCAH Emergency MC Update Form		New Rec.	MEDS Related - Clearance, Updates, Requests	MEDS Form
Contra Costa			x														MEDS CIT 01	Medi-Cal Eligibility Data System (MEDS) Reporting Citizenship/Identity Request (02/08)			New Rec.	MEDS Related - Clearance, Updates, Requests	MEDS Form

Contra Costa			x																MEDS CIT 02	Medi-Cal Eligibility Data System (MEDS) Automated Birth Record Match Request (02/08)			New Rec.	MEDS Related - Clearance, Updates, Requests	MEDS Form
Santa Clara										x									SCD 1296	Request for Online Transaction	Miscellaneous	There needs to be a generic miscellaneous category for documents that do not index to any of the existing existing CalSAWS Documents and it does not make business sense to create a new category	Is this a MEDS request? New Req.	MEDS Related - Clearance, Updates, Requests	MEDS Form
Los Angeles																			MEDS Referral	Referral	Change of MEDS information	New Rec.	MEDS Related - Clearance, Updates, Requests	MEDS Form	
Riverside	x																		DPSS 4452	Rapid Rehousing Referral	Referral to services	FSS & BH staff complete.	New Rec.	Behavioral/Mental Health Forms	Mental Health and Substance Abuse Referral
Initial - Kern																			KCDHS 787-Gen	National Toxicology Lab Referral			New Rec.	Behavioral/Mental Health Forms	Mental Health and Substance Abuse Referral
Napa																			SSSD 2008	Drug Referral			New Rec.	Behavioral/Mental Health Forms	Mental Health and Substance Abuse Referral
Tehama																			TEH WTW 111	Drug Screen Referral - Lane Chiropractic	Referral to Local Partner Agency	Referral to local partner agency	New Rec.	Behavioral/Mental Health Forms	Mental Health and Substance Abuse Referral
Tehama																			TEH WTW 77	BHT Termination of CalWORKs	Stop Behavior Health Services	Report end date of BH services with local partners	New Rec.	Behavioral/Mental Health Forms	Mental Health and Substance Abuse Referral
San Diego																		x	11-123 HHSA	MTS Pass Referral Form	Referral to Clerical to issue bus pass	No CalSAWS document - County specific instructions	New Rec.	Transportation Forms	Mileage Log
Tulare																			1958 TW	TulareWORKS - WTW Teen Parent Program Travel Log	Travel Log for Teen Parent Progm	Travel log that must be completed by participants of the WTW Teen Parent Program. There is no form on the CalSAWS listing that has information close to what this form is requesting	New Rec.	Transportation Forms	Mileage Log
Ventura	x																		56-06-013	CalWORKs Daily Transportation Log	Transportation log	Client Mileage reimbursement-no match	New Rec.	Transportation Forms	Mileage Log
San Luis Obispo																			DSS ACCT 253	Ride-On Confirmation.docx	Schedule of transportation dates	Verification of scheduled transportation dates, County specific	New Rec.	Transportation Forms	Mileage Log
San Luis Obispo																			DSS CF 110	CF Medical Transportation Mileage Log.docx	Client mileage log - dates, destination, purpose, miles driven	Transportation verification for mileage due to medical conditions. No equivalent	New Rec.	Transportation Forms	Mileage Log
Los Angeles																			GN 6407	GAIN Transportation Type Eligibility Worksheet	Used to determine travel time for public transportation or mileage.	No possible map found in listing	New Rec.	Transportation Forms	Mileage Log
Lake Placer																			LAK01030	Mileage Claim Route sheet	CalWorks/Welfare to Work	Lake County form-not found on list	New Rec.	Transportation Forms	Mileage Log
Tehama																			P-41	Mileage Claim	WTW Trans & Mileage		New Rec.	Transportation Forms	Mileage Log
																			TEH WTW 18	Transportation Mileage Sheet	Request for Mileage Reimbursement	Request for mileage reimbursement	New Rec.	Transportation Forms	Mileage Log
Ventura																			56-27-006	Quality Control Notice of Noncooperation (11/15)	Notice to supervisor of client's failure to cooperate with QC	Requests client be discontinued from CalFresh, and ineligible until the following Feb. 2. Possible match to CF QC Notice ??	Other county drawer - QA/QC	QA/QC	Non-Cooperation
Ventura																			56-27-007	Quality Control Refusal to Cooperate (09/15)	Form to allow client to refuse to cooperate with QC	Client signs form to specifically refuse to cooperate with QC. No match	Other county drawer - QA/QC	QA/QC	Non-Cooperation
Placer																			ALL 154	Non-Needy Payee Responsibility	Applications/SOF/ICT		New Rec.	Supporting CW Forms	Non-Need Caretake Relative
San Diego																			11-49A HHSA	Job Training Requirements	Job Training Requirements	No CalSAWS document - County specific instructions	New Rec.	WTW Forms	On The Job Training Agreement
Ventura																			56-06-087B	Work Experience (WEX) Training Plan & Evaluation	Training plan	Training plan outline-no match	New Rec.	WTW Forms	On The Job Training Agreement
Ventura																			56-06-196	Work Experience (WEX) Trainee Request	Request form	Request for trainee-no match	New Rec.	WTW Forms	On The Job Training Agreement
Placer																			WTW 16	Grant-Based OJT: Vol Consent	WTW WEX		New Rec.	WTW Forms	On The Job Training Agreement
Butte	x																		BU CW-610	CalWORKs Supportive Services	Explain All Supportive Services	Sign with client at their orientation appointment	New Rec.	WTW Forms	Orientation
San Luis Obispo	x																		DSS ES 259	CW Required Discussion Handbook.docx	WTW Requirements and Services notification	Outlines time limits, WTW requirements, activity option, supportive services, exemptions, CalLearn, Domestic Abuse, Financial Sanctions and applicant signs to validate.	New Rec.	WTW Forms	Orientation
Initial - Kern	x																		KCDHS 272-CW	CalWORKs Employment Services Filing Guide			New Rec.	WTW Forms	Orientation
Initial - Kern																			KCDHS 400-WTW	New Beginnings - WTW Services Orientation Book			New Rec.	WTW Forms	Orientation
Initial - Kern																			KCDHS 75-WTW	Welfare to Work Handbook			New Rec.	WTW Forms	Orientation
Santa Clara																			SCD 163 GO	Contact Action Summary Group Orientation	Supportive Services	Forms in this category are related to various supportive services; CalSAWS forms/ categories do not meet business needs	New Rec.	WTW Forms	Orientation
Santa Clara																			SCD 2558	WTW Child Care Voucher	Supportive Services	Forms in this category are related to various supportive services; CalSAWS forms/ categories do not meet business needs	New Rec.	Child Care	Other Child Care
Santa Clara																			SCD 1834	Incomplete Child Care Registration	Supportive Services	Forms in this category are related to various supportive services; CalSAWS forms/ categories do not meet business needs	New Rec.	Child Care Forms	Other Child Care
Los Angeles																			GN 45	Important Notice to Transitional Subsidized Employment Participants	Form used to notify participants that falsifying timecards is considered fraud.	No possible map found in listing	New Rec.	WTW Activities	Other Employment and Training

Tulare					x											1935C TW	Job Site Placement New Trainee Checklist	Job site checklist	This form is given to new trainees so that they can know what to expect and what to go over at their new Job Site. There is no form on the CalSAWS listing that has information close to what this form is requesting	Is this signed? Does it need to be imaged? New Rec.	WTW Forms	Other Employment and Training
Santa Clara	x															RS 2/3	Enrollment and Status Change:	RCA	Form is used for RCA purposes; existing CalSAWS categories are too specific to processes not utilized at Santa Clara county. A general category is being requested	New Rec.	WTW Forms	Other Employment and Training
Santa Clara	x															SCD 26	Employment & Training Requirements Refugee Cash Assistance (RCA)	RCA	Form is used for RCA purposes; existing CalSAWS categories are too specific to processes not utilized at Santa Clara county. A general category is being requested USED TO MAKE SURE ALL ASPECTS OF WTW CASE IS CORRECT	New Rec.	WTW Forms	Other Employment and Training
Santa Barbara																W 386	WTW CASE REVIEW	WTW CASE REVIEW		New Rec.	WTW Forms	Other Employment and Training
Santa Clara					x											SCD 1148 FC	Sub-Payee Supplemental Disbursement Authorization or Action Request	SSI Advocacy	Form is used for SSI Advocacy purposes; existing CalSAWS categories are too specific to processes not utilized at Santa Clara county. A general category is being requested	New Rec.	Fiscal Forms	Payee or Subpayee Form
Santa Clara														x		SCD 144	Request For Subpayee Trust Account	Verification request	Form is used to request verification; existing CalSAWS categories are too specific to processes not utilized at Santa Clara county. A general category is being requested	New Rec.	Fiscal Forms	Payee or Subpayee Form
Stanislaus																SSA 11 BK	Request to be Selected as Payee	Correspondence	This is the name of form from Social Security. This form is intended for County when applying to become payee of Social Security Benefits There is no index for authorization for two party payment	New Rec.	Fiscal Forms	Payee or Subpayee Form
San Francisco	x				x	x										2510	Authorization for Co-Payment	Autorization for two party payee. Form used to process additional months of service.	New Rec.	HSP and Homeless Assistance Forms	Payment Form	
Merced	x															24-3115	HSP Request for Continued Payment		Category does not exist in CalSAWS.	New Rec.	HSP and Homeless Assistance Forms	Payment Form
Tulare	x				x											438-C	Request for Homeless Assistance to EBT Edge	Issuing Homeless via EBT	Form must be completed for every homeless payment requested. County policy is to now issue homeless payments via EBT vs via warrant. There is no form on the CalSAWS listing that has information close to what this form is requesting	New Rec.	HSP and Homeless Assistance Forms	Payment Form
Ventura	x															56-03-348	AB 557 HA Check Replenishment Request	Check replenishment for AB 557 Benefits	Used to inform fiscal on the issuance of AB 557 benefits and replenishment. No match DPSS informing to Housing Authority or contracted vendor.	New Rec.	HSP and Homeless Assistance Forms	Payment Form
Riverside	x					x										DPSS 4463	Request for Approval of Housing Support Program (HSP) Funds	Authorization letter		New Rec.	HSP and Homeless Assistance Forms	Payment Form
Contra Costa						x										HG 3	Housing relocation Grant Application			New Rec.	HSP and Homeless Assistance Forms	Payment Form
Placer	x				x												Housing Vouchers	Deductions/Shelter Costs		New Rec.	HSP and Homeless Assistance Forms	Payment Form
Los Angeles																PA 6048	Unable to Process Direct Rent Payment		No possible map found in listing	New Rec.	HSP and Homeless Assistance Forms	Payment Form
Sutter																SU501	Permanent Housing Statement-Deposit	A request for the deposit payment for CW Permanent Housing benefits.	Client has the potential landlord complete form listing the rent and deposit amounts requested for CW Permanent Housing Assistance. The form supplements the CW 42 Homeless Application. Could not find any appropriate manual homeless documents listed in the provided list.	New Rec.	HSP and Homeless Assistance Forms	Payment Form
Yolo	x															YC 96	AB 557 and AB 236 Temporary HA Eligibility and Tracking	Internal County tool used to manually track Homeless assistance participants	ACL 19-77 - Form used for manual tracking until state/SAWS gives additional direction on how to capture this population. Completed by CBS based on information obtained from SW, IEVS and parents to determine the PWE in the home of removal - No Match	Is this imaged to a case? New Rec.	HSP and Homeless Assistance Forms	Payment Form
Ventura																56-04-073	Unemployed PWE (Principal Wage Earner) Determination	Worksheet; contains employment history; used to determine the Principal Wage Earner in the home of removal		New Rec.	Supporting CW Forms	PWE
Riverside							x									DPSS 2590 PWE	Primary Wage Earner and Unemployment Linkage Determination	Determines which parent is PWE	Used to determine unemployment deprivation for federal AFDC-FC determination. No comparable form.	New Rec.	Supporting CW Forms	PWE
Los Angeles	x															PA 751	Documentation of Principal Wage Earner		No possible map found in listing	New Rec.	Supporting CW Forms	PWE
Ventura Initial - Kern						x										56-04-022	NRLG Application	Request Letter; contains case information	Completed by CBS and sent to caregiver to request additional information or documentation - No Match	New Rec.	Foster Care Forms	Placement Application
Initial - Kern																KCDHS 315-41-PL	Relative Placement			New Rec.	Foster Care Forms	Placement Application
Initial - Kern																KCDHS 354-Serv	Placement Spec. Referral Form			New Rec.	Foster Care Forms	Placement Application
Initial - Kern																KCDHS 388-PL	Placement Application			New Rec.	Foster Care Forms	Placement Application
Initial - Kern																KCDHS 607-Serv	Application for Child Placement for Caregivers			New Rec.	Foster Care Forms	Placement Application
Initial - Kern																KCDHS 653-Serv	Application for Child Placement for Caregivers			New Rec.	Foster Care Forms	Placement Application
Los Angeles																RFA 01A	Resource Family Application	Application for home assessment	Eligibility determination.	New Rec.	Foster Care Forms	Placement Application

[illegible]

[illegible]

Ventura																	56-08-084	Third Party Bank Account Verification Request	Client release and request for information from a financial institution	Signed by client and completed by financial institution, to obtain status and balances of bank accounts. No match	New Rec.	Property	Property Confirmation Statement
Placer																	CSF 86	Agreement-Restricted Acct	Property/Liens		New Rec.	Property	Property Confirmation Statement
San Luis Obispo			x														DSS MC 157	LTC Facility Trust Account.docx	Document to verify LTC facility trust account	County created form that is a release of information as well as requesting if LTC individual has a trust account with the facility and the balance.	New Rec.	Property	Property Confirmation Statement
Los Angeles					x												GAIN 51	GAIN Property Statement		No possible map found in listing	New Rec.	Property	Property Confirmation Statement
																			provided to the customer at the time of requesting Asset verification, when returned with verification should be imaged in to case file and assigned to EW				
Sacramento																	SC 531A	IEVS Asset Cover Letter	Provided to customer in verification request packet		New Rec.	Property	Property Confirmation Statement
Sacramento																	SC 531B	IEVS Resource Questionnaire	Provided to customer in verification request packet		New Rec.	Property	Property Confirmation Statement
Sacramento																	SC 531C	IEVS Questionnaire Stocks	Provided to customer in verification request packet		New Rec.	Property	Property Confirmation Statement
Sacramento																	SC 531D	IEVS Questionnaire-Insurance	Provided to customer in verification request packet		New Rec.	Property	Property Confirmation Statement
Sacramento																	SC 536A	IEVS Gross Pension Distribution Questionnaire	Provided to customer in verification request packet		New Rec.	Property	Property Confirmation Statement
Sacramento																	SC 536B	IEVS Prizes-Awards Questionnaire	Provided to customer in verification request packet		New Rec.	Property	Property Confirmation Statement
Napa																	SSSD 2029	Landowner Notification of Voucher Payment			New Rec.	Property	Property Confirmation Statement
Sutter																	SU921b	DMV Memo	A form the client can take to DMV to verify if a vehicle is still in their name.	A form the client can take to DMV to verify if a vehicle is still in their name. Could not find any appropriate manual documents listed in the provided list.	New Rec.	Property	Property Confirmation Statement
Initial - Santa Cruz																	WEL8052	Real Property Other than the Home	Real Property Other than the Home		New Rec.	Property	Property Confirmation Statement
Placer																x	CSF 48	Bank Verification	Property/Liens		Verifications	Property Statement and Verification	Property Confirmation Statement
Napa																x	SSSD 2063	Clarification of Deposits			New Rec.	Property Statement and Verification	Property Confirmation Statement
																				CSF XXX	Sworn Statement		
Ventura																x	56-08-073	Annuity Evaluation Form	Determine countable income/property, evaluate for transfer period of ineligibility	Worker tool to evaluate an annuity for countable income and property, and determine any period of ineligibility. No match	New Rec.	Property	Property Evaluation
Ventura																x	56-08-082	Trust Evaluation (05/12)	Identify the type of trust and determine countable income/property	Tool to assist worker in identifying type of trust and what income or property may need to be counted. No match	New Rec.	Property	Property Evaluation
Placer																x	ALL 1364	Fair Market Value-Vehicle	Property/Liens		New Rec.	Property	Property Evaluation
Placer																x	ALL 1367	Vehicle Valuation	Property/Liens		New Rec.	Property	Property Evaluation
San Luis Obispo																x	DSS GEN 320	Value of Personal Property.docx	All program request for value of property. Release of info and 3rd party verification section	Document used for all programs when needing to determine value of personal property. Form has release of info and section for business person to provide fair market value to determine 3rd party value.	New Rec.	Property	Property Evaluation
San Luis Obispo																x	DSS GEN 465	Explanation of Deposits Appearing on Bank Statement.docx	Form asks applicants/participants to explain income deposits into bank accounts.	Workers can request information about bank deposits to determine if there is undeclared income that could be countable. Used for all programs.	New Rec.	Property	Property Evaluation
San Luis Obispo			x														DSS MC 238	Fair Market Value - POI.docx	POI for LTC application, transfer of property	NOA created to send applicants/recipients that a transfer of property created a POI for LTC facilities. Information about the item, value of transferred property and ineligibility period.	New Rec.	Property	Property Evaluation
Los Angeles					x												GN 6336	Vehicle Diagnosis Repair Expense Request Checklist	This form is used as a checklist of the required supporting documentation needed to evaluate the current GAIN/Cal-Learn/REP expense request for Ancillary, Transportation and/or Vehicle Repair Diagnosis and Repair Program (VDRP).	No possible map found in listing	New Rec.	Property	Property Evaluation
Initial - Kern																	KCDHS 339-Serv	Clothing & Personal Property Inventory			New Rec.	Property	Property Evaluation
Initial - Kern																	KCDHS 70-CWS	Clothing and Personal Property Inventory			New Rec.	Property	Property Evaluation
Placer																	MC 176 P	Property Reserve	Property/Liens		New Rec.	Property	Property Evaluation
Placer																	MC 176 P-V	Vehicle Worksheet-1931	Property/Liens		New Rec.	Property	Property Evaluation
Los Angeles																x	PA 621	Property Investigation Request	Used to request the Property Unit within DPSS to query all property owned by an applicant	No possible map found in listing	New Rec.	Property	Property Evaluation
Los Angeles	x																PA 622	Property Report		No possible map found in listing	New Rec.	Property	Property Evaluation

Sutter										SU914	Vehicle Value Determination	A form the client can have a 3rd party complete to value their vehicle.	A form the client can have a 3rd party complete to value their vehicle. Could not find any appropriate manual documents listed in the provided list.	New Rec.	Property	Property Evaluation
Sutter								x		SU938	FC Vehicle Value Worksheet	A manual worksheet used to determine the value of a vehicle for Foster Care.	A manual worksheet used to determine the value of a vehicle for Foster Care. Could not find any appropriate manual worksheets listed in the provided list.	New Rec.	Property	Property Evaluation
San Bernardino										TAD WTW FS 1224 Eng & Sp	Welfare-to-Work (WTW) Family Stabilization (FS) Vehicle Repair Request	request for vehicle repair	outlines eligible repairs and assistance limit - no comparable form	New Rec.	Property	Property Evaluation
Stanislaus								x		TEMP GA 90-500	Appraisal of Vehicle Value	Dealership Vehicle Appraisal	To determine that a vehicle does not exceed a certain value amount. Form is used to determine General Assistance Benefits. Similar Form not listed on Forms List	New Rec.	Property	Property Evaluation
Tehama										ETA 9062	Conditional Certification - WOTC	WOTC	State Form	New Rec.	Vendor and Provider Forms	Provider Certification
Santa Clara								x		SCD 1753	License-Exempt Home Certification/Registration	Supportive Services	Forms in this category are related to various supportive services; CalSAWS forms/ categories do not meet business needs	New Rec.	Vendor and Provider Forms	Provider Certification
Ventura										56-27-008	Quality Control Affidavit of Birth (09/15)	Form to allow client to attest to birth info	Completed by client, identifying birthdate, birthplace, and parents' names under penalty of perjury. Used by QC when birth certificate is not available. No match	PA 853-1 Other county drawer - QA/QC	Affidavit To Document: U.S Citizenship, Identity And Birth	QA/QC Verification
Ventura									x	56-27-002	Household Composition (09/15)	Collateral contact for QC to verify HH composition	Completed and signed by someone outside the HH to verify HH composition for QC; no match	PA 6091 Other county drawer - QA/QC	Household Member Information	QA/QC Verification
Ventura										56-27-012	Quality Control Utility & Housing Verification (11/15)	Collateral contact for utilities	Used by QC to verify utility expenses. No match	PA 956 CSF XXX Other county drawer - QA/QC	Housing/Utility Verification Form Address Change/ Housing Costs	QA/QC Verification
Ventura										56-27-003	Quality Control Housing Statement (09/15)	Form for client to identify housing and utility expenses or in-kind	Form for client to identify housing and utility expenses or in-kind; may map to CF QC Notice 12. No match.	CSF XXX Other county drawer - QA/QC	Income In-Kind/Housing Verification	QA/QC Verification
Ventura										56-27-005	Second Appointment Letter (11/15)	When client misses 1st appt, this form is sent to schedule a 2nd try	Notifies client of a missed QC appointment, instructs client to call and reschedule, and notifies client of consequences for not cooperating with QC. No match	Other county drawer - QA/QC	QA/QC	QA/QC Verification
Ventura										56-27-009	Quality Control Child Care Expense Verification (11/15)	Collateral contact form for child care	Used by QC to verify child care expenses. No match	Other county drawer - QA/QC	QA/QC	QA/QC Verification
Ventura										56-27-010	Quality Control Financial Aid Verification (11/15)	Collateral contact for financial aid	Used by QC to verify financial aid income. No match	Other county drawer - QA/QC	QA/QC	QA/QC Verification
Ventura										56-27-011	Quality Control School Enrollment Verification (11/15)	Collateral contact for student status	Used by QC to verify student status. No match	Other county drawer - QA/QC	QA/QC	QA/QC Verification
Ventura										56-27-014	Quality Control Workers' Compensation Verification (11/15)	Collateral contact for Worker's Comp	Used by QC to verify Worker's Comp income. No match	Other county drawer - QA/QC	QA/QC	QA/QC Verification
Ventura										56-27-017	Second request for verification when 1st request was unsuccessful	Same as 56-27-013 but indicates 2nd and final request. No match	Other county drawer - QA/QC	QA/QC	QA/QC Verification	
Ventura										56-27-018	Quality Control Statement of Child Support Payment (10/17)	Collateral contact for payment of child support	Used by QC to verify child support payments made by the HH. No match	Other county drawer - QA/QC	QA/QC	QA/QC Verification
Initial - Kern										KCDHS 262-Gen	Quality Review Checklist for E-File Returns			Other county drawer - QA/QC	QA/QC	QA/QC Verification
Merced								x		24-4060	Monthly Eligibility/Status Report for GA	Monthly report similar to SAR 7	Given to GA client to be completed each month in order to report income or other changes - Do not see similar form	New Rec.	Customer Reporting	QR 7 - Quarterly Report
Placer								x		CW 7	Monthly Eligibility Report	Income Reports/Budgets		New Rec.	Customer Reporting	QR 7 - Quarterly Report
San Diego								x		CW 7	Monthly Eligibility Report	Monthly report for Employable GR recipients	No CalSAWS document	New Rec.	Customer Reporting	QR 7 - Quarterly Report
Stanislaus								x		CW 7 State Form	Monthly Eligibility Report For Cash Aid and Food Stamps	Monthly Customer reporting	Customer Reporting Form is used to determine continuing General Assistance Benefits. This Form is not listed on the Forms List	New Rec.	Customer Reporting	QR 7 - Quarterly Report
Santa Clara								x	x	GA 68	Monthly Attendance Report	Vocational Services	Form is used for Vocational Services purposes; existing CalSAWS categories are too specific to processes not utilized at Santa Clara county. A general category is being requested	New Rec.	Customer Reporting	QR 7 - Quarterly Report
Initial - Santa Cruz										WEL4066	WEL 4066 General Assistance AA/NA Meeting Record Periodic Reports	WEL 4066 General Assistance AA/NA Meeting Record Periodic Reports		New Rec.	Customer Reporting	QR 7 - Quarterly Report
San Francisco								x		X3	CAAP X Discontinuance: CAAP 1 Monthly Report Not returned	Discontinuance for CAAP 1 (monthly income report) not returned	There is no index for GA	New Rec.	Customer Reporting	QR 7 - Quarterly Report
Alameda								x		40-53	Calworks/Calfresh Need letter	NMD form to request additional information	Form is specific to county Extended Foster Care Program	New Rec.	Foster Care Forms	Referral to Eligibility
Ventura										56-12-186	Discontinued Foster Care Referral to Medi-Cal	Internal memo; contains contact information necessary to transfer Medi-Cal to the CEC program	Completed by FC CBS to transfer case to regular Medi-Cal under the CEC program - Possible Match DCF5 6072 CEC Referral	New Rec.	Foster Care Forms	Referral to Eligibility
Contra Costa								x	x	DC 40	Referral For Governmental Benefits (07/01)			New Rec.	Foster Care Forms	Referral to Eligibility
Riverside								x		DPSS 3452	ET Memo to Request All County Funds	Form to request ACF	ET uses to describe the reason and amount of an ACF request. No comparable form.	New Rec.	Foster Care Forms	Referral to Eligibility
Riverside								x		DPSS 4284	Probation Only Medi-Cal Form to the ES	Correspondence from Probation to Foster Care	Request for Medi-Cal only for Probation youth. No comparable form.	New Rec.	Foster Care Forms	Referral to Eligibility

Placer															Exparte M/C Referral-Disc FC	Exparte M/C Referral- Disc FC	Applications/SOF/ICT	Used to enroll/disenroll FC children form managed healthcare plans - no comparable form.	New Rec.	Foster Care Forms	Referral to Eligibility	
San Bernardino															FC 110	Managed Care Disenrollment request	Disenrollment request		New Rec.	Foster Care Forms	Referral to Eligibility	
Alameda															FC 45-3	Eligibility Referral	FC form when case is approved	Form is specific to county Foster care program	New Rec.	Foster Care Forms	Referral to Eligibility	
San Bernardino															FC 700 FC 701	Foster Care/Kin-GAP/ARC/Medi-Cal communication	Communication form	Used to communicate between EWs and SW. no comparable form	New Rec.	Foster Care Forms	Referral to Eligibility	
Initial - Santa Cruz															Medi-Cal Referral - Foster Care	Medi-Cal Referral from Foster Care Unit to be completed by Eligibility Worker	Medi-Cal Referral from Foster Care Unit to be completed by Eligibility Worker		New Rec.	Foster Care Forms	Referral to Eligibility	
Sacramento														x	SC 81	Referral for Social Services	Referral completed by case worker for social services	Form completed by case worker requesting social services for a child; completed form should be imaged into case file for record keeping.	New Rec.	Foster Care Forms	Referral to Eligibility	
Santa Barbara															W 282	PROGRAM AND FOSTER CARE COMMUNICATION			New Rec.	Foster Care Forms	Referral to Eligibility	
Yuba															YCHSD 351	Foster Care Referral to Eligibility	Instructions from CPS Social Workers	Foster Care Placement activity referred to Eligibility	New Rec.	Foster Care Forms	Referral to Eligibility	
Los Angeles																CEC Referral	Referral	Continuation of Medi-Cal benefits	New Rec.	Foster Care Forms	Referral to Eligibility	
Ventura															56-06-227	Job Readiness Referral	Referral	Referral to Job Readiness-no match	New Rec.	WTW Forms	Referral: Service/Activity/Job Order	
San Mateo														x	C-574	SMC Works-WTW Referral	C-574 SMC Works-WTW Referral	WTW- San Mateo required form. No match found from CalSAWS.	New Rec.	WTW Forms	Referral: Service/Activity/Job Order	
Placer															P-14	Referral Form Dress for Success	WTW Referrals		New Rec.	WTW Forms	Referral: Service/Activity/Job Order	
Placer															P-15	RAS Referral	WTW Referrals		New Rec.	WTW Forms	Referral: Service/Activity/Job Order	
Placer															P-16	Placer Adult Referral	WTW Referrals		New Rec.	WTW Forms	Referral: Service/Activity/Job Order	
Santa Clara															SCD 1723	Welfare To Work Activity Referral Form	Supportive Services	Forms in this category are related to various supportive services; CalSAWS forms/ categories do not meet business needs	New Rec.	WTW Forms	Referral: Service/Activity/Job Order	
Santa Clara														x	SCD 1750	Family Conference Referral CalWORKs	Supportive Services	Forms in this category are related to various supportive services; CalSAWS forms/ categories do not meet business needs	New Rec.	WTW Forms	Referral: Service/Activity/Job Order	
Santa Clara															SCD 1789	SCC Works Workspace Referral	Supportive Services	Forms in this category are related to various supportive services; CalSAWS forms/ categories do not meet business needs	New Rec.	WTW Forms	Referral: Service/Activity/Job Order	
Santa Clara															SCD 2272	Individual Intake Request	Supportive Services	Forms in this category are related to various supportive services; CalSAWS forms/ categories do not meet business needs	New Rec.	WTW Forms	Referral: Service/Activity/Job Order	
Santa Clara															SCD 2442	SSA Rapid Re-Housing Program (RRHP) Employment Services Referral	Supportive Services	Forms in this category are related to various supportive services; CalSAWS forms/ categories do not meet business needs	New Rec.	WTW Forms	Referral: Service/Activity/Job Order	
Santa Clara															SCD 2553	Vocational Services Document Submission Face Sheet	Vocational Services	Form is used for Vocational Services purposes; existing CalSAWS categories are too specific to processes not utilized at Santa Clara county. A general category is being requested	New Rec.	WTW Forms	Referral: Service/Activity/Job Order	
Placer															Subsidized Employment Referral	Subsidized Employment Referral	WTW Referrals	New Rec.	WTW Forms	Referral: Service/Activity/Job Order		
Tehama															TEH WTW 83	Job Training Center Referral Form	Referral to WIOA	Referral to local partner agency	New Rec.	WTW Forms	Referral: Service/Activity/Job Order	
Contra Costa															WTWCC 104	Welfare-to-Work Services and Referrals			New Rec.	WTW Forms	Referral: Service/Activity/Job Order	
San Luis Obispo														x	DSS HOME 205	BFH and HSP Program Rent Extension Request.docx	Form for housing program participants to extend subsidy payments for rent.	Form created for housing programs. BFH and HSP are State funded programs that SLO County has opted into.	New Rec.	HSP and Homeless Assistance Forms	Rental Form	
San Luis Obispo															DSS HOME 206	Program Rent Extension Agreement	Agreement/Contract for extension of housing program rent subsidy.	Form created for housing programs. BFH and HSP are State funded programs that SLO County has opted into.	New Rec.	HSP and Homeless Assistance Forms	Rental Form	
Sutter															HSP11	rental verification form	verification of housing obtained	Gather information for their housing	New Rec.	HSP and Homeless Assistance Forms	Rental Form	
Sutter															HSP12	housing statement	verification of the amount of rent	Gathers information and housing costs/who to make checks payable to	New Rec.	HSP and Homeless Assistance Forms	Rental Form	
Sutter															HSP15	rental reminder form	HSP rent amounts	sent monthly to remind them their portion of the rent due	New Rec.	HSP and Homeless Assistance Forms	Rental Form	
Riverside															x	DPSS 485 E	Quality Control Review Board Decision	QC sample case review results	explains QC review significant findings, corrective action, staff must sign and date confirming corrective action complete. Upload to CDSS QC SharePoint.	Other county drawer - QA/QC	QA/QC	Request for Action
Riverside															x	DPSS 485 N	Quality Control Findings	QC sample case review results	explains QC review procedural/new information findings and corrective action.	Other county drawer - QA/QC	QA/QC	Request for Action
Santa Clara															SCD 1449	QUALITY CONTROL REQUEST FOR CASE ACTION	QA/QC	Form is used for Quality Assurance and Quality Control; existing CalSAWS categories are too specific to processes not utilized at Santa Clara county. A general category is being requested	Other county drawer - QA/QC	QA/QC	Request for Action	
Santa Clara															x	SCD 1449 A	QC Sanction LIFT	Notice of Action	Notice of Action for QC related changes; existing CalSAWS forms do not meet business needs.	Other county drawer - QA/QC	QA/QC	Request for Action

San Luis Obispo	x																	DSS CW 220-A	Meeting Needs Sanctioned Adult.docx	Meeting needs following CW sanction notice	Informs recipients that County will review how sanctioned adult is meeting their needs since CW sanction. County business process	New Rec.		WTW Forms	Sanctions
Initial - Kern																		KCDHS 265-Gen	Sanction Orientation			New Rec.		WTW Forms	Sanctions
Riverside							x											DPSS 3021	Education Consent	Customer authorizes release of info DPSS/Ed provider	County specific used for customer to consent to the release of inform from DPSS to education/vocational institution and from institution to DPSS.	New Rec.		Education	School Contact Form
Sonoma							x											HSD 1322	SRJC CalWORKS Request for a pre-college review	Guidance for SonomaWORKS clients contemplating SRJC enrollment	This form is specific to our partnership with Santa Rosa Junior College	New Rec.		Education	School Contact Form
Sonoma							x											HSD 883	New Student Guide to SRJC CalWORKS Office	Overview of SRJC enrollment	This form is specific to our partnership with Santa Rosa Junior College	New Rec.		Education	School Contact Form
Initial - Kern																		KCDHS 14-IAU	KC Student Helping Student Program			New Rec.		Education	School Contact Form
Los Angeles																		NS-SUPP017	College CalWORKS Coordinator Statement		No possible map found in listing	New Rec.		Education	School Contact Form
Los Angeles																		NS-SUPP017A	Education Extension Request		No possible map found in listing	New Rec.		Education	School Contact Form
Sacramento																		SC 41 A	Authorization to Release Student Status	Student status release request	Student status request sent to child's school, when returned should be imaged into case and assigned to EW	New Rec.		Education	School Contact Form
Solano	x																	48-WTW-002	CalWORKS Community College Referral Form	Referral form for education	No match in the provided CalSAWS document.	New Rec.		Education	School Referrals
Ventura	x																	56-06-171	CalWORKs/Adult School Referral	School referral	Referral to Adult schools-no match	New Rec.		Education	School Referrals
Ventura	x																	56-06-610	CalWORKS Community College Referral Form	Referral	Referral to CC-no match	New Rec.		Education	School Referrals
Tehama																		TEH WTW 24	Community College Referral	Referral to Local College	Referral to local college	New Rec.		Education	School Referrals
Tehama																		TEH WTW 25	Shasta College Work Study Referral	Referral to Local College Workstudy	Referral to local college workstudy	New Rec.		Education	School Referrals
Los Angeles																		NS-HOME001	Eviction Notice 3 Day pay or Quit		No possible map found in listing	New Rec.		Expense	Shelter
Ventura																		56-06-057	SIP Evaluation Worksheet	SIP evaluation	SIP verification checklist-no match	New Rec.		WTW Forms	SIP Form
Butte																		BU CW-166	SIP Warning Letter	Letter	Send to SIP failed SIP clients	New Rec.		WTW Forms	SIP Form
Butte																		BU CW-209	SIP Reminding End of Semester	Letter	Send to SIP clients end of semester reminder letter	New Rec.		WTW Forms	SIP Form
Butte																		BU CW-222	SIP Approval Hours	SIP Plan	SIP Plan	New Rec.		WTW Forms	SIP Form
Butte																		BU CW-226	New Semester Letter	Letter	Send to all approved Voc Edu and SIP students prior to start of a new semester	New Rec.		WTW Forms	SIP Form
Butte																		BU CW-485	PROGRAMS LEADING TO EMPLOYMENT	SIP Packet	SIP Packet attachment letter	New Rec.		WTW Forms	SIP Form
Butte																		BU CW-524	You A Student	SIP packet	SIP Packet attachment letter	New Rec.		WTW Forms	SIP Form
Butte																		BU CW-57	Student Participation Cover Letter	SIP Packet cover letter	First page of the SIP Packet or SIP Cover letter	New Rec.		WTW Forms	SIP Form
Butte																		BU CW-58	COLLEGE/TRAINING COURSE OUTLINE	SIP Packet	SIP Packet attachment letter	New Rec.		WTW Forms	SIP Form
Butte																		BU CW-616	Self Initiated Student Attachment	SIP Plan	SIP Plan	New Rec.		WTW Forms	SIP Form
Butte																		BU CW-62	CalWORKS Program Participant Plan Sheet	SIP Packet	SIP Packet attachment letter	New Rec.		WTW Forms	SIP Form
Los Angeles																		GN 5-2	Educational Plan	Document received from educational service providers indicating the participants required educational courses.	No possible map found in listing	New Rec.		WTW Forms	SIP Form
San Bernardino																		WTW 772.4	SIP Approval Checklist	Checklist for SIP	checklist to aid id the approval of SIP - no comparable form	New Rec.		WTW Forms	SIP Form
San Bernardino																		WTW 772.4A	SIP Individual Education Plan	captures classes for degree or certificate	captures necessary classes needed to complete degree/certificate in a SIP - no comparable form	New Rec.		WTW Forms	SIP Form
Los Angeles																		WFP&I-DA-AW	DA Prosecution Arrest Warrant	WFP&I View and Use only	No possible map found in listing	SIU Documents	SIU Documents	SIU Court Document	
Los Angeles																		WFP&I-DA-SA-I	DA Surrender Letter - 1st Notice	WFP&I View and Use only	No possible map found in listing	SIU Documents	SIU Documents	SIU Court Document	
Los Angeles																		WFP&I-DA-SA-I(S)	DA Surrender Letter - 1st Notice - Spanish	WFP&I View and Use only	No possible map found in listing	SIU Documents	SIU Documents	SIU Court Document	
Los Angeles																		WFP&I-DA-W	DA Surrender Letter - Warrant	WFP&I View and Use only	No possible map found in listing	SIU Documents	SIU Documents	SIU Court Document	
Los Angeles																		WFP&I-DA-W(S)	DA surrender Letter - Warrant - Spanish	WFP&I View and Use only	No possible map found in listing	SIU Documents	SIU Documents	SIU Court Document	
Santa Clara																			District Attorney Packets	District Attorney Packets	SIU - Criminal case filing procedure	SIU Documents	SIU Documents	SIU Court Document	
Merced																		24-4891esp	Planning With You to Avoid Fraud	Description of fraud	Required to be signed with GA client during application and RE (reverse side in Spanish) - Do not see similar form	SIU Documents	SIU Documents	SIU Customer Acknowledgement and Prevention	
Butte	x	x	x															BU 116	Planning to avoid fraud for Cash Aid/CF/GA	Informational fraud informing notice	Allows the customer to acknowledge that they have been advised what constitutes fraud and pejury	SIU Documents	SIU Documents	SIU Customer Acknowledgement and Prevention	
Butte																		BU116	Planning with you to avoid fraud	Explains to customer the meaning of fraud and perjury	Gives information to the applicant of what the meaning of fraud and perjury is and what they need to report and tell their worker.	SIU Documents	SIU Documents	SIU Customer Acknowledgement and Prevention	
Riverside																		DPSS 1203 A	Fraud Prevention Confirmation Letter	Appt Ltr	SIU to customer appt ltr	SIU Documents	SIU Documents	SIU Customer Acknowledgement and Prevention	
Riverside																		DPSS 1203 C	Fraud Prevention Confirmation Letter	Reschedule Appt Ltr	SIU to customer appt ltr	SIU Documents	SIU Documents	SIU Customer Acknowledgement and Prevention	
Riverside																		DPSS 512 B	Planning with You to Avoid Fraud	customer acknowledgement	County SIU specific, used as justification in court	SIU Documents	SIU Documents	SIU Customer Acknowledgement and Prevention	
Riverside																		DPSS 512 C	Child Care Fraud is a Crime (part of DOC 0615)	Customer acknowledgement	County specific SIU	SIU Documents	SIU Documents	SIU Customer Acknowledgement and Prevention	
Mendocino																		SIU 615	Helping You to Avoid Fraud	Provides information to the customer about fraud prevention	This form is a communication tool between eligibility specialist and the customer applying for benefits. This document is part of every face to face application interview and impacts the workload of staff imaging/indexing documents to the case.	SIU Documents	SIU Documents	SIU Customer Acknowledgement and Prevention	

Yuba												x		YCHHSD 234	Fraud Statement	Facts you need to know about Fraud	Foster Care Legal Guardian, Non-Needy CalWORKS	SIU Documents	SIU Documents	SIU Customer Acknowledgement and Prevention
San Francisco												x		4030	Request for Investigation	County form	This is completed by Program staff to request a client investigation	SIU Documents	SIU Documents	SIU Referral
San Francisco														092A (12/02)	FRED Investigation Referral	FRED Investigation Referral	No available index listed in CalSAWS	SIU Documents	SIU Documents	SIU Referral
Ventura												x		56-16-013	Fraud Investigation Referral	Fraud Investigation Referral	Fraud referral sent to DAGFU-No match	SIU Documents	SIU Documents	SIU Referral
Ventura												x		56-16-023	Fraud Referral Disposition Report	Fraud Referral Disposition Report	DAGFU responds to Fraud referral-No match	SIU Documents	SIU Documents	SIU Referral
																	This form is completed when a worker is initiating a request to the special investigations department to have a case or client investigated. There is no form on the CalSAWS listing that has information close to what this form is requesting			
Tulare												x		964-F	Investigation Request	Fraud Investigation Request		SIU Documents	SIU Documents	SIU Referral
Placer														CSC 27	Suspected Misuse of CW	Correspondence		SIU Documents	SIU Documents	SIU Referral
Santa Clara													x	SCD 54	IEVS Fraud Referral to SIU	Fraud	Internal referral to conduct fraud investigation; existing CalSAWS Documents do not meet this need	SIU Documents	SIU Documents	SIU Referral
																	A manual referral used to request an investigation of potential fraud from SIU. Could not find any appropriate manual referrals listed in the provided list.			
Sutter												x		SIU416	Investigation Referral	A manual referral used to request an investigation of potential fraud from SIU.		SIU Documents	SIU Documents	SIU Referral
Santa Barbara												x		W 81	FRAUD REFERRAL	GENERIC FRAUD REFERRAL	USED IN ALL PROGRAMS	SIU Documents	SIU Documents	SIU Referral
Initial - Santa Cruz												x		WELL192	Fraud Referral	Fraud Referral		SIU Documents	SIU Documents	SIU Referral
Initial - Santa Cruz												x		WELL203	Fraud Complaint	Fraud Complaint		SIU Documents	SIU Documents	SIU Referral
Los Angeles												x		WFP&I 101	Informant Referral / Intake	WFP&I View and Use only	No possible map found in listing	SIU Documents	SIU Documents	SIU Referral
Los Angeles												x		WFP&I 412	Disposition of IEVS Fraud Referral (Letter to District)	WFP&I View and Use only	No possible map found in listing	SIU Documents	SIU Documents	SIU Referral
Santa Clara												x			Community Complaint Form	Community Complaint Form	SIU - citizen complaint documentation	SIU Documents	SIU Documents	SIU Referral
																	SIU - citizen complaint documentation (online version - can be same category as above			
Santa Clara												x			Community Complaint Form Online	Community Complaint Form		SIU Documents	SIU Documents	SIU Referral
Los Angeles			x									x	x	PA 245-1	Food Stamp Fraud Claim Determination Report	WFP&I View and Use only	No possible map found in listing	SIU Documents	SIU Documents	SIU Status and Agreement
Los Angeles												x		WFP&I 150	Field Investigation Caseload Log (last modified 2005)	WFP&I View and Use only	No possible map found in listing	SIU Documents	SIU Documents	SIU Status and Agreement
Los Angeles												x		WFP&I 260	Repayment Agreement	WFP&I View and Use only	No possible map found in listing	SIU Documents	SIU Documents	SIU Status and Agreement
Los Angeles												x		WFP&I 343	Request for Case Records for Welfare Fraud Prosecution	WFP&I View and Use only	No possible map found in listing	SIU Documents	SIU Documents	SIU Status and Agreement
Los Angeles												x		WFP&I 379	Investigation Closed Because of Missing record from district J1	WFP&I View and Use only	No possible map found in listing	SIU Documents	SIU Documents	SIU Status and Agreement
Los Angeles												x		WFP&I 380	Investigation Closed because of missing documents/forms from district K1	WFP&I View and Use only	No possible map found in listing	SIU Documents	SIU Documents	SIU Status and Agreement
Los Angeles												x		WFP&I 381	Investigation closed because of missing CA7/CW7	WFP&I View and Use only	No possible map found in listing	SIU Documents	SIU Documents	SIU Status and Agreement
Santa Clara												x			Child Protective Services (CPS) Report	Child Protective Services (CPS) Report	SIU - Reports to address on-view CPS complaints	SIU Documents	SIU Documents	SIU Status and Agreement
Santa Clara												x			Fraud Closing Memo	Fraud Closing Memo	SIU - Summary page or book end to indicate the end of the fraud investigation	SIU Documents	SIU Documents	SIU Status and Agreement
San Luis Obispo												x		DSS ACCT 543	Possible Forged Warrant.docx	Report to SIU potential benefit fraud with case info and benefit info	Memo to SIU requesting investigation from Fiscal Services, County business process	SIU Documents	SIU Documents	SIU Warrant
Los Angeles												x		SW Extention	Extention to Search Warrant	WFP&I View and Use only	No possible map found in listing	SIU Documents	SIU Documents	SIU Warrant
Los Angeles												x		SW Face Sheet SW&A1	Search Warrant	WFP&I View and Use only	No possible map found in listing	SIU Documents	SIU Documents	SIU Warrant
Los Angeles												x		SW Return DA-289-A-76R454T	Return to Search Warrant	WFP&I View and Use only	No possible map found in listing	SIU Documents	SIU Documents	SIU Warrant
Ventura													x	56-04-012	Trust Fund Ledger	Tracking sheet for Trust Fund (SSA/SSI income); included amount received, abatement amounts; amount paid out in foster care and balance of trust fund	Completed by CBS to track trust fund account and maintain monthly balance - No Match	New Rec.	Foster Care Forms	Social Security Form
Ventura													x	56-04-029	Social Security Conserved Funds	External letter; contains case information and current contact information	Completed by CBS and sent to SSA to inform them of the termination of dependency; current caregiver info and conserved funds - No Match	New Rec.	Foster Care Forms	Social Security Form
Ventura													x	56-04-030	Social Security Discontinue Payee	External letter; contains case information and current contact information	Completed by CBS and sent to SSA to inform them of the termination of dependency and current caregiver contact info - No Match	New Rec.	Foster Care Forms	Social Security Form
Ventura													x	56-04-031	Social Security Change of Payee	External letter; contains case information and date of removal	Completed by CBS and sent to SSA to inform them of the removal of a child that is currently receiving SSA benefits - No Match	New Rec.	Foster Care Forms	Social Security Form
Ventura												x		56-04-032	Social Security Former Payee Letter	Informing letter; contains case information	Completed by CBS and sent to current payee to inform them of the removal and need to forward SSA benefits to HSA until payee change occurs - No Match	New Rec.	Foster Care Forms	Social Security Form
San Mateo												x		C-446	SSI Payment and Medi-Cal Termination Request	C-446 SSI Payment and Medi-Cal Termination Request	FC- San Mateo required form. No match found from CalSAWS.	New Rec.	Foster Care Forms	Social Security Form
Riverside												x		DPSS 1866	Dependent Children Notice to Recovery	Used for children with Social Security income	Transition children with SSA income from Foster Care to Care and Maintenance. No comparable form.	New Rec.	Foster Care Forms	Social Security Form
Riverside												x		DPSS 1885	Authorization Request for SSI/SSP Medi-Cal Card Record	Request BIC card for SSI/SSP recipient	Used to request a Medi-Cal card or make a change for SSI/SSP recipient. No comparable form.	New Rec.	Foster Care Forms	Social Security Form

					x			DSS FC 629	Request for Termination or Withdrawal of DSS Payee Status.docx	Transmittal to SSA	Information regarding benefits of a FC child, reporting to SSA.	New Rec.	Foster Care Forms	Social Security Form
San Luis Obispo					x			DSS FC 785	Payee Status Follow up Request to SSA.docx	Transmittal to SSA from DSS, FC child information	Transmittal to request DSS be made the Representative Payee for a child under jurisdiction of SLO Co. County specific form	New Rec.	Foster Care Forms	Social Security Form
Santa Barbara					x			FC SSA 11	SSA PAYEE REQUEST	SSA PAYEE REQUEST	REQUEST FOR COUNTY TO BECOME SSA PAYEE FOR FOSTER CARE CHILD	New Rec.	Foster Care Forms	Social Security Form
Santa Clara					x			SCD 2432 ARC	SSI/SSA Advocacy Program for Foster Children and Non-Minor Dependents	SSI Advocacy	Form is used for SSI Advocacy purposes; existing CalSAWS categories are too specific to processes not utilized at Santa Clara county. A general category is being requested	New Rec.	Foster Care Forms	Social Security Form
Santa Clara					x			SCD 2432 FC	SSI/SSA Advocacy Program for Foster Children and Non-Minor Dependents	SSI Advocacy	Form is used for SSI Advocacy purposes; existing CalSAWS categories are too specific to processes not utilized at Santa Clara county. A general category is being requested	New Rec.	Foster Care Forms	Social Security Form
Los Angeles								SS-5	Application for a Social Security Card	Request for SSN card	Identifying information	New Rec.	Foster Care Forms	Social Security Form
Los Angeles									Correspondence from SSA	Correspondence	Eligibility determination.	New Rec.	Foster Care Forms	Social Security Form
Los Angeles									Representative Payee Report	Establishment of SI//SSA payee	Eligibility determination.	New Rec.	Foster Care Forms	Social Security Form
Los Angeles									Financial Accounting	SSI/SSA benefits	Eligibility determination.	New Rec.	Foster Care Forms	Social Security Form
Alameda								SO-173	Request for SSI Advocacy Appeals Services	Referral to CBO for SSI Appeals assistance	Form is used in a county-specific process	New Rec.	Non-Fraud Referral or Request	Social Security Referral
Ventura					x			56-04-024	Trust Fund Social Security Benefits	Informing letter; contains case information	Completed by CBS and sent to parent/caregiver to inform them that the SSA benefits exists for their child and that they need to apply to be payee - No Match	New Rec.	Non-Fraud Referral or Request	Social Security Referral
Placer								AFDC Verif Request from SSA	AFDC Verif Request from SSA	Correspondence		New Rec.	Non-Fraud Referral or Request	Social Security Referral
Sacramento								CSF 12	Social Security Number Discrepancy Letter	SSN discrepancy	used for multiple programs, Request sent to customer in regards to SSN discrepancy, should be imaged into case file for record keeping	New Rec.	Non-Fraud Referral or Request	Social Security Referral
Los Angeles	x							PA 1610	Social Security PA Agency Information Request and Report		No possible map found in listing	New Rec.	Non-Fraud Referral or Request	Social Security Referral
Sacramento								SC 104	Referral for Services to DHS from Social Security Administration	Referral received from SSA for all programs	Received referral from SSA, should be imaged into case file and assigned to EW for processing	New Rec.	Non-Fraud Referral or Request	Social Security Referral
Ventura					x	x		56-04-040_CW51	Child Support - Best Interest Of The Child Determination Per AB 1449	Internal form; contains best interest determination made by SW	Prepared by CBS and provided to SW to determine best interest; this form is returned to the CBS who then documents the determination in CWS/CMS - No Match	New Rec.	Foster Care Forms	Social Worker Internal Communication
Ventura					x			56-12-150	Initial Placement	Contains the removal, placement and case information necessary to enter an initial placement into CWS/CMS	Completed by SW and provided to CBS to inform them of a new removal; information is then entered into CWS and an intake packet (SOC158A, SAWS 1 and FC2) are generated for SW's signature - No Match	New Rec.	Foster Care Forms	Social Worker Internal Communication
San Mateo					x			C-730	Rep Payee Notification	C-730 Rep Payee Notification	FC-San Mateo required form. No match found from CalSAWS.	New Rec.	Foster Care Forms	Social Worker Internal Communication
Riverside					x			CSD 1520	Notification to Local Child Support Agency (LCSA)	Correspondence between foster care and child support	Foster care uses the form to update child support on parents referred. No comparable form.	New Rec.	Foster Care Forms	Social Worker Internal Communication
Riverside					x			CSD 3397	SW Request for Managed Care Enrollment/Disenrollment	Request to change Medi-Cal benefits	Used to enroll or disenroll child from managed care Medi-Cal per social worker request. No comparable form.	New Rec.	Foster Care Forms	Social Worker Internal Communication
Riverside					x			CSD 3495	Foster Care/PMU Request Form and Information to Placement Management Unit	Correspondence between foster care and PMU	Used to request Foster Care and Medi-Cal applications from PMU. No comparable form.	New Rec.	Foster Care Forms	Social Worker Internal Communication
Riverside					x			CSD 4077	Social Worker Request for Vital Statistic Documents	Correspondence between Social worker and ET	Social worker uses to request a birth certificate or social security card from the ET. No comparable form.	New Rec.	Foster Care Forms	Social Worker Internal Communication
Contra Costa					x	x	x	FC 30	SocialWorker/Clerical Specialist/Eligibility Worker Communication Form			New Rec.	Foster Care Forms	Social Worker Internal Communication
Stanislaus					x			STAN 426 A	Placement Transmittal	Internal Correspondence	Social Worker to Foster Care Correspondence Completed by SW and provided to CBS to request a special care increment along with the LOC rate - No Match	New Rec.	Foster Care Forms	Social Worker Internal Communication
Ventura					x			56-04-070	Specialized Care Increment Matrix	Worksheet		New Rec.	Foster Care Forms	Special Care Documentation
Stanislaus					x			CMS 12-A	Special Care Increments (SCI) - Big III Specialized Care Increment Authorization	Specialized Rate Determination SCI authorization form for Foster Care children	Internal form-This form is used for Request for Higher Level Payment for Specialized Foster Care Group Home/Foster Family Agency Staffing. Similar Form not found on Forms List	New Rec.	Foster Care Forms	Special Care Documentation
Riverside					x			CSD 477 A	Special Placement or 1-on-1 Services Request	Confirmation for special placement.	Notification to Foster Care of SCI approval and amount. No comparable form.	New Rec.	Foster Care Forms	Special Care Documentation
Los Angeles								DCFS 4213	Request to Place a Specified Placement Facility	Request for special placement.	Eligibility determination.	New Rec.	Foster Care Forms	Special Care Documentation
Los Angeles								DCFS 4213A	Request to Place a Specified Placement Facility	Request for special placement.	Eligibility determination.	New Rec.	Foster Care Forms	Special Care Documentation
San Luis Obispo					x			DSS FC 857	Specialized Foster Home Payment.docx	Specialized Foster CareHome payment approved NOA	NOA for approved specialized FC Home rate with time frames of adjustment. No equivalent	New Rec.	Foster Care Forms	Special Care Documentation

[illegible]

Santa Clara				x						SCD 533	Checklist for Trust Line and Health and Safety Self-Certification	Supportive Services	Forms in this category are related to various supportive services; CalSAWS forms/categories do not meet business needs	New Rec.	Child Care Forms	Trustline Registry/Information
Santa Clara				x						SCD 84	Trustline	Supportive Services	Forms in this category are related to various supportive services; CalSAWS forms/categories do not meet business needs	New Rec.	Child Care Forms	Trustline Registry/Information
Santa Clara				x						SCD 9	License -Exempt Trustline Pending Child Care Worksheet	Budget Worksheet	manual budget worksheet used when budget is incorrect in System or manual budget needs to be calculated- existing CalSAWS Documents do meet these needs	New Rec.	Child Care Forms	Trustline Registry/Information
Tehama				x						Table of Contents	Table of Contents - Trustline Packet Request For Live Scan Service For Subsidized Trustline Registry Applicants	Checklist for Trustline CC Provider	Checklist for Trustline CC provider packet	New Rec.	Child Care Forms	Trustline Registry/Information
Tehama										TLR 9163	Request For Live Scan Service For Subsidized Trustline Registry Applicants	Request For Live Scan Service For Subsidized Trustline Registry Applicants	State Form	New Rec.	Child Care Forms	Trustline Registry/Information
Tulare				x						2010-CC	Terms and Conditions	Terms and Conditions for Licensed Exempt Providers	This is a form that the Licensed Exempt Provider must sign and date indicating they understand all the necessary conditions regarding payment for child care serviced provided during the Trustline application review process. There is no form on the CalSAWS listing that has information close to what this form is requesting.	New Rec.	Child Care Forms	Trustline Registry/Information
San Diego										09-99	USCIS Letter for Indigent Sponsored Noncitizen	has the Sponsor and Sponsored noncitizen names, to be sent to USCIS	claiming indigency to qualify for CF	New Rec.	Sponsor Related Forms	USCIS Sponsor Reporting
San Diego										09-99 HHSA	USCIS Letter for Indigent Sponsored Noncitizen Reporting	Indigent /Sponsored Form	Submitted to USCIS when customer is found indigent for CalFresh.	New Rec.	Sponsor Related Forms	USCIS Sponsor Reporting
Merced										24-4216	Indigence Determination Report	Citizenship	Notify US Citizenship & Immigration Services that client is claiming indigence. No similar forms on CalSAWS list.	New Rec.	Sponsor Related Forms	USCIS Sponsor Reporting
Ventura			x							56-02-139	CalFresh Sponsored Indigent Referral (07/18)	Letter to USCIS to report the indigence status of sponsored non-citizens as required by regulations. No match.	Indigence referral to USCIS- no match ET makes an indigent sponsored non-citizen referral to USCIS.	New Rec.	Sponsor Related Forms	USCIS Sponsor Reporting
Riverside			x							DPS5 4211	Sponsored Indigent Referral	same as title		New Rec.	Sponsor Related Forms	USCIS Sponsor Reporting
Sacramento										SC 76	Indigent Noncitizen	Notice sent to USCIS by EW to inform them of indigent sponsored	EW completes this notice and forwards it to USCIS to inform them of an indigent sponsor, a copy of this form should be imaged into case file for record keeping	New Rec.	Sponsor Related Forms	USCIS Sponsor Reporting
Santa Clara									x	SCD 2343	Reporting Indigent Sponsored Noncitizens	Verification request	Form is used to request verification; exiting CalSAWS categories are too specific to processes not utilized at Santa Clara county. A general category is being requested	New Rec.	Sponsor Related Forms	USCIS Sponsor Reporting
Merced		x								24-3132	HSP Utility Services Account Status	Form used to request client account information from utility company	Category does not exist in CalSAWS.	New Rec.	HSP and Homeless Assistance Forms	Utilities Form
Sutter										HSP14	PGE&E account activation notice	PGE form	Verifies that they turned on PGE in their name	New Rec.	HSP and Homeless Assistance Forms	Utilities Form
Ventura				x						56-06-219	WTW Community Service Training Site Agreement	Agreement	Community Service agreement-no match WTW- San Mateo required form. No match found from CalSAWS.	New Rec.	Vendor and Provider Forms	Vendor Agreement
San Mateo				x						C-567	VRS Work Center Referral Agreement	C-567 VRS Work Center Referral Agreement	No CalSAWS document - County specific instructions	New Rec.	Vendor and Provider Forms	Vendor Agreement
San Diego				x						11-13 HHSA	Vendor Payment Agreement	GR agreement for vendor payment		New Rec.	Vendor and Provider Forms	Vendor Payment
Merced		x								24-2059	Housing Support or Family Stabilization Program - Vendor Notification	form sent to BI for payment to vendor requests	Unsure if this can be indexed to CalSAWS PA320-Vendor Service Order and Invoice.	New Rec.	Vendor and Provider Forms	Vendor Payment
Merced		x								24-2061	Housing and Disability Advocacy Program (HDAP) - Vendor Notification of Authorization	Request sent to BI for payment to vendor inform customer mandatory vendor payment will be mad to landlord/property manager.	Unsure if this can be indexed to CalSAWS PA320-Vendor Service Order and Invoice. informs customer of mandatory vendor pay,and requests landlord/property manager information to be provided	New Rec.	Vendor and Provider Forms	Vendor Payment
San Diego										27-309	Mandatory Vendor Pay	Learning Disability Provider Request for Payment	Learning Disability Provider Request for Payment	New Rec.	Vendor and Provider Forms	Vendor Payment
Alameda				x						42-45	Important Vendor Payment Information or Property Owners, Managers, or Landlords	Vendor payment agreement and authorization form	Form is used in a county-specific process	New Rec.	Vendor and Provider Forms	Vendor Payment
Ventura										56-03-154	Authorization to Distribute Cash Aid as Vendor Payment	Authorization on amount and whom cash aid benefits will be issued to.	Used to capture the amount and to whom cash aid benefits will be disbursed. No match direct payment to vendor-no match	New Rec.	Vendor and Provider Forms	Vendor Payment
Ventura		x		x						56-06-016	Vendor Authorization Form	Vendor approval request		New Rec.	Vendor and Provider Forms	Vendor Payment
San Luis Obispo		x								DSS CW 43	Sanction Vendor Payment Informing.docx	Vendor payment informing notice	Information to participant of why vendor payment is started, how it works and length of time. This is in addition to NOA, County specific	New Rec.	Vendor and Provider Forms	Vendor Payment
San Luis Obispo Initial - Kern		x								DSS CW 43	Vendor Payment Informing Notice.docx	Sanction vendor payment notice. Rent and landlord info.	Inform recipients of vendor payment due to sanction and request to verify landlord info. County specific, prior to NOA	New Rec.	Vendor and Provider Forms	Vendor Payment
Los Angeles				x						KDHHS 727-GA	Voucher Vendor List			New Rec.	Vendor and Provider Forms	Vendor Payment
										PA 6166	GRHSCMP Landlord Vendor Payment Notice Of Approval		No possible map found in listing	New Rec.	Vendor and Provider Forms	Vendor Payment

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Merced																	24-7051	Verification of Child's Dual Agency Status	Verification form for CVRC	There are no documents with an approximate name/similar purpose.	New Rec.	Non-Fraud Referral or Request	Verification Request from Other Agency
Ventura	x			x													56-00-149	Application Verification for State Disability Insurance Benefits	signed by a doctor to confirm the State Disability application has been submitted on behalf of a client	used when a client is unable to provide any other verification of the SDI application, no match	New Rec.	Non-Fraud Referral or Request	Verification Request from Other Agency
Ventura																	56-00-653	Secondary SAVE Request	tool	It's used by staff when submitting secondary/third SAVE request to SAVE liaisons. No match.	New Rec.	Non-Fraud Referral or Request	Verification Request from Other Agency
Butte	x																BU CW-40	Birth Certificate Voucher CalWORKs Request for Criminal Record Exemption	Request for Birth Certificates	Used to order Birth Certificates for CW linkage if customers are unable to do so themselves	New Rec.	Non-Fraud Referral or Request	Verification Request from Other Agency
Initial - Kern																	KCDHS 659-Gen	Request for Dissemination of CPS Records (Att. A)			New Rec.	Non-Fraud Referral or Request	Verification Request from Other Agency
Initial - Kern																	KCDHS 670-CPS	Request for Criminal Record Exemption			New Rec.	Non-Fraud Referral or Request	Verification Request from Other Agency
Initial - Kern																	KCDHS 748-Serv	Third-party alternate verification of enrollment			New Rec.	Non-Fraud Referral or Request	Verification Request from Other Agency
Los Angeles					x												NS-SUPP029	Referral for Probate Conservatorship Investigation	Used to request information from the Office of Public Guardian regarding a person's Conservatorship.	No possible map found in listing	New Rec.	Non-Fraud Referral or Request	Verification Request from Other Agency
Los Angeles			x														PA 6061	Application For Verification Of Birth, Death or Marriage as Required for Social Services Agency Programs	Verification request	Form is used to request verification; existing CalSAWS categories are too specific to processes not utilized at Santa Clara county. A general category is being requested	New Rec.	Non-Fraud Referral or Request	Verification Request from Other Agency
Santa Clara																x	SCD 58 (DFCS SCZ 58)	Application For Verification Of Birth, Death or Marriage as Required for Social Services Agency Programs	Verification request	Form is used to request verification; existing CalSAWS categories are too specific to processes not utilized at Santa Clara county. A general category is being requested	New Rec.	Non-Fraud Referral or Request	Verification Request from Other Agency
Ventura									x								56-04-016	AAP Income Verification	Contains rate information; contains case information and rate	Requested by adoptive parent and provided for the purpose of verifying AAP benefits - Possible Match CSF XXX Verification of Benefits	Other county drawer - AAP CSF XXX	AAP Verification of Benefits	Verifications of Benefits
San Francisco																	-	HSA PHOTO RELEASE FORM	Photo Release Form	local Home Visiting Program - no existing index code in CalSAWS	New Rec.	Other Contact Authorization Forms	Video/Photo Release
Riverside																x	DPSS 3801	Standard Media/Publication Release Form	Authorization Form	Used to authorize DPSS to use staff for video/audio recordings, photos, testimonials, printed materials, etc.	New Rec.	Other Contact Authorization Forms	Video/Photo Release
Initial - Kern																	KCDHS 148.1-MKT	Photo/Video Release (Children)			New Rec.	Other Contact Authorization Forms	Video/Photo Release
Initial - Kern																	KCDHS 148-MKT	Photo/Video Release Form			New Rec.	Other Contact Authorization Forms	Video/Photo Release
Initial - Kern																	KCDHS 205-HG	Photo/Video Release -- Heart Gallery			New Rec.	Other Contact Authorization Forms	Video/Photo Release
Ventura									x								56-00-088	Referral for Field Case Aide (03/17)	request for field based case aide	No match - Need for when supervised visitations are being requested, with details such as the type of visit, gender preference of the FBICA, and level of supervision	New Rec.	Foster Care Forms	Visitation Schedule
Initial - Kern									x								KCDHS 143-Serv	Authorization for Less Than Monthly Visits			New Rec.	Foster Care Forms	Visitation Schedule
Initial - Kern									x								KCDHS 144-Serv	Authorization for Less Than Monthly Caretaker Contact			New Rec.	Foster Care Forms	Visitation Schedule
Initial - Kern									x								KCDHS 494-Serv	Why Visitation Packet			New Rec.	Foster Care Forms	Visitation Schedule
Initial - Kern									x								KCDHS 690-Serv	Visitation Packet			New Rec.	Foster Care Forms	Visitation Schedule
Contra Costa						x	x	x									ADM 451	Warrant Cancellations			New Rec.	Fiscal Forms	Warrant Form
Placer																	ALL 1223	Request Warrant	Fiscal/Issuance/SFIS		New Rec.	Fiscal Forms	Warrant Form
Placer																	ALL 466	Warrant Pick-Up 1 pm or Later	Fiscal/Issuance/SFIS		New Rec.	Fiscal Forms	Warrant Form
Monterey																	CO4-E	Hold/Cancel/Release Warrant Form	The form contains type of action being requested on a warrant, date, case/customer information, warrant information and signatures lines for eligibility staff and benefit issuance staff, and if applicable the customer's signature.	The form is used by eligibility staff to request benefit issuance staff take a specific action on a warrant. There is no relevant form on the list.	New Rec.	Fiscal Forms	Warrant Form
Monterey																	CO-504	Forged Warrant Form	The form requests the warrant payee provide information and details about the forged warrant, and includes signature lines for the customer and a witness.	The form is required for all forged warrants and must be completed before benefit issuance staff can replace a forged warrant. There is no relevant form on the list.	New Rec.	Fiscal Forms	Warrant Form
Riverside	x														x		DPSS 4020	Warrant Cancellation Request	same as title	District Offices turn in warrants received	New Rec.	Fiscal Forms	Warrant Form
Initial - Kern																	KCDHS 923-SIU	Cashed Warrant Signature Samples			New Rec.	Fiscal Forms	Warrant Form
Santa Clara																x	SCD 1456	Warrant Replacement Five- Day Waiver	Client Request/Agreement	This form is a client request or agreement; county business needs require a generic category; existing CalSAWS documents do contain a general request and/or agreement	New Rec.	Fiscal Forms	Warrant Form
Initial - Santa Cruz																	WEL3128	Warrant & ATP Holds and Release	Warrant & ATP Holds and Release		New Rec.	Fiscal Forms	Warrant Form
Monterey																		OTC Warrant Request via PC Warrant Writer	Eligibility staff completes and submits the form to request a warrant print via a web-based application. The form contains information needed to produce a warrant; customer/case information, warrant information, aid code, signature lines for eligibility and benefit issuance staff.	This form is used for our contingency purposes when we are unable to print a warrant from C-IV. There is no relevant form on the list.	New Rec.	Fiscal Forms	Warrant Form
Initial - Kern					x												KCDHS 190-Gen	WDTIP Update Instructions			New Rec.	Time Limit Forms	WDTIP Request

Santa Barbara					x											W 477	WD TIP ONLINE CORRECTION FORM	WD TIP ONLINE CORRECTION FORM	USED TO MAKE CORRECTIONS ALONG WITH INSTRUCTIONS	New Rec.	Time Limit Forms	WD TIP Request	
Santa Clara					x											SCD 2539	PWEX Evaluation Month 2	Supportive Services	Forms in this category are related to various supportive services; CalSAWS forms/ categories do not meet business needs	New Rec.	WTW Forms	WEX Evaluation	
Santa Clara					x											SCD 2540	PWEX Evaluation Month 4	Supportive Services	Forms in this category are related to various supportive services; CalSAWS forms/ categories do not meet business needs	New Rec.	WTW Forms	WEX Evaluation	
Santa Clara					x											SCD 2541	PWEX Evaluation Month 6	Supportive Services	Forms in this category are related to various supportive services; CalSAWS forms/ categories do not meet business needs	New Rec.	WTW Forms	WEX Evaluation	
Tehama					x											TEH WTW 43	WEX Evaluation (TEH WTW 43)	Work Experience Evaluation	Work Experience evaluation	New Rec.	WTW Forms	WEX Evaluation	
Riverside					x											DPSS 3950	Confidentiality – WEX/ Community Service	Customer acknowledgement of DPSS confidentiality	county specific for the WEX customers	New Rec.	WTW Forms	WEX Timesheet	
San Bernardino				x	x											GR 502 Eng & SP	Weekly Community Work Experience Timesheet	Community service tracking	weekly tracking of community service - no comparable form	New Rec.	WTW Forms	WEX Timesheet	
Tehama					x											TEH WTW 45	WEX Worksite schedule (TEH WTW 45)	Work Experience Schedule	Work Experience site schedule	New Rec.	WTW Forms	WEX Timesheet	
Tehama					x											TEH WTW 52	WEX Time Sheets (TEH WTW 52)	Work Experience Time Sheet	Work Experience time sheet verification	New Rec.	WTW Forms	WEX Timesheet	
Placer					x											WEX-14	Voluntary Hours Agreement	WTW WEX		New Rec.	WTW Forms	WEX Timesheet	
																	CalWORKs Work Experience Program Medical Release and Emergency Contact						
Ventura	x				x											56-06-063	WEX Orientation Statement	Medical release	Medical verification-no match	New Rec.	WTW Forms	WEX/Comm. Service Hrs	
Ventura					x											56-06-091	WEX Orientation Statement	WEX orientation	Orient client to WEX-no match	New Rec.	WTW Forms	WEX/Comm. Service Hrs	
Ventura					x											56-06-672	WEX Background Check Request	Request form	Request for background check-No match	New Rec.	WTW Forms	WEX/Comm. Service Hrs	
Riverside					x											DPSS 3907	Temporary Employment Activities Eligibility	WEX/CS/ESE customer questionnaire & placement info	Used by ESC, Workforce Connection, & customer	New Rec.	WTW Forms	WEX/Comm. Service Hrs	
Placer					x											ESEPWEX	Paid Work Experience	WTW Participation		New Rec.	WTW Forms	WEX/Comm. Service Hrs	
Initial - Kern					x											KCDHS 290.3-WE	Work Experience Site Supervisor Responsibilities			New Rec.	WTW Forms	WEX/Comm. Service Hrs	
Initial - Kern					x											KCDHS 290-WE	Work Experience Interview Introduction			New Rec.	WTW Forms	WEX/Comm. Service Hrs	
Placer					x											PWEX 1	Production Center Expectations	WTW WEX		New Rec.	WTW Forms	WEX/Comm. Service Hrs	
Tehama					x											TEH WTW 110	WEX Application (TEH WTW 110)	Work Experience Application	Work Experience application	New Rec.	WTW Forms	WEX/Comm. Service Hrs	
Tehama					x											TEH WTW 87	WEX Referral Form	Work Experience Referral	Work Experience referral	New Rec.	WTW Forms	WEX/Comm. Service Hrs	
Placer					x											WEX-13	Medical Survey	WTW WEX		New Rec.	WTW Forms	WEX/Comm. Service Hrs	
Placer					x											WEX-18	State Compensation Ins Fund	WTW WEX		New Rec.	WTW Forms	WEX/Comm. Service Hrs	
Placer					x											WEX-2	WEX Appraisal	WTW WEX		New Rec.	WTW Forms	WEX/Comm. Service Hrs	
Placer					x											WEX-3	Work Exp Participant Agreement	WTW WEX		New Rec.	WTW Forms	WEX/Comm. Service Hrs	
Placer					x											WEX-30	Referral- Get hired sub wage prog	WTW WEX		New Rec.	WTW Forms	WEX/Comm. Service Hrs	
Placer					x											WEX-31	Subsidized Wage Follow Up Form	WTW WEX		New Rec.	WTW Forms	WEX/Comm. Service Hrs	
Placer					x											WEX-32	Help to HIRE & ESE Info	WTW WEX		New Rec.	WTW Forms	WEX/Comm. Service Hrs	
Placer					x											WEX-33	Placer Help to Hire Invoice	WTW WEX		New Rec.	WTW Forms	WEX/Comm. Service Hrs	
Placer					x											WEX-4	WEX Placement Interview Referral	WTW WEX		New Rec.	WTW Forms	WEX/Comm. Service Hrs	
Placer					x											WEX-40	WEX-Pd Work Experience Start Date	WTW WEX		New Rec.	WTW Forms	WEX/Comm. Service Hrs	
Placer					x											WEX-41	WEX- Paid Wex Cover Sheet	WTW WEX		New Rec.	WTW Forms	WEX/Comm. Service Hrs	
San Francisco																Inter - office memo	Witness request	County form	This form documents Witness requests for a Hearing	SIU Documents	SIU Documents	Witness Document	
Initial - Kern																x	KCDHS 315.24-Coll	Civil Action: Witness Fee Computation		SIU Documents	SIU Documents	Witness Document	
Initial - Kern																	KCDHS 315.25-Coll	Witness Fee Computation		SIU Documents	SIU Documents	Witness Document	
Ventura																	56-06-226	PrEP Welcome Letter (05/17)	Notification	PrEP letter-no match	New Rec.	GA/GR Work and Activities Forms	Work Rules and Information
San Bernardino					x											GR 520 Eng & SP	Volunteer Work Information Sheet	Community service tracking	Weekly tracking of volunteer service - no comparable form	New Rec.	GA/GR Work and Activities Forms	Work Rules and Information	
Sonoma					x											HSD1330	For General Relief	Work Crew Information [1330]	General Assistance	New Rec.	GA/GR Work and Activities Forms	Work Rules and Information	
Sonoma					x											HSD34	Supply Room Work and Conduct Rules [34]	Supply Room Work and Conduct Rules [34]	General Assistance	New Rec.	GA/GR Work and Activities Forms	Work Rules and Information	
Sonoma					x											HSD7	Grounds Crew Work Rules [7]	Grounds Crew Work Rules [7]	General Assistance	New Rec.	GA/GR Work and Activities Forms	Work Rules and Information	
Santa Barbara																W 270	GR WORK SITE SAFETY REQUIREMENTS	GR WORK SITE SAFETY REQUIREMENTS	NEEDED FORM NOT ON TIER 1 LIST	New Rec.	GA/GR Work and Activities Forms	Work Rules and Information	
Santa Barbara																W 271	GR EQUIPMENT AND TOOL REQUIREMENTS	GR EQUIPMENT AND TOOL REQUIREMENTS	NEEDED FORM NOT ON TIER 1 LIST	New Rec.	GA/GR Work and Activities Forms	Work Rules and Information	
San Luis Obispo																x	DSS GEN 466	Statement of Facts Coverletter.docx	Generic coverletter for application when request received by telephone call.	Coverletter and follow up to telephone request to apply for benefits and includes first due date. County created document supporting business process. Used for all appropriate applications	New Rec.	Customer/Worker Contact	Worker to Customer Contact
San Francisco																	Form 963 SelfEmployed	BEER Match Cleint Letter	County Form	This form is a client contact letter for BEER Match on out-of-state wages, military wages, federal wages and self-employment wages.	Can employment verification forms be used?	Customer/Worker Contact	Worker to Customer Contact
Santa Clara					x											GA 16	SSI Advocacy Communication Form	SSI Advocacy	Form is used for SSI Advocacy purposes; existing CalSAWS categories are too specific to processes not utilized at Santa Clara county. A general category is being requested.	New Rec.	Customer/Worker Contact	Worker to Customer Contact	
San Bernardino																x	TAD/CS 2.1 E/S	Department of Child Support Services Contact	Informational	used to inform customers about contact with the Department of Child Support - no comparable form	New Rec.	Customer/Worker Contact	Worker to Customer Contact
San Mateo																C-712	WrapAround Status Form	C-712 WrapAround Status Form	FC- San Mateo required form. No match found from CalSAWS.	New Rec.	Foster Care Forms	WRAP Services	
Santa Barbara																FC SB 163	REQUEST FOR WRAP SERVICES	REQUEST FOR WRAP SERVICES	DETERMINE ELIGIBILITY FOR WRAP SERVICES	New Rec.	Foster Care Forms	WRAP Services	

				x	SU962	WRAP Fed/Non-Fed Eligibility Determination Form	A manual referral used to request WRAP services for Foster Care.	A manual referral used to request WRAP services for Foster Care. Could not find any appropriate manual documents listed in the provided list.	New Rec.	Foster Care Forms	WRAP Services
Sutter Initial - Santa Cruz				x	WEL3243	Wrap Around Determination	Wrap Around Determination		New Rec.	Foster Care Forms	WRAP Services
Stanislaus				x	WRAP Referral Form	Wrap Around Program	Program Referral	WrapAround Program is a service provided to our Foster Child and Bio-Parent/Relative before dependency is being terminated. Similar Form not found on Forms List	New Rec.	Foster Care Forms	WRAP Services
Merced			x		24-3082	WTW 24-Month Time Clock Tracking Sheets	A tracking form for the various WTW clocks	This form is used by WTW workers to track participants 24-Month Time Clock and 12-Month Vocational time clock that stays in the participants file. There is 24-Month Time clock options not directly named after a specific form title and no there are no Time Limits options in the CalSAWS list. Current county index is "Time Limits" and possible current option is "Time Limit Review/Time Limit Extension Request Gram" (I assume Gram is a typo for Form.)	New Rec.	Time Limit Forms	WTW - 24 Month Time Limit
Ventura					56-06-681	24 Month Time Clock (MTC) Tracking Sheet	Tracking tool	Trak 24 month clock-No match	New Rec.	Time Limit Forms	WTW - 24 Month Time Limit
Los Angeles			x		WTW 24	Time Clock Tracking Log	Used to track WtW 24-Month Time Clock adjustments needed.	No possible map found in listing	New Rec.	Time Limit Forms	WTW - 24 Month Time Limit
Contra Costa			x		WTWCC 123	WTW 24-Mo/CW 48-Mo Clock Stopper Chart			New Rec.	Time Limit Forms	WTW - 24 Month Time Limit
Contra Costa			x		WTWCC 124	WTW End of the 24-Mo Time Clock Timeline			New Rec.	Time Limit Forms	WTW - 24 Month Time Limit
San Diego			x		24-759 (05.07)	Income Calculation V1		Form used for Child Care program, No CalSAWS document type name/substitute available	New Rec.	Program Budgets & Worksheets	WTW - Budget or Worksheet
San Diego			x		24-804 HHSA (07-10)	Additional Overpayment Calculations Worksheet		Form used for Child Care program, No CalSAWS document type name/substitute available	New Rec.	Program Budgets & Worksheets	WTW - Budget or Worksheet
San Diego			x		24-807 HHSA (07-10)	Overpayment Computation Worksheet		Form used for Child Care program, No CalSAWS document type name/substitute available	New Rec.	Program Budgets & Worksheets	WTW - Budget or Worksheet
Alameda			x		42-109	Job Readiness Calculation Worksheet	Worker completed checklist for supervised job search	Form is used in a county-specific process	New Rec.	Program Budgets & Worksheets	WTW - Budget or Worksheet
Alameda			x		42-146	Learning Disability Evaluator's Checklist	Learning Disability Evaluator's Checklist	Form is used in a county-specific process	New Rec.	Program Budgets & Worksheets	WTW - Budget or Worksheet
Riverside					x DPSS 3390	Personal Budget	Budget form	Used to complete a personal monthly budget FSS & BH staff complete for customer's housing stability plan.	New Rec.	Program Budgets & Worksheets	WTW - Budget or Worksheet
Riverside			x		DPSS 4404	Family Stabilization Plan Worksheet	same as title		New Rec.	Program Budgets & Worksheets	WTW - Budget or Worksheet
Butte			x		NO NUMBER	CAREER RESEARCH WORKSHEET	Career Research	Assign to client during Assessment	New Rec.	Program Budgets & Worksheets	WTW - Budget or Worksheet
Santa Clara			x		SCD 2178	Welfare-to-Work Program Information Checklist	Supportive Services	Forms in this category are related to various supportive services; CalSAWS forms/categories do not meet business needs	New Rec.	Program Budgets & Worksheets	WTW - Budget or Worksheet
Santa Clara			x		SCD 32	Wraparound Budget Worksheet	Budget Worksheet	manual budget worksheet used when budget is incorrect in System or manual budget needs to be calculated- existing CalSAWS Documents do meet these needs	New Rec.	Program Budgets & Worksheets	WTW - Budget or Worksheet
Tehama			x		TEH CL 5	Cal Learn Individual Service Plan Worksheet	Cal Learn Individual Service Plan Worksheet	Cal Learn Individual Service Plan Worksheet	New Rec.	Program Budgets & Worksheets	WTW - Budget or Worksheet
Tehama			x		TEH WTW 103	Occupational Assessment Worksheet	Worksheet for Assessment	Worksheet for participant assessment	New Rec.	Program Budgets & Worksheets	WTW - Budget or Worksheet
Tehama			x		TEH WTW 37	Career Research Worksheet	Participant Researches Careers	Participant researches career options - no state form	New Rec.	Program Budgets & Worksheets	WTW - Budget or Worksheet
Initial - Santa Cruz			x		WEL326TES	Welfare to Work Monthly Budget Worksheet	Welfare to Work Monthly Budget Worksheet		New Rec.	Program Budgets & Worksheets	WTW - Budget or Worksheet
Initial - Santa Cruz					x WEL3286	Schedule Worksheet Change of WTW Worker Informing notice	Schedule Worksheet		New Rec.	Program Budgets & Worksheets	WTW - Budget or Worksheet
Contra Costa			x		WTWCC 59	Subsidized Employment Program Referral Checklist	EC Checklist for Subsidized Employment Program		CSF XXX	New Worker Letter	WTW - Worker Use Checklists
Alameda			x		42-112	Subsidized Employment Program	AC HIRE checklist	Form is used in a county-specific process	New Rec.	Worker Use-Program Checklists	WTW - Worker Use Checklists
Alameda			x		42-145	EZLite Sample Verification Check List	Checklist	Form is used in a county-specific process	New Rec.	Worker Use-Program Checklists	WTW - Worker Use Checklists
Ventura					56-06-629	PreP Data Checklist	Checklist	EZLite checklist-no match	New Rec.	Worker Use-Program Checklists	WTW - Worker Use Checklists
Ventura					56-06-653	Health & Safety Facility Checklist	Checklist	Track completion of PreP-No match	New Rec.	Worker Use-Program Checklists	WTW - Worker Use Checklists
Tehama					CCP 6	SSI Advocacy Referral Checklist - GAIN ESC	Health & Safety Facility Checklist	State Form	New Rec.	Worker Use-Program Checklists	WTW - Worker Use Checklists
Riverside			x		DPSS 4017	Referral from WTW to RUHS BH Clinician	Referral from WTW to RUHS BH Clinician	WTW uses to communicate w/ Behavioral Health	New Rec.	Worker Use-Program Checklists	WTW - Worker Use Checklists
Riverside			x		DPSS 4511	Linkages Current Services Checklist.docx	checklist	County specific, Workforce Connection Unit utilizes.	New Rec.	Worker Use-Program Checklists	WTW - Worker Use Checklists
San Luis Obispo					x DSS 568	WTW Case Review Summary.docx	County services/resources list	Coordinate efforts with partner agencies, county specific	New Rec.	Worker Use-Program Checklists	WTW - Worker Use Checklists
San Luis Obispo			x		DSS ES 16		WTW document maintenance checklist	Worker tool to review that required documentation is on file. County created	New Rec.	Worker Use-Program Checklists	WTW - Worker Use Checklists
Los Angeles			x		GN 6162	Ancillary Checklist/Gram	This is a gram used by GAIN and REP contracted staff and DPSS County Issuance Approval (CIA) staff for authorizing participant's ancillary request.	No possible map found in listing	New Rec.	Worker Use-Program Checklists	WTW - Worker Use Checklists

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San Diego				x	x											11-91 HHSA	Substance Abuse Services Non-Compliance Form	Notification from Substance Abuse Services provider regarding non-compliance	No CalSAWS document - County specific instructions	New Rec.	Behavioral/Mental Health Forms	WTW Mental Health and Substance Abuse
Sonoma					x											HSD 1022	Information for Participants Substance Use Disorder Services	Guidance for SonomaWORKS clients entering into SUDS/MHS	This form is specific to our partnership with Sonoma County's Health Services programs	New Rec.	Behavioral/Mental Health Forms	WTW Mental Health and Substance Abuse
Initial - Kern	x				x											KCDHS 222-CW	CalWORKS Behavioral Health Report			New Rec.	Behavioral/Mental Health Forms	WTW Mental Health and Substance Abuse
Los Angeles	x				x											PA 1923	CalWORKS Treatment Services Verification		No possible map found in listing	New Rec.	Behavioral/Mental Health Forms	WTW Mental Health and Substance Abuse
Los Angeles	x				x											PA 1923	CalWORKS Treatment/Services Verification (Reverse Referral)	Form is completed by service providers when a participant receiving or eligible to CalWORKS begins receiving services at their facility with no direct referral from DPSS.	No possible map found in listing	New Rec.	Behavioral/Mental Health Forms	WTW Mental Health and Substance Abuse
Tulare					x											1990	Post Card Pocket Reminder	Reminder to clients about their Goals	This form is sent to clients to remind them that they have an appointment coming up and they need to indicate how they will get to the appointment and what their child care plans will be. There are also reminders that can be listed for that appointment. There is no form on the CalSAWS listing that has information close to what this form is requesting	is this imaged? New Rec.	WTW Forms	WTW Plan
Tulare					x											1993	My Road Map	Map of how to reach the client's ultimate goal	Clients use this form to indicate what their ultimate goals are and what they will need to do to accomplish those. There is no form on the CalSAWS listing that has information close to what this form is requesting	New Rec.	WTW Forms	WTW Plan
Tulare					x											1994	Potholes & Detours	Anticipating barriers to completing goals	Clients complete this form to anticipate what barriers they will face in the process of completing their goals and indicate what they can do to navigate those barriers. There is no form on the CalSAWS listing that has information close to what this form is requesting	New Rec.	WTW Forms	WTW Plan
Tulare					x											1943 TW	Self-Employment Proposed Business Plan	Self-Employment Proposed Business Plan	Employment Services clients must complete this form when they are requesting to become self-employed. It is used to evaluate self-sufficiency. There is no form on the CalSAWS listing that has information close to what this form is requesting	New Rec.	WTW Forms	WTW Plan
Ventura	x															56-06-678	CalMAP (06/18)	Planning	Client goal tracking-no match	New Rec.	WTW Forms	WTW Plan
Ventura																56-06-679	My Road Map - Potholes & Detours (06/18)	Planning	Client goals-no match	New Rec.	WTW Forms	WTW Plan
San Mateo					x											C-243	Preliminary Action Plan Work First Career Development & Succession Planning Tool	C-243 Preliminary Action Plan Work First	WTW - San Mateo County required form. No match found from CalSAWS.	New Rec.	WTW Forms	WTW Plan
Initial - Kern																KCDHS 868-Gen				New Rec.	WTW Forms	WTW Plan
Santa Clara	x															SCD 1555	CalWORKs Domestic Abuse (DA) Service Plan	Supportive Services	Forms in this category are related to various supportive services; CalSAWS forms/categories do not meet business needs	New Rec.	WTW Forms	WTW Plan
Santa Clara					x											SCD 1758	Education Plan	Supportive Services	Forms in this category are related to various supportive services; CalSAWS forms/categories do not meet business needs	New Rec.	WTW Forms	WTW Plan
Santa Clara					x											SCD 1773	CalWORKs - Employment Plan Report	Supportive Services	Forms in this category are related to various supportive services; CalSAWS forms/categories do not meet business needs	New Rec.	WTW Forms	WTW Plan
Santa Clara					x											SCD 2392	Family Services Plan	Supportive Services	Forms in this category are related to various supportive services; CalSAWS forms/categories do not meet business needs	New Rec.	WTW Forms	WTW Plan
Santa Clara					x											SCD 2418 A	Family Services Weekly Employment Plan	Supportive Services	Forms in this category are related to various supportive services; CalSAWS forms/categories do not meet business needs	New Rec.	WTW Forms	WTW Plan
Santa Clara					x											SCD 2418 B	Family Services Weekly Housing Search Plan	Supportive Services	Forms in this category are related to various supportive services; CalSAWS forms/categories do not meet business needs	New Rec.	WTW Forms	WTW Plan
Santa Clara					x											SCD 2428	Child Enrichment and Activity Plan	Supportive Services	Forms in this category are related to various supportive services; CalSAWS forms/categories do not meet business needs	New Rec.	WTW Forms	WTW Plan
Santa Clara					x											SCD 2503	My Road Map, Potholes & Detours	Supportive Services	Forms in this category are related to various supportive services; CalSAWS forms/categories do not meet business needs	New Rec.	WTW Forms	WTW Plan
Santa Clara					x											SCD 2508	Job Readiness Placement Plan of Action	Supportive Services	Forms in this category are related to various supportive services; CalSAWS forms/categories do not meet business needs	New Rec.	WTW Forms	WTW Plan

[illegible]

San Francisco																			8037	Report of Lost check/benefits or non-receipt	County form	This form is completed by Program staff and sent to Investigations when a client claims they did not receive or lost their benefits	CSF XXX	Affidavit To Obtain Duplication Of Lost/Stolen/Destroyed Warrant			
San Mateo																		x	C-380F	EBT Instructions to Fiscal	Instructions for Fiscal regarding EBT	Used to provide direction to reduce EBT benefits towards on OP/OI	CSF XXX	Agreement to Reimburse			
Monterey																			CO-473E / CO473Sp	EBT Repayment Form	The form contains case/customer information, date, type of identification used to verify customer's identity, recovery account information, amount of EBT card debit, signatures line benefit issuance staff and the customer.	The form is used by benefit issuance staff to record and receipt the customer for EBT debit transaction. There is no relevant form on the list.	CSF XXX	Agreement to Reimburse			
San Mateo Placer																		x	C-415 CSF 82	Client Repayment Authorization Form Agreement toSell Property	Allows client to direct repayment of OP/OI using their EBT benefits Property/Liens	Used by customer to direct agency to reduce their EBT benefits towards repayment of their OP/OI.	New Rec. PA 1820 CW 82	Agreement to Reimburse CalFresh Repayment Agreement Cover Notice Agreement To Sell			
San Diego																		x	11-4 HHSA	Statement of GR Aid Paid	Referral to Office of Revenue & Recovery to collect GR aid paid	No CalSAWS document - County specific instructions	CSF XXX	Aid Paid Pending Informing Letter			
San Diego																			24-713 HHSA (03-13)	RELEASE OF INFORMATION		Form used for Child Care program, No CalSAWS document type name/substitute available	ABCDM 228	Applicant's Authorization for Release of Information			
Contra Costa																			ABCDM 228A	Authorization for Release of Information			ABCDM 228	Applicant's Authorization for Release of Information			
Butte																		x	BUGA 415	Release of information	Release of information for GA	Applicants authorization for release of information for the GA program	ABCDM 228	Applicant's Authorization for Release of Information			
Sacramento																			CSF 15	Authorization for Release of Confidential Information	Request for release of confidential information	Request for release of confidential information, should be imaged in to case file for record keeping	ABCDM 228	Applicant's Authorization for Release of Information			
Los Angeles																			GAIN 251	GAIN REP Job Development Authorization for Release of Information	Used to request authorization from a participant to facilitate provision of Job Development services and referrals to employers.	No possible map found in listing	ABCDM 228	Applicant's Authorization for Release of Information			
Initial - Kern																			KCDHS 297-Pers	Release of Medical Information			ABCDM 228	Applicant's Authorization for Release of Information			
Initial - Kern																			x	KCDHS 370-Adop	Authorization for Release of Information			ABCDM 228	Applicant's Authorization for Release of Information		
Initial - Kern																			x	KCDHS 475-Gen	Authorization for Release of Information			ABCDM 228	Applicant's Authorization for Release of Information		
Initial - Kern																			x	KCDHS 632-Serv	Authorization to Release Information			ABCDM 228	Applicant's Authorization for Release of Information		
Placer																			P-27	Release of Information	WTW Intake/Ore		ABCDM 228	Applicant's Authorization for Release of Information			
Tehama																			x	TEH WTW 44	Authorization for Release of Information	Release of Information	ROI - specific to local partners	ABCDM 228	Applicant's Authorization for Release of Information		
Initial - Santa Cruz																			x	WEL3241E	Participant's Authorization for Release of Employment Info.	Participant's Authorization for Release of Employment Info.		ABCDM 228	Applicant's Authorization for Release of Information		
Initial - Santa Cruz																				WEL3285	Consent for Release and Exchange of Confidential Information	Consent for Release and Exchange of Confidential Information		ABCDM 228	Applicant's Authorization for Release of Information		
Initial - Santa Cruz																				WEL4071E5	GA Release of Information	GA Release of Information		ABCDM 228	Applicant's Authorization for Release of Information		
Yolo																				YC 142	Authorization for Release of Information for Permanent Homeless Assistance	Release of information specifically for Landlords Hoemless Assistance	Release of Information, Landlords Verification	ABCDM 228	Applicant's Authorization for Release of Information		
Napa																				SSSD 3059	Limited Release of Information for the CW Program			ABCDM 228 CW 60 CW 61	Applicant's Authorization for Release of Information Release of Information - Financial Institution Authorization to Release Medical Information		
San Diego																				09-105	Statement of Facts Notification (03/2018)	provide copy of Statement of Facts (SoF)	review SOF, and make corrections if any Establish persons in household when CW/CF/MC application is submitted. No similar form on CalSAWS list.	SAWS 2 PLUS	Application for CalFresh, Cash Aid, And/Or Medi-Cal/Health Care Programs		
Merced																			x	24-4691	Applicant Information Form	Application		SAWS 2 PLUS	Application for CalFresh, Cash Aid, And/Or Medi-Cal/Health Care Programs		
Ventura																				x	56-06-158	Master Employment Application (12/11)	master application	application record-no match	What is this an application for? Is it a job application or a program application? SAWS 2 PLUS	Application for CalFresh, Cash Aid, And/Or Medi-Cal/Health Care Programs	
Placer																			x	ALL 1382A	CW Non-Aided Persons Req MC	Applications/SOF/ICT		SAWS 2 PLUS	Application for CalFresh, Cash Aid, And/Or Medi-Cal/Health Care Programs		
Initial - Kern																				KCDHS 314-Gen	Master Application			SAWS 2 PLUS	Application for CalFresh, Cash Aid, And/Or Medi-Cal/Health Care Programs		
Initial - Kern																				KCDHS 576-CF	CF Signature Packet			SAWS 2 PLUS	Application for CalFresh, Cash Aid, And/Or Medi-Cal/Health Care Programs		
Initial - Kern																				KCDHS 577-CF	CF Information Packet			SAWS 2 PLUS	Application for CalFresh, Cash Aid, And/Or Medi-Cal/Health Care Programs		
Initial - Kern																				KCDHS 578-CW	CW Cash Application ~ Info. Packet			SAWS 2 PLUS	Application for CalFresh, Cash Aid, And/Or Medi-Cal/Health Care Programs		
Initial - Kern																				KCDHS 579-CW	CW Cash Application ~ Signature Packet			SAWS 2 PLUS	Application for CalFresh, Cash Aid, And/Or Medi-Cal/Health Care Programs		
Napa																				SSSD 3009	Master Application			Is this an application for all programs? SAWS 2 PLUS	Application for CalFresh, Cash Aid, And/Or Medi-Cal/Health Care Programs		

Placer											x	CSF 18	Caretaker Relative Statement	Applications/SOF/ICT		CW 2219	Application For CalWORKs (Non-Needy Caretaker Relative With Relative Foster Child)	
Placer	x											CW 13	Caretaker Relative Agreement	Applications/SOF/ICT		CW 2219	Application For CalWORKs (Non-Needy Caretaker Relative With Relative Foster Child)	
Placer											x	Benefits CalWIN Application	Benefits CalWIN Application	Applications/SOF/ICT		SAWS 1 SAWS 2 Pluc	Application for Cash Aid, CalFresh, and/or Medi-Cal/34-County CMSP	
Placer						x						MC 250 A	App/SOF-Over 18/Under 21 Prior FC	Applications/SOF/ICT		MC 250A	Application for Medi-Cal for Former Foster Care Youth	
Placer											x	CSF 30 AA	Withdrawal of Application	Applications/SOF/ICT		CW 89 LA	Application Withdrawal Request	
Sacramento												SAC 1012_34F	Request for Withdrawal, Termination and-or Waiver of Ten-Day Advance Notice	Request to withdraw and waive 10 day notice for CF and CW	Request to withdraw case, should be imaged into case file for record keeping	CW 89 LA	Application Withdrawal Request	
Sonoma			x									972	General Assistance (GA) appointment letter + cover letter [0972]	General Assistance (GA) appointment letter + cover letter [0972]	General Assistance	CSF XXX	Appointment Letter	
Merced			x									24-4072	GA Appointment	2-part carbonless form	Used by Reception when scheduling a client for screening appointment for GA - Do not see similar form	CSF XXX	Appointment Letter	
San Diego					x							24-756.1 PCG (03-13)	Appointment Letter		Form used for Child Care program, No CalSAWS document type name/substitute available	CSF XXX	Appointment Letter	
San Diego					x							24-757.1 HHS/A (03-13)	Second Appointment Letter		Form used for Child Care program, No CalSAWS document type name/substitute available	CSF XXX	Appointment Letter	
San Diego					x							24-757.1 PCG (03-13)	Second Appointment Letter		Form used for Child Care program, No CalSAWS document type name/substitute available	CSF XXX	Appointment Letter	
Alameda												50-184	Psychological Evaluation Appointment Letter	Appointment letter for Psychological Evaluation	Form is used in a county-specific process	CSF XXX	Appointment Letter	
Ventura			x									56-07-060	GR Services Appointment	Appointment Letter	Office Location Appointment Letter-No match	CSF XXX	Appointment Letter	
Sacramento												CF 1003_34F	CalFresh Phone Intake Interview	notify customers of their CF phone interview (checklist)	this checklist is sent to customers to prepare for their intake interview, if returned it needs to be assigned and reviewed by an EW	CSF XXX	Appointment Letter	
Placer											x	CSF 10	Add Person Appointment Letter	Correspondence		CSF XXX	Appointment Letter	
Placer												CSF 6	Appt Ltr for Public Assistance	Correspondence		CSF XXX	Appointment Letter	
Sacramento												CSF 6	Appointment Letter for Public Assistance	Appt letter for public assistance	CW appt letter for public assistance	CSF XXX	Appointment Letter	
Santa Clara											x	GA 919	Appointment Notice for Medical Verification	Verification request	Form is used to request verification; existing CalSAWS categories are too specific to processes not utilized at Santa Clara county. A general category is being requested	New Rec.	Appointment Letter	
San Bernardino			x									GR 100 Eng & SP	RE Letter	appointment letter	General Relief RE appointment letter - no comparable form	CSF XXX	Appointment Letter	
Contra Costa					x	x	x					IM 52	Notice of Initial Appointment			CSF XXX	Appointment Letter	
Contra Costa					x	x	x					IM 52RV	Notice of Redetermination Appointment			CSF XXX	Appointment Letter	
Contra Costa					x	x	x					IM 52RV Guardian	Notice of Guardian Redetermination Appointment			CSF XXX	Appointment Letter	
Contra Costa					x	x	x					IM 52S	Second Notice of Appointment			CSF XXX	Appointment Letter	
Sacramento												SAC 2003_34C	Appointment Letter for Public Assistance	Appt letter sent to customer for public assistance	Appt letter provided to customer who applied for public assistance, copy of this letter should be imaged into case for record keeping	CSF XXX	Appointment Letter	
Sacramento												SAC 2012_34C	Renewal, Redetermination, Recertification Appointment Letter	Redetermination appointment letter	used for all programs, appt letter for renewal mailed to customer. Copy of this letter should be imaged into casefile for record keeping	CSF XXX	Appointment Letter	
Santa Clara												SCD 2509	CFES Appointment/Verification Notice Manual Appointment Letter (English/Spanish)	Verification request	Form is used to request verification; existing CalSAWS categories are too specific to processes not utilized at Santa Clara county. A general category is being requested	CSF XXX	Appointment Letter	
Tehama											x	TEH 54	Manual Appointment Letter (English/Spanish)	Appointment Letter	Specific to county business process	CSF XXX	Appointment Letter	
Tehama											x	TEH 822	Next Day Appointment Referral Slip	Next Day Appointment Referral Slip	Specific to county business process	CSF XXX	Appointment Letter	
Placer												P-06	LD Appt	WTW LD		CSF XXX CSF XXX	Appointment Letter WTW Appointment Letter	
Alameda				x								42-104	Learning Disability Evaluation Appointment Letter	Appointment letter	Form is used in a county-specific process	CSF XXX CSF XXX CSF XXX	Appointment Letter WTW Appointment Letter WTW/REP Appointment Letter	
Alameda												50-177	Social Worker Appointment Letter	Appointment letter for medical condition	Form is used in a county-specific process	CSF XXX CSF XXX CSF XXX	Appointment Letter WTW Appointment Letter WTW/REP Appointment Letter	
Sacramento												CF 1007_34F	Courtesy Face To Face Interview Request	QC form sent to another county	Completed by QC EW and sent to the county the customer moved to during a QC review requesting a home visit from the other county. Should be imaged into case for record keeping.	CF QC Notice 1	Appointment Notice	
Sacramento												CF 2011_34C	Quality Control Home Visit Request Form	Home visit notification for CF QC cases	Used to identify reason for a QC home visit.	CF QC Notice 1	Appointment Notice	

San Diego				x												11-89 HHSA	Substance Abuse Services Appointment Letter	Appointment letter for Substance Abuse Services	No CalSAWS document - County specific instructions	ABP 131	Appointment Notice for General Relief Substance Abuse Recovery Assessment	
Shasta				x	x											DSS 5080	Alcohol & Drug Referral	Transmittal	Unsure of what mapping would be appropriate, form attached	ABP 131	Appointment Notice for General Relief Substance Abuse Recovery Assessment	
Sacramento																SAC 1008_34F	AUTHORIZATION FOR RELEASE OF INFORMATION - AUTHORIZED REPRESENTATIVE	AR form for MA	Authorized Rep form for Medi-cal. Imaged into case file for record keeping	MC 306	Appointment of Representative	
Placer																CSF 71	Approval for Direct Deposit	Fiscal/Issuance/SFIS		CSF XXX	Approved New Direct Deposit Account	
Butte					x											BU CW-563	EMPLOYMENT ASSESSMENT OPTION	EMPLOYMENT ASSESSMENT OPTION	Sign with client who meeting their WTW requirements through unsubsidized employment	GN 6130	Assessment Activity Agreement	
Napa					x											SSSD 4005	General Assistance Application			SAWS 2 PLUS - APPX C	Assistance with Completing This Application	
Tehama					x											TEH WTW 112	Consent to Drug Screen	Participant Consent to Drug Screen	Participant consenting to drug screen for work site placement	ABP 1676-2	Authorization for Use and Disclosure of Protected Health Information	
Placer														x		CSF 13	Applicants Auth - Release of Info	Correspondence		How is this different from the other release of informations? CF QC Notice 4 ABDCM 228	Authorization To Release Information Applicant's Authorization for Release of Information	
Placer														x		CSF 14	ROI - Authorized Representation	Applications/SOF/ICT		How is this different from the other release of informations? CF QC Notice 4 ABDCM 228	Authorization To Release Information Applicant's Authorization for Release of Information	
Placer														x		CSF 15	Auth- Release of Conf Info	Correspondence		How is this different from the other release of informations? CF QC Notice 4 ABDCM 228	Authorization To Release Information Applicant's Authorization for Release of Information	
Placer														x		CSF 17	Auth for ROI-Financial	Property/Liens		How is this different from the other release of informations? CF QC Notice 4 ABDCM 228	Authorization To Release Information Applicant's Authorization for Release of Information	
Placer														x		CSF 61	Authorization to Release Med Info	Disability/Work Reg		CW 61	Authorization to Release Medical Information	
Santa Clara														x		CW 61	Authorization to Release Medical Information	Verification request	Form is used to request verification; existing CalSAWS categories are too specific to processes not utilized at Santa Clara county. A general category is being requested	CW 61	Authorization to Release Medical Information	
Placer	x															CW 61 Coversheet	Provider Instructions for CW 61	Disability/Work Reg		CW 61	Authorization to Release Medical Information	
Santa Clara														x		SCD 1540	Consent to release of patient information	Verification request	Form is used to request verification; existing CalSAWS categories are too specific to processes not utilized at Santa Clara county. A general category is being requested	CW 61	Authorization to Release Medical Information	
Santa Clara														x		SCD 1782	Doctor Verification	Verification request	Form is used to request verification; existing CalSAWS categories are too specific to processes not utilized at Santa Clara county. A general category is being requested	CW 61	Authorization to Release Medical Information	
Napa																SSSD 2021	Whole Person Care Release of Information			Is this just info to the customer? Is it signed? CW 61	Authorization to Release Medical Information	
Ventura																56-02-157	Employee Authorized Representative Request	Employee Authorized Representative Request	Allows an employee of the CWD to be an authorized representative. No match.	CSF XXX	Authorized Representative Designation	
Los Angeles														x		AR-ID001	Authorized Representative		Possible Map: PA 1857	CSF XXX	Authorized Representative Designation	
San Francisco					x											MC382	Appointment of Authorized Representative (Individual)		Establish Auth Rep for MC	SCR CA-206898 to add form CSF XXX	Authorized Representative Designation	
Sacramento																SC 549	Food Stamp Authorized Representative Request Form		Representatives need Request be imaged into the CF case.	PA 1857 CSF XXX	Authorized Representative Designation for CalFRESH/Cash Benefits	
San Luis Obispo					x											DSS MC 209	Board and Care Expense Verification.docx	Request for information from Board and Care facility	Worker request Board and Care rate, prior rate, facility name. From Minor vs. Rank lawsuit	CSF XXX	Board and Care Statement	
Santa Clara																SSP 22	Authorization for Nonmedical Out-Of-Home Care (Board and Care)	SSI Advocacy	Form is used for SSI Advocacy purposes; existing CalSAWS categories are too specific to processes not utilized at Santa Clara county. A general category is being requested	CSF XXX	Board and Care Statement	
Santa Barbara																W 380	B&C UNAVAILABLE INCOME	UNAVAILABLE INCOME WORKSHEET	DETERMINES UNAVAILABLE INCOME OF ABD PERSON IN B&C	Is this something the customer or worker completes? CSF XXX	Board and Care Statement	
Santa Clara					x											CF 215	CalFresh Notification Of Inter-County Transfer	ICT	notification of CF ICT- existing CalSAWS document does not meet the needs	CF 215	CalFresh Notification of Inter-County Transfer	
Placer														x		CSF 215	Outgoing Intercounty transfer	Correspondence		CF 215	CalFresh Notification of Inter-County Transfer	

San Luis Obispo		x															DSS CF 216	CalFresh ICT Update.docx	Notice to County of updated information since ICT sent.	Allows participants to continue to report changes timely when ICT has been initiated.	CF 215	CalFresh Notification of Inter-County Transfer	
Butte																x	BU264	EICT Request	Form for ICT Requests		Is this something the customer completes? If not, recommend using one of the program ICT notices/forms. CF 215 CW 215 MC 360	CalFresh Notification of Inter-County Transfer Notification Of Intercounty Transfer Notification of Medi-Cal Intercounty Transfer	
Initial - Kern																	KCDHS 452-FS	Food Stamp Recertification Packet Letter			CF Packet - 1A	CalFresh Packet - FS29LA 1A	
Initial - Kern		x															KCDHS 572-CF	Cal Fresh CR Renewal Info. Packet			CF Packet - 1A	CalFresh Packet - FS29LA 1A	
Initial - Kern		x															KCDHS 573-CF	Cal Fresh CR Renewal Signature Packet			CF Packet - 1A	CalFresh Packet - FS29LA 1A	
Initial - Kern			x														KCDHS 587-TCF	Transitional CF Recertification Info. Packet			CF Packet - 1A	CalFresh Packet - FS29LA 1A	
Initial - Kern			x														KCDHS 588-TCF	Transitional CF Recertification Signature Packet			CF Packet - 1A	CalFresh Packet - FS29LA 1A	
Sacramento																	CF 29A	CalFresh Initial Appointment Letter	Intake appts for CF will trigger the CF 29A correspondence in CalWIN	Initial Appointment Letter for CalFresh needs to be imaged into the case.	CF 29	CalFresh Recertification Appointment Letter	
Sacramento																	CF 29C	CalFresh Recertification Appointment Letter	Continuing appts for CF will trigger the CF 29C correspondence in CalWIN	Recertification Appointment Letter for CalFresh needs to be imaged into the case.	CF 29	CalFresh Recertification Appointment Letter	
Alameda	x	x		x													50-130	Client Authorization Form	Agreement for CalFresh repayment from CalWORKS/GA	Form is used in a county-specific process	PA 1820	CalFresh Repayment Agreement Cover Notice	
Placer		x															Vol Repay Agreement - Cash EBT	Vol Repay Agreement - Cash EBT	Fiscal/Issuance/SFIS		PA 1820	CalFresh Repayment Agreement Cover Notice	
San Diego		x															09-95	CalFresh Overissuance Payment Stub	CF repayment agreement notice	overissuance repayment type, cash or check	PA 1893	CalFresh Repayment Card	
San Luis Obispo																x	DSS GEN 270	Loan and Grant Worksheet.docx	Student loan and grant information	Worker tool to determine if students loans and grants are countable or exempt. Used for all programs	CSF XXX	CalFresh Student Exemption Checklist	
San Luis Obispo																x	DSS GEN 271	Educational Loans and Grants Worker Tool.docx	Student loan and grant information	Worker tool to determine if students loans and grants are countable or exempt. Used for all programs, potential duplicate	CSF XXX	CalFresh Student Exemption Checklist	
Napa		x															SSSD 2066	CalFresh Student Exemption Checklist			CSF XXX	CalFresh Student Exemption Checklist	
Tehama		x															TEH 975	CalFresh Student Exemption Worksheet	CF Student Exemption Worksheet	Specific to county business process	CSF XXX	CalFresh Student Exemption Checklist	
Initial - Kern		x															KCDHS 248-CF	CF Medical Expense			CF 31	CalFresh Supplemental Form for Special Medical Deductions	
Initial - Kern																	KCDHS 935-CF	Deduct Medical Expenses			CF 31	CalFresh Supplemental Form for Special Medical Deductions	
Napa		x															SSSD 2057	CF Medical Deductions			CF 31	CalFresh Supplemental Form for Special Medical Deductions	
Alameda				x													42-100	Checklist for Work Experience/Community Service	EC checklist for referral s	Form is used in a county-specific process	WTW 15	CalFresh Unpaid Work Experience (WEX) and Unpaid Community Service Hours Worksheet	
Alameda																x	50-123	EBT Card and PIN Responsibility Statement	Information re: EBT	Form is used in a county-specific process	PUB 388	California Electronic Benefit Transfer (EBT) Card Publication	
Ventura																	56-00-124	EBT Responsibility Statement	used for CAPI, in the CAPI packet	used for CAPI, in the CAPI packet, no match	PUB 388	California Electronic Benefit Transfer (EBT) Card Publication	
Placer																	CSF 67	EBT Card/PIN Responsibility Stmt	Fiscal/Issuance/SFIS		PUB 388	California Electronic Benefit Transfer (EBT) Card Publication	
Riverside							x										DPSS 3322	EBT Responsibility Statement			PUB 388	California Electronic Benefit Transfer (EBT) Card Publication	
Initial - Kern																	KCDHS 895-Gen	Keep Your EBT & BIC Card Safe			PUB 388	California Electronic Benefit Transfer (EBT) Card Publication	
Santa Barbara																	W 437	EBT INFO FOR GENERAL RELIEF	EBT INFO FOR GENERAL RELIEF	NEEDED FORM NOT ON TIER 1 LIST	PUB 388	California Electronic Benefit Transfer (EBT) Card Publication	
San Diego																x	806-0	California Residence Questionnaire	Used to inquire on customer's whereabouts and intent to return to California	Used to send out when customers have been using their benefits outside of the state to determine if they have established residency outside of California or if they intend to return	CSF XXX	California Residency Questionnaire	
Humboldt																	V-18-41	Affidavit for Verification of Residency	Signed statement under penalty of perjury of when they arrived in county and that they intend to stay.	County residency and intent to stay is required for GR.	CSF XXX	California Residency Questionnaire	
Los Angeles					x												NS-DOCC2	Cal-Learn Good Cause Document		No possible map found in listing	CL 9.1	Cal-Learn Notice of Good Cause Determination	
Santa Clara				x													SCD 1723 A	Cal-Learn Service/Information Form	Supportive Services	Forms in this category are related to various supportive services; CalSAWS forms/categories do not meet business needs	CL 2	Cal-Learn Program Requirements	
Yolo				x													YC 476	WTW/CalLearn Supportive Services Policies	Used to inform customers and obtain their signature that they understand supportive services policies.	Used to avoid miscommunications between workers and customers.	CL 2	Cal-Learn Program Requirements	
Placer				x													P-10 Cal-Learn	Cal-Learn Orientation			CL 1	Cal-Learn Registration/Program Information/Orientation Appointment Notice	
Ventura																	56-03-342	TOA 48-Month Extension Evaluation	TOA 48-Month Extension Evaluation	Used to evaluate TOA 48-Month extension. No match	CW 2190A	CalWORKS 48-Month Time Limit Extender Request Form	

					x					P-21	Assessment Referral	WTW Assessments		GN 6006A GN 6130	CalWORKs Clinical Assessment Provider Referral Assessment Activity Agreement	
Santa Clara	x			x						SCD 46	One Time Exemption for a Caretaker of a Child Under Six Months (6 months)	TOA	Form is used for Time on Aid purposes; existing CalSAWS categories are too specific to processes not utilized at Santa Clara county. A general category is being requested	CW 2186B	CalWORKs Exemption Determination	
Placer	x			x						CSF 2186A	CW-WTW Time Limit Exemption Req	WTW Exemptions		CW 2186A	CalWORKs Exemption Request Form	
Napa										SSSD 3053	Exempt Volunteer Agreement			CW 2186A	CalWORKs Exemption Request Form	
Placer	x									TEMP CW 2186A	CW/WTW Time Limit Exemption Req	WTW Exemptions		CW 2186A	CalWORKs Exemption Request Form	
Initial - Santa Cruz	x									AFDC WEL1005	AFDC Overpayment Report	AFDC Overpayment Report		M44-350I	CalWorks Overpayment Notice	
Alameda										50-160	Referral for Help with Supportive Services	Internal document for referral for services	Form is used in a county-specific process Telephone appointment letter to inform recipient date and time of their annual redetermination. No match	GN 6006B	CalWORKs Specialized Supportive Services Provider Referral	
Ventura										56-03-334	Redetermination Telephone Appointment Letter	Telephone Appointment Letter		FS 29 LA 3-A	CalWORKs/CalFresh Recertification Appointment Letter - Telephone Interview	
Placer									x	Benefits Calvin Recertification	Benefits Calvin Recertification	Applications/SOF/ICT		CW/CF/MC Packet - 3A	CalWorks/CalFresh/Medi-Cal Packet - FS29LA 3A	
Initial - Kern		x								KCDHS 532-SCF	CF Recertification Info Packet			CW/CF/MC Packet - 3A	CalWorks/CalFresh/Medi-Cal Packet - FS29LA 3A	
Initial - Kern	x									KCDHS 535-SCW	CW Recertification Info Packet			CW/CF/MC Packet - 3A	CalWorks/CalFresh/Medi-Cal Packet - FS29LA 3A	
Initial - Kern	x									KCDHS 595-CW	CalWORKs/Cal Fresh RE Info Packet			CW/CF/MC Packet - 3A	CalWorks/CalFresh/Medi-Cal Packet - FS29LA 3A	
Initial - Kern	x									KCDHS 596-CW	CalWORKs/Cal Fresh RE Signature Packet			CW/CF/MC Packet - 3A	CalWorks/CalFresh/Medi-Cal Packet - FS29LA 3A	
Santa Clara	x	x	x							SCD 130	Redetermination of Eligibility	Redetermination/Recertification Documents	Form is used for RRR purposes; existing CalSAWS categories are too specific to processes not utilized at Santa Clara county. A general category is being requested	CW/CF/MC Packet - 3A	CalWorks/CalFresh/Medi-Cal Packet - FS29LA 3A	
Ventura	x									56-03-349	AB 557 Applicant Sworn Statement	Sworn statement for AB 557 applicants	Used for AB 557 applicants to attest to fleeing a domestic abuse situation. No match	CW 2199	CalWORKs/WELFARE-TO-WORK DOMESTIC VIOLENCE WAIVER REQUEST	
Placer	x									CW DV Rule Waiver Request Form	CW DV Rule Waiver Request Form	WTW Exemptions		CW 2199	CalWORKs/WELFARE-TO-WORK DOMESTIC VIOLENCE WAIVER REQUEST	
Sacramento										SOC 822	Outgoing Intercounty Transfer (if outgoing ICT to another county)	CAPI outgoing ICT form	ICT form used for CAPI outgoing cases. This form is completed by an EW and needs to be imaged into case for record keeping	CAPI 107	CAPI NOTIFICATION OF INTER-COUNTY TRANSFER	
Santa Clara			x							SCD 99	CAPI Redetermination Notice	Redetermination/Recertification Documents	Form is used for RRR purposes; existing CalSAWS categories are too specific to processes not utilized at Santa Clara county. A general category is being requested	CAPI RD Packet	CAPI RD Packet	
Mendocino									x	MCDSS 823	BI Update Request	This form provides MEDS and EBT staff with customer information and eligibility specialist requests to issue benefits to customers	This form is a communication tool between eligibility specialist and account specialists to service customers quickly and efficiently. This document is used everyday and impacts the workload of staff imaging/indexing documents to the case.	TEMP 2202 MEDS Request	Cash Aid / CalFresh Electronic Benefit Transfer - EBT Service Request	
Sacramento			x							SOC 454	Sponsor to Alien Deeming Worksheet	Sponsor worksheet for CAPI program	Sponsor income worksheet for CAPI program, should be imaged into case file for record keeping	SOC 454	Cash Assistance Program for Immigrants (CAPI) Sponsor to Alien Deeming Worksheet	
Sacramento										CSF 54	Certification of ID		Used for multiple programs	CSF XXX	Certification of ID	
San Diego				x						24-850 HHSA (06-16)	CHILD CARE PAYMENT ADJUSTMENT NOTIFICATION LETTER		Form used for Child Care program, No CalSAWS document type name/substitute available	NA 833	Child Care Amendment NOA	
Los Angeles			x	x						CCP24-LA	Stage 1 Child Care Information Transmittal		No possible map found in listing	CSF XXX	Child Care Stages Information Letter	
Los Angeles	x			x						ST1-07	Stage 1CC Notification to County	This form is used by CalWORK's Stage 1 Child Care staff to inform the County of changes which may affect a participant's child care or welfare case or to request participant information from the County.	No possible map found in listing	CSF XXX	Child Care Stages Information Letter	
Mendocino									x	MCDSS 1154	Civil Rights Information	Provided to all customers applying, reapplying or recertifying their benefits for all programs	This form collects information about a customers special need for language and/or disability services. This form is used for all applications and recertification of benefits for all programs. The usage of this form impacts the workload of staff imaging/indexing documents to the case.	PA 2457	Civil Rights Information Notice	
Tulare	x		x							1938 TW	Job Site Placement Program Drug Free Workplace Packet	Drug Free Site Policy	This form is given to the client with a Drug Free workplace policy listed, a list of alcohol and drug program resources, and a compliance agreement that they have to sign. There is no form on the CalSAWS listing that has information close to what this form is requesting	GN 6381	Community Service Participant Select Worksite Agreement	
Alameda			x							42-116	Subsidized Employment Program Emolover Agreement	Employer agreement for AC Hire	Form is used in a county-specific process	GN 6381	Community Service Participant Select Worksite Agreement	

Alameda					x											42-117	Employment Placement Information	Employment Placement Information	Form is used in a county-specific process	GN 6381	Community Service Participant Select Worksite Agreement	
Alameda					x											42-117P	Provider Employment Placement Information	Employment Placement Information	Form is used in a county-specific process	GN 6381	Community Service Participant Select Worksite Agreement	
Ventura														x	56-03-158	Domestic Violence Questionnaire	Questionnaire to ask about domestic violence	Used for a client to self-disclose if they are a victim of past/present domestic violence	PA 1913	Confidential Domestic Violence (DV) Information		
San Diego															07-92	Overpayment Worksheet and Referral	Records overpayment	Records overpayment	PA 30	County Referral		
Placer															All other referrals	All other referrals	Correspondence		PA 30	County Referral		
																			Referral to what? Within county? Out of county?			
Placer														x	CSF 39	CalWIN Referral	Correspondence		PA 30	County Referral		
Placer					x										HVI 1	Referral	WTW Supportive Services		PA 30	County Referral		
Placer															Referral to other agency	Referral to other agency	WTW Referrals		PA 30	County Referral		
Santa Clara															SCD 1489 A	Child Welfare Intake for Non-Dep Children w/Guardians	Application	Application related documents; existing CalSAWS documents are too specific to index to. In order to meet county needs we need generic categories	Possibly DCF5 5122CL	Cover Letter to Relative Caregiver		
Ventura															56-00-150	Social Security Card - Birth Certificate - Identification Request	County worksheet not located in forms repository	used by CalWORKS to request these documents when a client has an extended time period to provide/no match	DCFS 210	Cover Letter to Social Security Administration		
San Luis Obispo														x	DSS FC 110	Notification of Termination of DSS Representative Payee.docx	Informing letter and referral to SSA	Information regarding benefits of a FC child, DSS no longer Rep. payee	DCFS 210	Cover Letter to Social Security Administration		
San Luis Obispo														x	DSS FC 357	Notification to SSA and VA Regarding Child in Foster Care.docx	Transmittal to SSA	Information regarding benefits of a FC child, reporting to SSA.	DCFS 210	Cover Letter to Social Security Administration		
Ventura														x	56-06-201	Appointment Letter to Cure WTW Sanction	Appointment letter	Cure sanction appointment-no match	CSF XXX	Cure Sanction Appointment Letter		
San Mateo														x	C-587	WTW Sanction Cured Communiqué	C-587 WTW Sanction Cured Communiqué	WTW- San Mateo required form. No match found from CalSAWS.	CSF XXX	Cure Sanction Appointment Letter		
Placer														x	DA 1B	DV Abuse Waiver Determin	WTW Exemptions		CW 2198LA	CW 2198 Approve: Domestic Waiver		
Placer															ALL 1393	Repay Agreement-Cash EBT	OP/OI		CW 2217	CW 2217-CalWORKs Request For Voluntary Repayment		
																					CW 2217-CalWORKs Request For Voluntary Repayment CalFresh Repayment Agreement For Inadvertent Household Errors Only Food Stamps Repayment Agreement for Administrative Errors Only CalFRESH Repayment Agreement for Administrative Errors Only	
San Diego	x	x													16-102 HHSA	Authorization for Benefit Collection from EBT	Authorization from customer to allow EBT benefit collection	Allows County to collect benefits from customers EBT card to repay OI	CW 2217 DFA 377.7C DFA 377.7E DFA 377.7E1	CW 2217-CalWORKs Request For Voluntary Repayment CalFresh Repayment Agreement For Inadvertent Household Errors Only Food Stamps Repayment Agreement for Administrative Errors Only CalFRESH Repayment Agreement for Administrative Errors Only		
San Luis Obispo	x	x													DSS ACCT 526	Authorization for Collection from EBT Account.docx	Case information for collection of benefits	Client voluntarily requesting benefits to be deducted from CF or CW benefits. OI/OP	CW 2217 DFA 377.7C DFA 377.7E DFA 377.7E1	CW 2217-CalWORKs Request For Voluntary Repayment CalFresh Repayment Agreement For Inadvertent Household Errors Only Food Stamps Repayment Agreement for Administrative Errors Only CalFRESH Repayment Agreement for Administrative Errors Only		
Placer	x	x													ALL 1404	2 CW-FS Request to Complete RRR	Correspondence		CW/CF Reminder	CW/CF Reminder Letter		
Ventura															Fiscal	30-Day Notice	States that payment is 30 days late	For collection purposes - no match	CSF XXX	Demand Letter for Overpayment		
Ventura															Fiscal	60-Day Notice	States that payment is 60 days late	For collection purposes - no match	CSF XXX	Demand Letter for Overpayment		
Alameda														x	FC 40-79	Direct Deposit Application form	FC form for caregivers that want funding deposited directly into their bank accounts.	Form is specific to county Foster care program	DCFS 6040	Direct Deposit Application Instructions		
Ventura														x	56-04-034	Direct Deposit Authorization Form for Foster Care And AAP Providers	Contains direct deposit information; bank account and client authorization	Sent by CBS at caregivers request; completed by caregiver and returned to CBS for processing - No Match	DCFS 6041	Direct Deposit Authorization Sign-Up Form		
Placer	x													x	Voided Check-Direct Deposit Req	Voided Check-Direct Deposit Req	Fiscal/Issuance/SFIS		Verifications PA 1675	Direct Deposit Authorization Sign-Up Form		
Napa															SSSD 2005	Direct Deposit Information & Authorization			DCFS 6042 PA 1675	Direct Deposit Authorization Sign-Up Form Direct Deposit Authorization Sign-Up Form		
Initial - Santa Cruz															WEL3214pg1	Direct Deposit Form	Direct Deposit Form		DCFS 6041 PA 1675	Direct Deposit Authorization Sign-Up Form Direct Deposit Authorization Sign-Up Form		
Placer															CSF 72	Denial for Direct Deposit	Fiscal/Issuance/SFIS		PA 1675-3	Direct Deposit Cancellation Form		
Placer															CSF 74	Termination of Direct Deposit	Fiscal/Issuance/SFIS		PA 1675-3	Direct Deposit Cancellation Form		
San Francisco															CSF 74 (10/02)	Termination of Direct Deposit	Termination of Direct Deposit	No available index listed in CalSAWS	PA 1675-3	Direct Deposit Cancellation Form		
Placer															CSF 73	Change in Direct Deposit	Fiscal/Issuance/SFIS		PA 1675-2	Direct Deposit Overview		
Placer															CSF 75	Notification of Direct Deposit	Fiscal/Issuance/SFIS		PA 1675-2	Direct Deposit Overview		
Napa														x	SSSD 4003	GA Household Reporting & Benefit Issuance			DRP 01	Direct Housing		
Butte	x														Bu-398C	Permanent Housing and Utility Deposits			DRP 01 PA 956	Direct Housing Housing/Utility Verification Form		
Santa Clara	x														SCD 2255	Landlord File Communication (for CalWORKs Sanctioned Client Vendor Payment)	Miscellaneous	There needs to be a generic miscellaneous category for documents that do not index to any of the existing existing CalSAWS Documents and it does not make business sense to create a new category	PA 4144	Direct Rent - Landlord Agreement Verification Request		

San Diego			x														14-93	Transfer of DDSD Decision	Transmittal	Notifies FRCs of DDSD decision	MC 221 LA	Disability Determination And Transmittal		
Alameda																	G-845	Prucol	FC form used for undocumented youth	Form is specific to county Foster care program	G-845	Document Verification Request		
Initial - Kern	x																KCDHS 448-DV	CW Assistance for Domestic Abuse Victims			PA 1914	Domestic Violence Referral Sheet		
Initial - Kern	x																KCDHS 680-DV	CW Assistance for Domestic Abuse Victims			PA 1914	Domestic Violence Referral Sheet		
Placer																	x	ALL 1378	Auth Representative for EBT	Fiscal/Issuance/SFIS		TEMP 2201	EBT - Request for Authorized Representative/Designated Alternate Cardholder	
Placer																		CSF 64	EBT Request for Alt/Auth Rep	Fiscal/Issuance/SFIS		TEMP 2201	EBT - Request for Authorized Representative/Designated Alternate Cardholder	
Los Angeles	x																	TEMP 2201-LA	Cash Aid Food Stamp EBT Request for A Designated Alternate Cardholder Authorize Rep		State form TEMP 2201 listed on CalSAWS Forms	M16 505A TEMP 2201	EBT Alternate Card Holder EBT - Request for Authorized Representative/Designated Alternate Cardholder	
Placer																		CSF 65	EBT Exemption Request	Fiscal/Issuance/SFIS		M16-325A	EBT Exemption	
Placer																		CSF 66	EBT Exemption Request - Cash Aid	Fiscal/Issuance/SFIS		M16-325A	EBT Exemption	
Alameda																	x	50-126A	EBT Card Request	Internal document for production of EBT card	Form is used in a county-specific process	EBT 13	EBT Request for EBT Account Set-Up/ EBT Benefit Add/ EBT Card - EPPIC Application	
Ventura																		56-00-141	NSDI Request	completed when a benefit needs to be issued outside of the SAWS system	submitted to BIO when CF/CW/FC/GR benefits need to be issued outside of the system, no match	EBT 13	EBT Request for EBT Account Set-Up/ EBT Benefit Add/ EBT Card - EPPIC Application	
San Luis Obispo																	x	DSS GEN 532	Request for EBT Emergency Actions.docx	Request by worker to set up a new EBT account to process emergency request.	Staff complete the EBT form to create an EBT account for participant. Form is forwarded to clerical for processing. Requires worker, supervisor and clerical signatures to be complete.	EBT 13	EBT Request for EBT Account Set-Up/ EBT Benefit Add/ EBT Card - EPPIC Application	
Monterey																		CO-472	EBT Referral Form	The form contains case/customer information, tracking information, date, signatures lines for eligibility staff, benefit issuance staff and the customer, identification information and EBT card information.	The form is used by eligibility staff to refer customers to benefit issuance staff for an EBT card print, pin and pickup. There is no relevant form on the list.	EBT 9 TEMP 2202	EBT Service Request Cash Aid / CalFresh Electronic Benefit Transfer - EBT Service Request	
San Luis Obispo																	x	DSS GEN 468	Disbursing Order Request.docx	All program request for disbursing order.	Document for eligibility worker or SW to request disbursing order. Clerical processes and signs off, form used as tracking.	What is being disbursed? EBT 9 TEMP 2202	EBT Service Request Cash Aid / CalFresh Electronic Benefit Transfer - EBT Service Request	
San Luis Obispo																	x	DSS GEN 528	EBT Request.docx	Participant request change to EBT - add/delete person, replace card.	Form used to request changes to EBT. The request is completed and forwarded to clerical for processing. Used in CF, CW and GA programs.	EBT 9 TEMP 2202	EBT Service Request Cash Aid / CalFresh Electronic Benefit Transfer - EBT Service Request	
Los Angeles					x													GAIN EBT -9	EBT Service Request	Form must be completed when a participant makes a repayment using the EBT card.	Possible Map: EBT 9 - EBT Service Request	EBT 9 TEMP 2202	EBT Service Request Cash Aid / CalFresh Electronic Benefit Transfer - EBT Service Request	
Lake																		LAK 1160	EBT Card Pick up	CalWorks/CalFresh	Lake County form-not found on list	EBT 9 TEMP 2202	EBT Service Request Cash Aid / CalFresh Electronic Benefit Transfer - EBT Service Request	
San Francisco																		6405	Form 6405	Agreement to Receive Optional Email & Text Messaging Service (Text & Email Consent)	generic local form - no existing index code in CalSAWS	NA 1273	Electronic Notification Agreement and Courtesy Confirmation Receipt	
San Francisco																		-	text/email consent form	By signing the text/email consent form client gives the county permission to send emails or cell phone messages about reminders for appointments, renewals, and other information. This form also allows the client to opt out of text/emails sent by county.		NA 1273	Electronic Notification Agreement and Courtesy Confirmation Receipt	
Los Angeles					x													ABP 4060	GR and GROW Text Notification Consent Form		No possible map found in listing	NA 1273	Electronic Notification Agreement and Courtesy Confirmation Receipt	
San Mateo	x																	C-737	E-mail and Text Messaging Service Consent	C-737 (Eng) E-mail and Text Messaging Service Consent	CF- San Mateo required form. No match found from CalSAWS.	NA 1273	Electronic Notification Agreement and Courtesy Confirmation Receipt	
Solano																		N/A	Text messaging authorization	Authorization for client to receive text messages	No match in the provided CalSAWS document.	NA 1273	Electronic Notification Agreement and Courtesy Confirmation Receipt	
Santa Clara																	x	SCD 2551	CONSENT TO RECEIVE ELECTRONIC COMMUNICATIONS FROM THE COUNTY OF SANTA CLARA	Client Request/Agreement	This form is a client request or agreement; county business needs require a generic category; existing CalSAWS documents do contain a general request and/or agreement	NA 1273	Electronic Notification Agreement and Courtesy Confirmation Receipt	
Shasta																	x	TEXT 100	Text Notification Agreement	Text Notification	Unsure of what mapping would be appropriate, form attached	NA 1273	Electronic Notification Agreement and Courtesy Confirmation Receipt	
Riverside																	x	TEXT 100	Text Notification Agreement	Consent form in C-IV	Used to obtain permission for customers to receive automated messages through the IVR system.	NA 1273	Electronic Notification Agreement and Courtesy Confirmation Receipt	
Santa Barbara																		W 459	E-COMMUNICATION CONSENT	CONSENT TO COMMUNICATE WITH CLIENT BY EMAIL AND TEXT MESSAGE	THIS SIGNED CONSENT ALLOWS US TO COMMUNICATE WITH CW,CF AND MEDI-CAL CLIENTS MORE EFFICIENTLY	NA 1273	Electronic Notification Agreement and Courtesy Confirmation Receipt	
Los Angeles																		GN 106	Family Reunification Housing Support Moving Assistance Request Part - 1 and Family Reunification Support Moving Assistance Agree	Request for Family Reunification participants to apply for Housing Support and Moving Assistance.	No possible map found in listing	PA 2124	Emergency Assistance to Prevent Eviction & Moving Assistance Programs Application	
Los Angeles	x																	PA 6155	Moving Assistance MA Program Application		No possible map found in listing	PA 2124	Emergency Assistance to Prevent Eviction & Moving Assistance Programs Application	

Los Angeles	x	x	x	x													ST1-20	Request for Employment Verification	This form is used to verify participant's employment by the R&R Agencies.	No possible map found in listing	CSF XXX	Employer Contact Verification	
Butte																x	Bu288-IFD	Letter requesting payroll records from employers	letter of request for employment records	Letter to employers asking them to provide employment payroll records for IFD's	CSF XXX VER 104 WFP&I 354	Employer Contact Verification Employment & Income Verification Employer identification/verification	
Butte																x	BU284-IFD	Statement of earnings	Statement of earnings report form for employer to complete	Gets detailed information regarding the employees dates paid, hours worked, gross earnings for the IFD period.	VER 104	Employment & Income Verification	
Shasta																x	DSS 8000 WH	Work History	Other Employment & Training	Unsure of what mapping would be appropriate, form attached	SAWS 2 PLUS - APPENDIX D	Employment History	
Placer	x					x											CSF 41	Referral for Employment Services	WTW Referrals		CSF XXX	Employment Services	
San Francisco																	Form 963 FTI	FTI Asset Match Client Letter	County Form	This form is a client contact letter for IRS Asset Match on unearned income reported by businesses such as banks for out-of-state asset accounts, interest, dividends, lottery winnings, stocks, bonds,IRAs, mortgage income and other unearned income not reported by the Franchise Tax Board.	CSF XXX	Employment Statement Request	
Los Angeles	x																PA 1672-1	Employment Verification Form		Unable to determine possible map	CSF XXX CSF XXX	Employment Statement Request Verification of Employment/Earning	
Los Angeles	x	x	x	x													PA 1672-1	Request for Employment Verification	This form is used to request employment verification.	No possible map found in listing	CSF XXX CSF XXX CSF XXX	Employment Statement Request Verification of Employment/Earning	
Los Angeles																x	WFP&I 453A	Employment Verification Request	WFP&I View and Use only	No possible map found in listing	CSF XXX CSF XXX	Employment Statement Request Verification of Employment/Earning	
San Francisco																	8026	employment and wage information	Employment and Wage Information Authorization to Release is a county cross program form that is used in situations where the client is unable to obtain earned income verifications independently. Where the client is not able to obtain verifications, the county must attempt and assist the client in obtaining such verifications. This release of information form is specific to earned wages. The CalSAWS Documents and Form file shows form CF QC Notice 10, which sounds similar to the form in question. If form CF QC Notice 10 includes authorization of release of information language, we would be willing to combine. However, if this is language is missing, then we would like to continue to use our county local 8026 form.	CSF XXX CSF XXX CSF XXX Other county drawer - QA/QC	Employment Statement Request Verification of Employment/Earning Employment Questionnaire		
Ventura																	56-00-024	Employment Release Information	Form for client to authorize, and employer to provide, employment info	Possible match to PA 2419 or CSF XXX, Request for Employment Verification; form signed by client and completed by employer to identify hire and termination dates, pay frequency and amount, hours worked, deductions for OHC, and more	CSF XXX CSF XXX CSF XXX	Employment Statement Request Verification of Employment/Earning Employment Questionnaire	
Riverside						x											DPSS 3042	I'm Employed	New employment details form	Customer self declares new employment details when worker is not available for F2F	CSF XXX CSF XXX CSF XXX	Employment Statement Request Verification of Employment/Earning Employment Questionnaire	
Shasta	x	x															DSS 8102	Employment Questionnaire	Other Employment & Training	Unsure of what mapping would be appropriate, form attached	CSF XXX CSF XXX CSF XXX	Employment Statement Request Verification of Employment/Earning Employment Questionnaire	
Placer																	CSC 31	Employment Verif When Job Ends	Income		CSF XXX	Employment Verification When Job Ends	
Sacramento																	SC 762	Loss Source of Earned Income	Notice sent by EW to customer in regards to loss of income	Notice sent to customer when employment is terminated, completed form should be imaged into case file and assigned to EW for processing	CSF XXX	Employment Verification When Job Ends	
Merced						x											24-4054	Job Search Report	2-part carbonless form	Report that employable GA clients must complete on a monthly basis that lists ten job applications client has done - Do not see similar form	CSF XXX	Employment Workshop and Job Search Notice	
Ventura																	56-03-007	Special Needs Verification	Verification for medical provider for special need payment request.	To verify medical condition to authorize special need payment. No match	CSF XXX	Expiration of Medical Report/Verification	
Sacramento																	CSN 03	Expunged 270 Days-Food Stamps		Days need to be imaged into the expunged case.	EXP 001	Expungement Letters	
Sacramento																	CSN 04	Expunged 270 Days - Cash		Days need to be imaged into the expunged case.	EXP 001	Expungement Letters	
Sacramento																	CF 2006 34C	CalFresh QC Sanction Request	A notice provided to the customer when they refused to cooperate with QC review process	This notice is sent to customers who are sanctioned for not cooperating with the QC review process, if returned it needs to be imaged and reviewed by a QC EW.	CF QC Notice 7	Failure to Provide Information Notice	
Sacramento																	CF 55	SFIS Referral	not used anymore		PA 59	Fingerprint and Photo Imaging Referral	
Initial - Santa Cruz																x	WEL170	Transmittal of Accounts Receivable	Transmittal of Accounts Receivable		New Rec.	Fiscal Forms	
San Bernardino																x	FC 964 Eng & SP	Repayment Agreement	Repayment	Used for voluntary repayment of Foster Care payment - no comparable form	DCFS 6025	FISCAL Voluntary Repayment Agreement	
Santa Clara																	SCD 2385 FFY	FFY RRR Coverletter	Redetermination/Recertification Documents	Form is used for RRR purposes; existing CalSAWS categories are too specific to processes not utilized at Santa Clara county. A general category is being requested	FFY MC Coverletter	Former Foster Youth Aging Out Form	
Alameda																	FC 45-16	Renewal Determination	FC form when re-determining eligibilty	Form is specific to county Foster care program	FFY PACKET	Former Foster Youth Packet	

Placer																	P-226	Transportation Verif Request	WTW Correspondence		GN 6322	Forms/Documents Needed to Support Transportation/Ancillary Requests		
Placer																	P-9	Ancillary Costs/Adjustments	WTW Supportive Services		GN 6322	Forms/Documents Needed to Support Transportation/Ancillary Requests		
Los Angeles																		Spenddown Information	Financial information	Eligibility determination.	76F734 DCFS 341	Foster Care Trust Notification - Spend Down		
Riverside																	x	DPSS 2752	Request for interpreter/Translator	Request form	Staff use this form to request certified "in person" interpreter or translator from 3rd party vendor	CSF XXX	Free Interpreter Service Waiver and Confidentiality Agreement	
Riverside																	x	DPSS 4096	Request for Certified Telephone Interpreter	Request form	Staff use this form to request certified "telephone" interpreter or translator from 3rd party vendor	CSF XXX	Free Interpreter Service Waiver and Confidentiality Agreement	
San Luis Obispo																		DSS 28.1	Request for Translation of Case Correspondence.docx	Request to translate	Translation to Eng/Sp for document review. No equivalent	CSF XXX	Free Interpreter Service Waiver and Confidentiality Agreement	
Los Angeles																	x	PA 481A	Interpreters Services Statement	Used by the participant to request an interpreter.	No possible map found in listing	CSF XXX	Free Interpreter Service Waiver and Confidentiality Agreement	
Los Angeles																	x	PA 6181	INTERPRETER SERVICES STATEMENT AND CONFIDENTIALITY AGREEMENT	Used by the participant to request an interpreter.	Possible Map: CSF XXX - Free Interpreter Service Waiver and Confidentiality Agreement	CSF XXX	Free Interpreter Service Waiver and Confidentiality Agreement	
Sacramento																		SAC 1002_34F	Certification of Confidentiality - Non-DHA Interpreter	Interpreter confidentiality statement	Used for all programs, confidentiality statement for non county interpreter. Needs to be imaged into case file for record keeping	CSF XXX	Free Interpreter Service Waiver and Confidentiality Agreement	
San Mateo																		C-740	OCAT Appraisal Appointment Letter	C-740 (Eng) OCAT Appraisal Appointment Letter	WTW- San Mateo required form. No match found from CalSAWS.	GN 6053-1	GAIN Appraisal Appointment Notice	
Alameda																		42-2	Transportation and Child Care Questionnaire	Client request for Transportation allowance	Form is used in a county-specific process	GN 6151	GAIN Transportation and Ancillary School & Work-Related Expenses Request Form	
Ventura																		56-06-675	Ancillary-Support Services Request	Request form	Ancillary service request-no match	GN 6151	GAIN Transportation and Ancillary School & Work-Related Expenses Request Form	
San Luis Obispo																		DSS ACCT 467	Bus Pass Request.docx	Case information to issue bus passes	Clerical tracking of issues bus passes for clients. County specific	GN 6151	GAIN Transportation and Ancillary School & Work-Related Expenses Request Form	
Tehama																		TEH WTW 85	Transportation Request Form	Request for WTW Transport	Request for WTW transport	GN 6151	GAIN Transportation and Ancillary School & Work-Related Expenses Request Form	
Tehama																		TEH WTW 5	Orientation Invitation	Invitation to Orientation	Invitation to Orientation	GN 6010	GAIN/REP Appointment Letter	
San Francisco																		2133 (6/24/19)	Form 2133 Statement of Facts Supporting Eligibility (CAAP)	Form 2133 Statement of Facts Supporting Eligibility (CAAP)	No available index listed in CalSAWS	GR 20	GENERAL RELIEF (GR) APPLICATION	
Merced																		24-4200.4	GA Applicant Information	Client information	Used to screen new clients who are applying for GA - Do not see similar form	GR 20	GENERAL RELIEF (GR) APPLICATION	
Merced																		24-4262GA	Statement of Facts for GA	Facts to support eligibility for GA	Form completed by GA applicant to list their assets and expenses - Do not see similar form	GR 20	GENERAL RELIEF (GR) APPLICATION	
Napa																		SSSD 4011	GA Application Coversheet		What info is on this that isn't included on the application? Is it signed by the customer? Is it imaged?	GR 20	GENERAL RELIEF (GR) APPLICATION	
Alameda																		90-16	General Assistance Application	GA Application	Form is specific to county General Assistance program	GR 20 SAWS 1	GENERAL RELIEF (GR) APPLICATION Application for Cash Aid, CalFresh, and/or Medi-Cal/34-County CMSP	
San Francisco																		2175	1st Unreported Income/Assets/Duplicate Aid	Inform customer for possible collection of an overpayment for the 1st time unreported income and/or asset.	There is no GA/GR index for 1st first income and/or asset did not report to the county.	ABP 4023 C	General Relief (GR) Overpayment	
Butte																		BUGA 407	GA Redetermination	Provides information regarding income, property and employability for RE's	To be able to accurately re-determine GA Eligibility	ABP 898-16	General Relief Annual Agreement	
Napa																		SSSD 4008	GA Good Cause Claim			ABP 592	General Relief Good Cause Determination Checklist	
Santa Barbara																		W 322	GR WORK ASSIGNMENT	GR WORK ASSIGNMENT	NEEDED FORM NOT ON TIER 1 LIST	ABP 589	General Relief Notice to Register for Work	
Placer																		Work reg - GEN 827, GAIN, FSET	Work reg - GEN 827, GAIN, FSET	Disability/Work Reg	ABP 589 PA 1865	General Relief Notice to Register for Work Food Stamp Work Registration Rights and Responsibility		
Alameda																		90-139H	Job Search Contact Record (Hayward)	GA Job Search documentation	Form is specific to county General Assistance program	GROW 85	General Relief Opportunities for Work (GROW) Job Search Assignment	
San Diego																		11-39 HHSA	Redetermination Appointment Letter	Notice to GR customer of their redetermination appointment.	No CalSAWS document - County specific instructions	ABP 1460	General Relief Opportunities For Work Case Manager Appointment Notice	
San Diego																		11-40 HHSA	GR Employability Evaluation (GREE) Referral	Sends GR customer to their GREE appointment	No CalSAWS document - County specific instructions	Survey	General Relief Opportunities for Work Employment Needs Evaluation	
Initial - Kern																		KCDHS 156-Gen	Orientation Flyer (Employment Services)			ABP 1461	General Relief Opportunities For Work Orientation Appointment Notice	
Alameda																		90-2A	General Assistance-Administrative Exemption	GA Exemption for Employability status	Form is specific to county General Assistance program	ABP 1461-A	General Relief Opportunities For Work Orientation Exemption Notice	
Napa																		SSSD 4012	GA Exemption Treatment Plan			ABP 1461-A	General Relief Opportunities For Work Orientation Exemption Notice	
Ventura																		56-06-602	Behavioral Health Referral Form	Referral	Referral to BH-no match	ABP 1467-MHS	General Relief Opportunities For Work Supportive Services Referral MHS	
Napa																		SSSD 3058	Behavioral Health Referral			ABP 1467-MHS	General Relief Opportunities For Work Supportive Services Referral MHS	
Tehama																		TEH/GA 994	Verification of GA Job Search Workshoo Attendance	Verif of Workshoo Attendance	Soecific to county business process for GA	ABP 4037	GENERAL RELIEF OPPORTUNITIES FOR WORK VERIFICATION OF ORIENTATION ATTENDANCE NOTICE	

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Alameda							x											50-20FC	Case transfer slip	FC form transferring cases between staff	Form is specific to county Foster care program	CSF XXX	Inter-Office Case Assignment		
Ventura																		56-04-027	Intra-Inter Program Transfer	Internal memo; contains case information, contact and date of transfer	Completed by FC CBS to transfer case to CalWORKS - No Match	CSF XXX	Inter-Office Case Assignment		
Los Angeles							x											GN 6042	Inter-region transfer transmittal	Used when the case is being transferred from one Region to another.	No possible map found in listing	CSF XXX	Inter-Office Case Assignment		
Los Angeles	x	x					x											TEMP 2259	Report of Electronic Theft of Cash Aid		Possible Form: State Form EBT 2259 - instructions to report electronic theft of cash aid	EBT 2259	INTRUCTIONS TO REPORT ELECTRONIC THEFT OF CASH AID		
Alameda																		50-138	EBT Cash Aid/Food Stamps Replacement Affidavit	Statement re: missing EBT card	Form is used in a county-specific process	EBT 2259	INTRUCTIONS TO REPORT ELECTRONIC THEFT OF CASH AID		
Alameda																		42-129	Job Club Mutual Agreement	Agreement between EC and client	Form is used in a county-specific process	PA 853	Sworn Statement		
Santa Barbara							x											E 61	REFERRAL TO JOB SERVICES	REFERRAL TO JOB SERVICES	NEEDED FORM NOT ON TIER 1 LIST	GN 6129	Job Club Activity Assignment		
Butte							x											BU 35	Voluntary Job Quit Good Cause Determination	Job Quit Determination	Allows customer to indicate why they quit their previous employmet	ABP 432	Job Fair Referral		
Napa																		SSSD 2018	Employment Termination Info Sheet			CSF XXX	Job Quit Questionnaire		
Merced																		24-4941	GA Job Search Requirements	2-part carbonless form	Given to Employable GA applicants that provides instructions on what is required when applying for a job - Do not see similar form	Is this imaged? Or info only?	ABP 85	Job Search Assignment	
Placer							x											CALHEERS Application	CALHEERS Application	Applications/SOF/ICT		MAGI MC Packet	MAGI MC Packet		
San Diego																		14-127	Discontinuance of Benefits for Suspended Individuals	Notice of Action	Notifies customer that they have been suspended for 12 months and are now discontinued	New Rec.	Manual <Program> NOA		
San Diego																		14-87	CEC Information Notice	Notice of Action	Denial of CEC for child referred from SSI discontinuance	New Rec.	Manual <Program> NOA		
San Mateo																	x	C-342	Grant Information Letter	C-342 Grant Information Letter	Multiple - San Mateo required form. No match found from CalSAWS.	New Rec.	Manual <Program> NOA		
Ventura																		Fiscal	Notice of Action	Notification of overissuance (generated by VACS)	Notification of overissuance to begin the collections process - No match	New Rec.	Manual <Program> NOA		
Los Angeles																		NA 791	NOA - Adoptions Notice of Action	Approval/Denial of rates	Eligibility determination.	New Rec.	Manual <Program> NOA		
Sacramento																	x	NOAs All Notices of Action	NOA	CalSAWS form Name Match lists specific NOA's, does not have all NOAs option.		New Rec.	Manual <Program> NOA		
Santa Barbara																	x	NOD 02	DENIAL OVER INCOME	INFORMING NOTICE	NEEDED FORM NOT ON TIER 1 LIST -REQUIRED informs custoerm of expense disallowance - no comparable form	New Rec.	Manual <Program> NOA		
San Bernardino																	x	TAD 377.4 D	Disallowance of Deduction	Disallowance form	NEEDED FORM NOT ON TIER 1 LIST	New Rec.	Manual <Program> NOA		
Santa Barbara																		W 209	SSI ADVOCATE DISC NOTICE	SSI ADVOCATE DISC NOTICE	NEEDED FORM NOT ON TIER 1 LIST	New Rec.	Manual <Program> NOA		
Santa Barbara	x																	W 210	SSI ADVOCATE DENIAL NOTICE	SSI ADVOCATE DENIAL NOTICE	NEEDED FORM NOT ON TIER 1 LIST	New Rec.	Manual <Program> NOA		
Los Angeles																		NOA Attachment for Rate Change	Notification of rate change.	Verification of rate amount.	New Rec.	Manual <Program> NOA			
Los Angeles																		CHI NOA	Yearly Fiscal/Year increase	Eligibility determination.	New Rec.	Manual <Program> NOA			
Ventura																		56-08-151	Welcome to Medi-Cal Letter	Cover letter for MC application packet when mailed per client's request	Cover letter for Medi-Cal application when mailed per request by consumer - No Match	Is this coverletter imaged?	MC 210 Mail In Instr	MC 210 Instructions	
Placer																		AIM	AIM Application	Applications/SOF/ICT		MC 210 Mail In App	MC 210 Medi-Cal Mail-In Application		
Placer																		AIM Application	AIM Application	Applications/SOF/ICT		MC 210 Mail In App	MC 210 Medi-Cal Mail-In Application		
Placer	x																	ALL 1363	MC App Pkt cover ltr-Back-Eng	Applications/SOF/ICT		MC 210 Mail In App	MC 210 Medi-Cal Mail-In Application		
Placer	x																	ALL 1363	MC App Pkt cover ltr-Front-Eng	Applications/SOF/ICT		MC 210 Mail In App	MC 210 Medi-Cal Mail-In Application		
Initial - Kern																		KCDHS 585-MC	Medi-Cal Application Informational Packet			MC 210 Mail In App	MC 210 Medi-Cal Mail-In Application		
Initial - Kern																		KCDHS 586-MC	Medi-Cal Application Signature Packet			MC 210 Mail In App	MC 210 Medi-Cal Mail-In Application		
Placer																		MC 210	New Mail-In App and Instructions	Applications/SOF/ICT		MC 210 Mail In App	MC 210 Medi-Cal Mail-In Application		
Placer																		MC 321 HFP	HF / MC Joint Application	Applications/SOF/ICT		MC 210 Mail In App	MC 210 Medi-Cal Mail-In Application		
Santa Clara																		SCD 2353	MC 210 ACA Income and Deduction Supplement	Income & Expense	form for clients to record and report income and deductions; existing CalSAWS documents do meet this need	MC 210 Mail In App	MC 210 Medi-Cal Mail-In Application		
Santa Clara																		SCD 321 Supplement	Healthy Kids Supplemental Enrollment Application	Application	Application related documents; existing CalSAWS documents are too specific to index to. In order to meet county needs we need generic categories	MC 210 Mail In App	MC 210 Medi-Cal Mail-In Application		
Santa Clara																		SCD 93	Medi-Cal Application Coverletter	Application	Application related documents; existing CalSAWS documents are too specific to index to. In order to meet county needs we need generic categories	What info is on the coverletter that it needs to be scanned separately?	MC 210 Mail In App	MC 210 Medi-Cal Mail-In Application	
Santa Clara																		SCD 93 A	Medi-Cal Application Coverletter	Application	Application related documents; existing CalSAWS documents are too specific to index to. In order to meet county needs we need generic categories	What info is on the coverletter that it needs to be scanned separately?	MC 210 Mail In App	MC 210 Medi-Cal Mail-In Application	

Santa Clara			x															SCD 93 B	Medi-Cal Application Coverletter	Application	Application related documents; existing CalSAWS documents are too specific to index to. In order to meet county needs we need generic categories	What info is on the coverletter that it needs to be scanned separately? MC 210 Mail In App	MC 210 Medi-Cal Mail-In Application	
Santa Clara			x															SCD 93 C	Medi-Cal Application Coverletter	Application	Application related documents; existing CalSAWS documents are too specific to index to. In order to meet county needs we need generic categories	What info is on the coverletter that it needs to be scanned separately? MC 210 Mail In App	MC 210 Medi-Cal Mail-In Application	
San Francisco																		MC 604 IPS	Additional Income and Property Information Needed for Medi-Cal MC Redetermination Packet		Gather information for MC eligibility determination (Non-MAGI)	MC 604 IPS PACKET	MC 604 IPS PACKET	
San Diego			x															14-116	MC Redetermination Packet Coversheet	Informing Notice	Notifies customers of redetermination requirements	MC Redeter Packet	MC Redetermination Packet	
San Diego																		14-84 TEMP	TMC Status Report Reminder	Informing Notice	Sent to TMC customers to avoid losing TMC due to non-receipt of report.	CSF XXX	MC Reminder Notice	
Santa Barbara																		CSC 108	MC ANNUAL REDETERMINATION DUE	INFORMING LETTER	NEEDED FORM NOT ON TIER 1 LIST -REQUIRED	CSF XXX	MC Reminder Notice	
Contra Costa			x															MCC 338 (08/09)	The Working Disabled Program Compared to the Medically Needy Program with a Share of Cost			MC 0384	Medi-Cal 250 Percent Working Disabled Program Premium Payments	
Santa Clara																	x	SCD 1233	Request for Immediate Need Paper BIC	Client Request/Agreement	This form is a client request or agreement; county business needs require a generic category; existing CalSAWS documents do contain a general request and/or agreement	CSF XXX	Medi-Cal BIC Replacement	
Santa Clara			x															SCD 2340	Medi-Cal Early Fraud Detection Program	Fraud	Referral to Medi-Cal Early Fraud Detection Program; existing CalSAWS documents do not meet this need	MC-1 Fraud	MEDI-CAL EARLY FRAUD DETECTION PREVENTION REFERRAL	
San Luis Obispo			x															DSS ACA 30	MAGI Welcome Letter.docx	Covered Ca. to MC approval, reporting responsibilities and worker contact info	Explanation of Covered CA. application to County MC approval	MC 018	Medi-Cal Information for Applicants	
Placer																		MC 224 A-S	MC 224 A Supplemental	OP/OI		MC 224 A	Medi-Cal Potential Overpayment Reporting Work Sheet	
Placer																		MC 224 B-S	MC 224 B Supplemental	OP/OI		MC 224 B	Medi-Cal Potential Overpayment Reporting Work Sheet	
Placer																		MC 176 P-A QMB/SLMB/QI	QMB Property Adult	Property/Liens		MC 176 PA-A	MEDI-CAL PROPERTY ASSESSMENT APPLICATION	
Placer																		MC 176 P-C QMB/SLMB/QI	QMB Property Child	Property/Liens		MC 176 PA-A	MEDI-CAL PROPERTY ASSESSMENT APPLICATION	
Ventura			x															56-08-266	Medi-Cal Telephone Renewal Form	Used for phone redeterminations to collect the annual redetermination information when a case is closed but the client is complying during the 90 day cure period.	Used during 90 day cure period to collect annual renewal information - No Match	MC 216	Medi-Cal Renewal Form	
Placer			x															ALL 1375	Medi-Cal Mail in first Req	Correspondence		MC 355	Medi-Cal Request for Information	
Placer			x															ALL 1375-1	Medi-Cal Mail In First Request	Correspondence		MC 355	Medi-Cal Request for Information	
Placer																		MC App Verification Request List	MC App Verification Request List	Correspondence		MC 355	Medi-Cal Request for Information	
Santa Clara			x															SCD 2356	CalHEERS Verification Transmittal Cover Sheet	Verification request	Form is used to request verification; existing CalSAWS categories are too specific to processes not utilized at Santa Clara county. A general category is being requested	MC 355	Medi-Cal Request for Information	
Placer			x															ALL 1375-2	Medi-Cal Mail In Second Request	Correspondence		MC 355 REMINDER	MEDI-CAL REQUEST FOR INFORMATION REMINDER NOTICE	
Ventura			x															56-08-295	Medi-Cal Tuberculosis Program Physician Evaluation	Physician Evaluation for TB Program	Physician evaluation for TB Program - No Match	MC 274 TB	Medi-Cal Tuberculosis Program Application	
Santa Barbara			x															CMS 2728	MEDICAL EVIDENCE REPORT	MEDICARE ENTITLEMENT/PATIENT REGISTRATION	NEEDED FORM NOT ON TIER 1 LIST -REQUIRED	CSF XXX	Medicare Referral	
Placer																		MED53	CIN Correction in SCI	OHC/TPL/MEDS 1		PA 6079	MEDS On-Line Transaction Request Change/Modify MEDS Record	
Placer																		MED52	Req for Replacement BIC	OHC/TPL/MEDS 1		PA 6078	MEDS On-Line Transactions Request-Issuance, Add, and Term	
Alameda	x			x	x													42-33	Behavioral Health Supportive Services Initial Assessment Report	EC referral to Behavioral Health Services	Form is used in a county-specific process	ABP 1676-3 GRMH GN 6372 PA 2012	Mental Health Assessment for General Relief REQUEST FOR MENTAL HEALTH CLINICAL ASSESSMENT Referral for Mental Health Services	
Sonoma				x														HSD24	General Assistance Verification of Physical / Mental Incapacity [24]	General Assistance Verification of Physical / Mental Incapacity [24]	General Assistance	ABP 4029	Mental Health Screening Form	
Alameda					x													42-118	Subsidized Employment Program Work Readiness Workshop Hours Report	Client completed form	Form is used in a county-specific process	GN 6365	Monthly Attendance Report Form	
Merced																x		24-4269	Monthly Record of Tips Received	Income	Tool for clients to use to track their tips from employment on a daily basis. No similar form on CalSAWS list.	PA 167	Monthly Earnings Report	
Ventura																		56-03-035	Information for Reporting Tips	Sworn Statement for daily reporting of tip income.	Provided to recipients to verify daily tip income. No match	PA 167	Monthly Earnings Report	
Placer																x		ALL 569	Daily Tip Statement	Income		PA 167	Monthly Earnings Report	
San Francisco				x														CAAP 1	CAAP Monthly Earned Income and Asset Report	CAAP Monthly Earned Income and Asset Report	No available index listed in CalSAWS	PA 167	Monthly Earnings Report	
Sacramento																		CSF 34	Daily Tip Statement		used as an affidavit to track daily tips	PA 167	Monthly Earnings Report	

[illegible]

San Francisco																		CSF 31 (04/16)	Withdrawal of CAAP Application	Withdrawal of CAAP Application	There is no index for GA	CW 10 CSF XXX	Notice of Withdrawn Application Request for Discontinuance Waiver	
Santa Barbara				x														CSF 44	GR ADMIN REVIEW DECISION WITHDRAWAL	CLIENT REQUEST OF WITHDRAWAL	REQUIRED VERIFICATION	CW 10 CSF XXX	Notice of Withdrawn Application Request for Discontinuance Waiver	
Napa																	x	SSSD 2011	Waiver of Ten-Day Notice / Request for Discontinuance			CW 10 CSF XXX	Notice of Withdrawn Application Request for Discontinuance Waiver	
Napa				x														SSSD 4020	GA Withdrawal of Application			CW 10 CSF XXX	Notice of Withdrawn Application Request for Discontinuance Waiver	
Initial - Santa Cruz																		WEL1100	Request for Discontinuance	Request for Discontinuance		CW 10 CSF XXX	Notice of Withdrawn Application Request for Discontinuance Waiver	
Initial - Santa Cruz																		WEL1104	Request for Withdrawal of Application	Request for Withdrawal of Application		CW 10 CSF XXX	Notice of Withdrawn Application Request for Discontinuance Waiver	
Initial - Santa Cruz																	x	WEL1157	Waiver of 10 Day Notice	Waiver of 10 Day Notice		CW 10 CSF XXX	Notice of Withdrawn Application Request for Discontinuance Waiver	
Placer																		990N	Time on Aid Notice	TOA		CW 2189	NOTICE OF YOUR CalWORKS TIME LIMIT-42nd MONTH ON AID	
Sacramento																		CSF 33	Notice to Self-Employed Individuals		Used to notify self employed individuals, if notice was to be returned we would need it to be assigned and reviewed by EW	CSF XXX	Notice to Self-Employed Individuals	
San Diego																		24-733 HHSA (3.04)	Trustline Payment Program Change		Form used for Child Care program, No CalSAWS document type name/substitute available	CSF XXX	Notification of TrustLine Registration Status	
Riverside																		DPSS 3862	Trustline Certification	Part of TL application	customer acknowledgement of TL rules, if denied no payment is rendered	CSF XXX	Notification of TrustLine Registration Status	
Riverside																		RVCL 3298	Trustline Payment Program Change Form	CCP status details	County Specific correspondence from DPSS to CA CC R&R	CSF XXX	Notification of TrustLine Registration Status	
Tehama																		TLR 1	Trustline Registry Application	Trustline Registry Application	State Form	CSF XXX	Notification of TrustLine Registration Status	
Tehama																		TLR 508	Trustline Reg Criminal Record Statement	Trustline Reg Criminal Record Statement	State Form	CSF XXX	Notification of TrustLine Registration Status	
Tehama	x	x																TEH 792	Misuse of County Funds Letter (English/Spanish)	Misuse of County Funds Perjury Stmt	No comparable form in new system/state forms, specific to county business process	WFP&I 397	Notification of Potential Intentional Program Violation (PIPV) Claim And Grant Adjustment	
Initial - Santa Cruz	x																	WEL1002 NSDC	CalWORKs/CalFresh Overpayment Form	CalWORKs/CalFresh Overpayment Form		NA 1263	Overissuance Budget Worksheet	
San Diego																		11-57 HHSA	GR Overpayment/Underpayment From	Documentation of overpayment or underpayment and recovery	No CalSAWS document - County specific instructions	ABP 4023 QR-OP AE ABP 4023 QR-OP CE	Overpayment Agency Error Overpayment Client Error	
San Diego																		11-116 HHSA	GR Repayment Notice	Notice to customer on amount of GR aid paid that must be repaid	No CalSAWS document - County specific instructions	CSF XXX?	Overpayment/Overissuance Letter	
Riverside	x																	DPSS 3218	Important Information for Native American Indians (part of DOC 0612)	Customer declare Native American, requests for Tribal TANF	Provides information regarding Tribal TANF, contact information and the option to choose to receive benefits/information from a Tribal TANF located in Riverside County. The form is also used for the customer to authorize the sharing of information between Tribal TANF and DPSS for purposes of determining eligibility.	Is this something that is actually imaged? PA 14	PA 14-Important Notice for Native American Indians	
Initial - Kern																		KCDHS 332-Gen	Important Notice for Native American Indians			PA 14	PA 14-Important Notice for Native American Indians	
Placer																		MC 176 PI	POI -Nursing Facility Care	Income Reports/Budgets		MC 176 P I	Period of Ineligibility for Nursing Facility Level- of- Care Worksheet	
Merced	x																	24-3105	HSP Housing Search Record	housing search record completed by client	Category does not exist in CalSAWS.	CW 74	Permanent Housing Search Document	
Merced	x																	24-3106	HSP Home Hunting Checklist	Checklist provided for purpose of housing search	Category does not exist in CalSAWS.	CW 74	Permanent Housing Search Document	
Butte	x																	Bu-Ca-42B	HA-Important Information about HA program	Information regarding the HA Program	Used to inform customers of their rights and responsibility in regards to the CWA program	CW 74	Permanent Housing Search Document	
San Luis Obispo	x																	DSS HSP 12	HSP Housing Search Log.docx	Permanent housing search log	Form created for housing programs. BFH and HSP are State funded programs that SLO County has opted into.	CW 74	Permanent Housing Search Document	
Los Angeles	x																	HCM 74	HCM Housing Search Document	verification	Possible Map: CW 74	CW 74	Permanent Housing Search Document	
Sutter																		HSP7	housing search verification	verification	used to verify housing searches	CW 74	Permanent Housing Search Document	
Sacramento																		CF 2008_34C	Appointment Letter - P.O. Box 1532	QC appointment letter to customers that do not have a mailing address	This letter is used specifically for customers without a mailing address and use our county PO Box 1532 mailing. It requires a return and needs to be imaged and assigned to a QC EW	CF QC NOTICE 9	Postmaster	
Placer																		MC 263 PE	MC Application for Pregnancy	Applications/SOF/ICT		MC 209	Pregnant Women Flyer	
Los Angeles																			Primary Wage Earner Form	Establishment of Primary Wage Earner	Eligibility determination.	DCFS 6036	Principal Wage Earner Worksheet	
Santa Clara																		SCD 380	Income/Profit and Loss Statement	Income & Expense	form for clients to record and report self- employment income and profit income; existng CalSAWS documents do meet this need	CSF XXX	Profit and Loss Statement	
San Diego																		11-101 HHSA	Aid to First Pay Day	Computation of aid to first pay day	No CalSAWS document - County specific instructions	New Rec.	Program Budgets & Worksheets	
Alameda																		50-96	Supervisory Eligibility Case Review	Documentation of case review	Form is used in a county-specific process	New Rec.	Program Budgets & Worksheets	
Initial - Kern																		KCDHS 407-Gen	Review Hearing Notice Worksheet			New Rec.	Program Budgets & Worksheets	
Initial - Kern																		KCDHS 480-CU	Petition Information Worksheet			New Rec.	Program Budgets & Worksheets	

Initial - Kern																	x	KCDHS 691-Serv	Contact Data Entry Worksheet				New Rec.	Program Budgets & Worksheets	
San Bernardino																	x	ML 4846	Consolidated Omnibus Budget Reco				New Rec.	Program Budgets & Worksheets	
Santa Barbara																		W 40C	OVERPAYMENT WORKSHEET	SHOWS CALCULATION OF OVERPAYMENTS	SHOWS CALCULATION OF OVERPAYMENTS	New Rec.	Program Budgets & Worksheets		
San Diego																		24-420 HHSA (8.09)	Education and Training Verification Form		Form used for Child Care program, No CalSAWS document type name/substitute available	GN 6070	Progress Report - Education/Post-EMPL/WEX and Community Services		
Alameda																		42-142	Work Experience/Community Service Program (Participant Initiated) Need Letter	Request for client information	Form is used in a county-specific process	GN 6070	Progress Report - Education/Post-EMPL/WEX and Community Services		
San Mateo																	x	C-204	Education or Training and Attendance Progress Report	C-204 Education or Training and Attendance Progress Report	WTW- San Mateo required form. No match found from CalSAWS.	GN 6070	Progress Report - Education/Post-EMPL/WEX and Community Services		
Placer																		P-44	Community Svc Resource Request	WTW WEX		GN 6070	Progress Report - Education/Post-EMPL/WEX and Community Services		
Placer																		WEX-6	Work Exp Prog Training Specs	WTW WEX		GN 6070	Progress Report - Education/Post-EMPL/WEX and Community Services		
Placer																		WEX-7	Work Experience Program Timesheet	WTW WEX		GN 6070	Progress Report - Education/Post-EMPL/WEX and Community Services		
Alameda																	x	90-244	Verification of Drug and Alcohol Participation	GA Communication form from D&A facility to EST	Form is specific to county General Assistance program	GN 6008	Progress Report Mental Health/Substance Abuse/DV/Family Reunification		
Placer																		Substance Abuse Completion Cert	Substance Abuse Completion Cert	WTW Participation		GN 6008	Progress Report Mental Health/Substance Abuse/DV/Family Reunification		
Placer																		DHCS 0011	Proof of Acceptable Docs	Vitals		DHCS 0002	Proof of Citizenship and Identity		
Initial - Santa Cruz																		x	DHCS 0011 - English	Proof of Acceptable Citizenship or Identity Documents	Proof of Acceptable Citizenship or Identity Documents		DHCS 0002	Proof of Citizenship and Identity	
Placer																	x	MC 322	Real/Personal Prop-Supp to MC App	Applications/SOF/ICT		MC 210 PA	Property Assessment Statement of Facts		
San Diego																		11-19 HHSA	Lien Information	Information for GR customer on the lien requirements	No CalSAWS document - County specific instructions	CW 81	Property Lien		
Ventura																	x	56-08-270	Spousal Allowance Transfer Statement	Form to obtain the amount of spousal income allocation from LTC spouse	Form to obtain the amount of spousal income allocation from LTC spouse - No Match	MC 176 PA	Property Work Sheet/Assessment for Institutionalized Spouses		
San Mateo																		C-197	Foster Care Quality Control Review Sheet	C-197 Foster Care Quality Control Review Sheet	FC- San Mateo required form. No match found from CalSAWS.	Other county drawer - QA/QC	QA/QC		
Santa Clara																		SCD 2438 B	MC Case Review Continuing	QA/QC	Form is used for Quality Assurance and Quality Control; existing CalSAWS categories are too specific to processes not utilized at Santa Clara county. A general category is being requested	Other county drawer - QA/QC	QA/QC		
Santa Clara																	x	SCD 2438 C	MC Case Review Intake	QA/QC	Form is used for Quality Assurance and Quality Control; existing CalSAWS categories are too specific to processes not utilized at Santa Clara county. A general category is being requested	Other county drawer - QA/QC	QA/QC		
Placer																		QMB Referral Form	QMB Referral Form	Correspondence		MC 176 QMB-3	Qualified Medicare Beneficiart (QMB) Referral		
Placer																	x	SSA-795 (QMB)	SSA Statement of Claimant	Income		MC 176 QMB-3	Qualified Medicare Beneficiart (QMB) Referral		
San Francisco																	x	CF 37	Recertification for CalFresh Benefits		Gather information for CF Recert.	CF 37	Recertification for CalFresh benefits		
Alameda																		90-153	GA Psychological Evaluation Referral Form	GA internal communication to SW	Form is specific to county General Assistance program	PA 2012	Referral for Mental Health Services		
Placer																		MH 2A	Mental Health Referral Results	WTW Exemptions		PA 2012	Referral for Mental Health Services		
San Mateo																	x	C-559	Cal-Learn Inter-Agency Referral	C-559 Cal-Learn Inter-Agency Referral	WTW- San Mateo required form. No match found from CalSAWS.	CSF XXX CSF XXX	Referral to Activity Service Referral to Activity		
Alameda																	x	40-93	Housing Resource Center Referral	County referral form to Housing Resource Center	Form is used in a county-specific process	PA 6036	Referral to Homeless Case Manager (HCM)		
Riverside																		DPSS 2349 KG	Referral to ILP for a Kin-GAP Recipient	Request for ILP services	Provided to Kin-GAP caregiver to request ILP services for child. No comparable form.	New Rec.	Referral to Other Department		
San Bernardino																		GR 260	TAD Referral To DAAS For Socially Employable Evaluation	Referral to DAAS	Referral for services - no comparable form	New Rec.	Referral to Other Department		
Santa Clara																	x	SCD 569	Refugee Services Information Transmittal	RCA	Form is used for RCA purposes; existing CalSAWS categories are too specific to processes not utilized at Santa Clara county. A general category is being requested	RS 18	Refugee Services Information Transmittal		
Santa Clara																		x	SCD 1468	VOLAG/Sponsor	Verification request	Form is used to request verification; existing CalSAWS categories are too specific to processes not utilized at Santa Clara county. A general category is being requested	PA 203-1	Refugee/Entrant Programs: VOLAG Assistance Statement	
San Francisco																		x	801	Bank account information request and authorization		The Bank Account Authorization to Release information is used in situations where the client is unable to obtain assets verifications independently. Where the client is not able to obtain verifications, the county must attempt and assist the client in obtaining such verifications. This release of information form is specific to bank accounts.	CW 60	Release of Information - Financial Institution	
Ventura																		56-02-053	Financial Aid Release of Information	Financial Aid Release of Information	Request for release of finacial Aid information- No match	CW 60	Release of Information - Financial Institution		
Placer																	x	CW60	Bank Verification	Property/Liens		CW 60	Release of Information - Financial Institution		

									x	Form 801	Asset Distribution Verification	County Form	This form is mailed out to company to request verification regarding Asset distribution for IRS Asset Match	CW 60	Release of Information - Financial Institution	
San Francisco									x	Form 926	Bank Verification	County Form	This form is mailed out to Bank to request verification regarding bank accounts for IRS Asset Match	CW 60	Release of Information - Financial Institution	
Placer		x								MC 324	1931(b) Sneede Property	Property/Liens		CW 60	Release of Information - Financial Institution	
Sacramento										CF 1009_34F	Quality Control SHRA - Request for Rental Information	Selected QC case being reviewed and needs to verify address	This form is sent to customers requesting rental information, when returned it needs to be imaged and assigned to a QC EW to process	CF QC NOTICE 12	Rent Verification Request	
Sacramento										CF 1011_34F	Quality Control - Shared Housing Statement	Shared housing statement for QC cases	This notice is sent to customers who have a QC review, its used to identify who live with them and how much each party is responsible for paying, when returned this form should be imaged and assigned to QC EW	CF QC NOTICE 12	Rent Verification Request	
Initial - Kern	x									KCDHS 593-SCF	CalFresh Supplemental Packet			CF 303	Replacement or Supplement Affidavit/Authorization	
Los Angeles								x		DE 8720	EDD Request for Claim and Wage Info	WFP&I View and Use only	No possible map found in listing	WFP&I 345-1	Request for Certified Photocopies of UIB/DIB Checks	
Merced		x								24-4270 GA	Application Withdrawal Request	Form for GA applicant to complete	Form used by GA applicant to officially withdraw their application - Do not see similar form	CSF XXX	Request for Discontinuance Waiver	
Alameda										50-172	Social Worker Determination of Good Cause, CW and WTW Domestic Violence Waiver Request	Internal communication document	Form is used in a county-specific process	WTW 27	Request For Good Cause Determination	
Butte			x							BU CW-688	Request for Good Cause Based on Remoteness/NoTransportation	Request for Good Cause Based on Remoteness/NoTransportation	Request for Good Cause Based on Remoteness/NoTransportation	WTW 27	Request For Good Cause Determination	
San Luis Obispo								x		DSS GEN 22	Good Cause Verification Request.docx	Generic program request for verifications to determine Good Cause from DCSS	County created document used by all programs to request verification of good cause.	WTW 27 CW 2200	Request For Good Cause Determination Request for Verification	
Placer										Health Ins Correspondence	Health Ins Correspondence	OHC/TPL/MEDS 1		Verifications Virtual Print CSF XXX	Request for Insurance Information	
Placer										Health Ins Premium Pmt Verif	Health Ins Premium Pmt Verif	Deductions/Shelter Costs		Verifications CSF XXX	Request for Insurance Information	
Placer										Health Ins Verif Letter	Health Ins Verif Letter	OHC/TPL/MEDS 1		Verifications Virtual Print CSF XXX	Request for Insurance Information	
Placer										Health Insurance ID Card	Health Insurance ID Card	OHC/TPL/MEDS 1		Verifications Virtual Print CSF XXX	Request for Insurance Information	
Santa Clara							x				School Requests	School Requests	SIU - documentation of requests of child's school demographics information	WFP&I 314	Request For School Records	
Ventura										56-08-184	Request for Tax Household Information (RFTHI) Supplemental Form MC 210 ACA Income Deductions Supplement	Used as a supplement to the RFTHI to collect information about income, deductions, citizenship, etc.	Used as a supplement to the RFTHI to collect information about income, deductions, citizenship, preferred language, pregnancy, disability, LTC, household changes, and student status for 19-20 yr old - No Match	RFTHI	Request for Tax Household Information (RFTHI)	
Placer		x								MC 210 B	Supplement to SOF (Pickle)	Applications/SOF/ICT		RFTHI	Request for Tax Household Information (RFTHI)	
Placer		x								MC 210 S-E	Student Expenses-Supp to SOF	Applications/SOF/ICT		RFTHI	Request for Tax Household Information (RFTHI)	
Placer		x								MC 4604	Supp -MC/Medicare Savings App	Applications/SOF/ICT		RFTHI	Request for Tax Household Information (RFTHI)	
Initial - Santa Cruz										MC01-2014	Request for Additional Information (RFTHI)	Request for Additional Information (RFTHI)		RFTHI	Request for Tax Household Information (RFTHI)	
Initial - Santa Cruz										MC01-2014 (SP)	Request for Additional Information (RFTHI)	Request for Additional Information (RFTHI)		RFTHI	Request for Tax Household Information (RFTHI)	
Initial - Santa Cruz		x								MC01-2014 APDX	APDX Request for Additional Information (RFTHI)	APDX Request for Additional Information (RFTHI)		RFTHI	Request for Tax Household Information (RFTHI)	
Initial - Santa Cruz		x								MC01-2014 APDX	APDX Request for Additional Information (RFTHI)	APDX Request for Additional Information (RFTHI)		RFTHI	Request for Tax Household Information (RFTHI)	
Santa Clara		x								SCD 2350	Request for Tax Household Information (RFTHI)	Application	Application related documents; existing CalSAWS documents are too specific to index to. In order to meet county needs we need generic categories	RFTHI	Request for Tax Household Information (RFTHI)	
Santa Clara		x								SCD 2350 Supplemental	Request for Tax Household Information (RFTHI) Supplemental	Application	Application related documents; existing CalSAWS documents are too specific to index to. In order to meet county needs we need generic categories	RFTHI	Request for Tax Household Information (RFTHI)	
Napa										SSSD 2062	Tax Filing Information			RFTHI	Request for Tax Household Information (RFTHI)	
Tehama		x								TEH 944	Tax HH Information	Tax HH Information Form	Specific to county business process	RFTHI	Request for Tax Household Information (RFTHI)	
Sacramento										SSA App	Single Streamlined Application	Online application for Covered California	Cover California single streamlined application (SSA) interface used to submit online applications during Open Enrollment and Special Enrollment period. When application is received it should be imaged and assigned to an OA for app'reg	RFTHI MC 210 Mail In App	Request for Tax Household Information (RFTHI) MC 210 Medi-Cal Mail-In Application Request For Transitional Medi-Cal [TMC] Or Four Month Continuing Medi-Cal	
San Luis Obispo	x									DSS MC 735	Coverletter for TMC Status Report.docx	Coverletter provided with TMC QSR	County specific informing notice of TMC QSR submitting requirement	MC 325		

Merced																		24-4104	HDAP – Required Verifications	Form requesting verifications	Category does not exist in CalSAWS.	CW 2200	Request For Verification			
Merced																		24-4210GA	GA Required Verifications	List of required verifications - Current form needs to be revised	Given to GA applicant that lists what items and forms are required to be submitted in order to be approved for GA - Do not see similar form	Is this imaged? Or info only? CW 2200	Request For Verification			
Placer																		ALL 1365	Forms and Verifs Second Request	Correspondence		CW 2200	Request For Verification			
																					Form is used to request verification; existing CalSAWS categories are too specific to processes not utilized at Santa Clara county. A general category is being requested	CW 2200				
Santa Clara																		x	CW 2200 GA	Request For Verification	Verification request		CW 2200	Request For Verification		
Initial - Kern																			KCDHS 177-Gen	Eligibility & Verification Due Dates			CW 2200	Request For Verification		
Initial - Kern																		x	KCDHS 738-Gen	Generic Pending Information List			What info is on this? Is this a verification request? CW 2200	Request For Verification		
Los Angeles	x																		PA 2322	Manual Documents Needed Request		No possible map found in listing	CW 2200	Request For Verification		
Los Angeles	x																		PA 2322-A	Forms/Documents Needed from CalWORKs		No possible map found in listing	CW 2201	Request For Verification		
Sacramento																			SC 292	CMISP First Request for Information	Form specific for CMISP requests	Request for verification for the CMISP program, when returned should be imaged and assigned to MA EW	CW 2200	Request For Verification		
Sacramento																			SC 293	CMISP Second Request for Information	Form specific for CMISP requests	Request for verification for the CMISP program, when returned should be imaged and assigned to MA EW	CW 2200	Request For Verification		
Sacramento																			x	SC 84AA	Verify Personal Property Form	Request for verification on personal property	Request for verification sent to customer in regards to personal property, completed form should be imaged into case and assigned to EW for processing	CW 2200	Request For Verification	
Sacramento																			SC 948	Cover Letter Savings and Loan	Cover letter for request for verification	Cover letter sent out with request for verification	CW 2200	Request For Verification		
Santa Clara																			x	SCD 1121 FC	Eligibility Verification Checklist	Verification request	Form is used to request verification; existing CalSAWS categories are too specific to processes not utilized at Santa Clara county. A general category is being requested	CW 2200	Request For Verification	
Contra Costa							x													WTWCC 65	Welfare-To-Work Request For Verification			CW 2200	Request For Verification	
Placer																			x	ALL 184	Verification of Items	Correspondence	Is this requesting verifications from a customer or verifying what the customer has dropped off? Or verifying Customer documents? CW 2200 PA 2327	Request For Verification Receipt for Documents		
Shasta																			x	DSS 1021	Request for Copies	Customer Note	Unsure of what mapping would be appropriate, form attached	CW 2200	Request for Verifications	
Contra Costa							x													MC 158 D/W - Template/Blank Form	Application Documentation Denial/Withdrawal			MC 215	Request for Withdrawal and/or Waiver of Ten-Day Adverse Notice of Action	
San Luis Obispo	x																			DSS TCV 001	Trafficking and Crime Victim Declaration.pdf	(TCVAP) Trafficking & Crime Victim declaration form	County form created for individuals to self declare they have been a victim of human trafficking, County specific	CW 2213	Response to Request to Inspect Cash Record CalWORKs, CalFresh, TCVAP, and Refugee Programs	
Initial - Kern																				KCDHS 118-Pers	Acknowledgement of Reporting Responsibility			SAWS 2A SAR	Rights & Responsibilities & other Important Information	
Placer																				RS 36	E&T Requirements RCA	WTW Plans		SAWS 2A SAR	Rights & Responsibilities & other Important Information	
Santa Clara																			x	SCD 2385	RRR and CEC Cover Letter	Redetermination/Recertification Documents	Form is used for RRR purposes; existing CalSAWS categories are too specific to processes not utilized at Santa Clara county. A general category is being requested	SAWS 2A SAR	Rights & Responsibilities & other Important Information	
Placer																				Your Reporting Responsibilities	Your Reporting Responsibilities	Applications/SOF/ICT		SAWS 2A SAR	Rights & Responsibilities & other Important Information	
Ventura	x																			56-04-003	Important Notice Cash Aid Lump Sum Notice	Notice to guardian regarding Lump Sum reporting responsibilities	Signed by guardian at intake - No Match	CW 2218	Rights, Responsibilities and other Important Information for the CalWORKs Program	
Sacramento																				CSF 50	Student Income Verification Request	Used to request income from eligible students	Classify student financial aid/ work study verification request	CSF XXX	School Attendance & Expense Verification	
Alameda																				42-102	Required Homework/Study Time Statement	Verification form for school completion	Form is used in a county-specific process	CSF XXX	School Attendance / Enrollment Verification	
Sonoma																				HSD 892	School Attendance Record	Attendance Form	No attendance documents listed on CalSAWS Document list	CSF XXX	School Attendance / Enrollment Verification	
Initial - Kern																				KCDHS 521-Gen	School Records			CSF XXX Verifications?	School Attendance / Enrollment Verification	
Initial - Kern																				KCDHS 966-	Unit Template Scheduler			CSF XXX	School Attendance / Enrollment Verification	
Sacramento																				SC 787	Student Questionnaire (returned from client)	received from students who receive CalFresh	questionnaire sent to customers who attend school, completed form should be imaged to case file and assigned to EW for processing	CSF XXX	School Attendance / Enrollment Verification	

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Los Angeles	x																	REP DOC004	Social Security Number Disclosure (for REP CalWORKs cases)	The Social Security Number disclosure form is requested by the DPSS to assist in the administration of Refugee Employment Program and/or other employment services.	No possible map found in listing	REP 3 PA 6066	Social Security Number Disclosure Social Security Disclosure Form	
Alameda				x														90-152	Accommodation Request	GA Request for accommodation	Form is specific to county General Assistance program	PA 390	Special Need Request	
Alameda																		50-163	Referral for SSI Advocacy	Internal document for referral for SSI advocacy	Form is used in a county-specific process	SSS SSIAP	Specialized Supportive Services SSI/SSP Advocacy Program Referral	
Alameda																		50-164	SSI Advocacy Consent Form	Client permission to release info to CBO's	Form is used in a county-specific process	SSS SSIAP	Specialized Supportive Services SSI/SSP Advocacy Program Referral	
Tehama				x														GA 936	SSI/SSP Referral Letter	GA SSI/SSP Referral Letter	Specific to county business process for GA	SSS SSIAP	Specialized Supportive Services SSI/SSP Advocacy Program Referral	
Initial - Santa Cruz																		WEL4060	Referral for SSI Advocacy	Referral for SSI Advocacy		SSS SSIAP	Specialized Supportive Services SSI/SSP Advocacy Program Referral	
Santa Barbara				x														715-0	MEDI-CAL SPEND DOWN LETTER	LETTER TO CLIENT	LISTS CLIENTS ASSETS AND HOW MUCH THEY NEED TO SPEND DOWN	CSF XXX	Spend Down Declaration	
Contra Costa				x														MC 846 (10/05)	Excess Property Spenddown (10/05)			CSF XXX	Spend Down Declaration	
Placer																		Spend Down Documentation	Spend Down Documentation	Property/Liens		CSF XXX	Spend Down Declaration	
Napa																		SSSD 2064	MC Property Spend Down			CSF XXX	Spend Down Declaration	
Napa				x														SSSD 4013	GA Sponsor Repayment Agreement			ABP 1073	Sponsor's Income and Resources Report and Reimbursement Agreement	
Santa Barbara																		W 643	SPONSOR AGREEMENT	SPONSOR AGREES TO REIMBURSE COUNTY FOR GR GRANT	NEEDED FORM NOT ON TIER 1 LIST	ABP 1073	Sponsor's Income and Resources Report and Reimbursement Agreement	
Placer				x														ALL 1377	Notice of MC Eligibility Eval	Correspondence		CSF XXX	SSA Referral to Medi-Cal	
Placer																		ALL 1447	SSA Referral	Applications/SOF/ICT		CSF XXX	SSA Referral to Medi-Cal	
Santa Clara				x														SCD 2205	SSI Denial/Medi-Cal Application Coverletter	Application	Application related documents; existing CalSAWS documents are too specific to index to. In order to meet county needs we need generic categories	CSF XXX	SSA Referral to Medi-Cal	
San Diego																x		MC13	Statement of Citizenship, Alienage, and Immigration Status	Citizenship verification	Citizenship verification	MC 13	Statement of Citizenship, Alienage, and Immigration Status	
Placer																x		CSF 3	Birth/Citizenship Stmt	Vitals		MC 13 PA 853-1	Statement of Citizenship, Alienage, and Immigration Status Affidavit To Document: U.S Citizenship, Identity And Birth	
San Diego																		11-44H HHSA	GR Affidavit of Homeless Living Situation	Statement from homeless GR customer on their living situation	No CalSAWS document - County specific instructions	CW 42	Statement of Facts - Homeless Assistance	
Merced	x																	24-3108	HSP Guidelines	Form explaining program guidelines.	Capture signatures. -Category does not exist in CalSAWS.	CW 42	Statement of Facts - Homeless Assistance	
Alameda	x	x		x	x													40-58	Homeless Statement	Client Statement re: homeless status	Form is used in a county-specific process	CW 42	Statement of Facts - Homeless Assistance	
San Mateo	x																	C-749	CalWORKs Housing Support Program Participation Agreement	C-749 CalWORKs Housing Support Program Participation Agreement	WTW- San Mateo required form. No match found from CalSAWS.	CW 42	Statement of Facts - Homeless Assistance	
Placer	x																	Eviction Docs with Homeless App	Eviction Docs with Homeless App	Homeless		CW 42	Statement of Facts - Homeless Assistance	
Initial - Kern																		KCDHS 740-SSW	Bed Hold Request Letter			CW 42	Statement of Facts - Homeless Assistance	
Butte	x																	NO NUMBER	CalWORKs Housing Support Program Application	CalWORKs Housing Support Program Application	CalWORKs Housing Support Program Application	CW 42	Statement of Facts - Homeless Assistance	
Sutter																		SES FS 1	housing statement	FS rental amount	gathers information for family stabilization on past due rents, current rent, deposits due and who to make checks payable to	CW 42	Statement of Facts - Homeless Assistance	
Los Angeles																		FC 2 (Probation)	Statement of Facts Supporting Eligibility for AFDC-FC	Eligibility determination.	Eligibility determination.	FC 2	Statement of Facts Supporting Eligibility for AFDC Foster Care (FC)	
Los Angeles																		FC 2NM (Probation)	Statement of Facts Supporting Eligibility for AFDC-Extended FC	Eligibility determination.	Eligibility determination.	FC 2 NM	Statement of Facts Supporting Eligibility for AFDC-Extended Foster Care (EFC)	
Initial - Kern																		KCDHS 633-Serv	Legal Guardianship Questionnaire			KG 2	Statement of Facts Supporting Eligibility For Kinship Guardianship Assistance Payment Program	
Alameda																		No form #	KinGAP Application Summary	KG form when approving funding	Form is specific to county Foster care program	KG 2	Statement of Facts Supporting Eligibility For Kinship Guardianship Assistance Payment Program	
San Diego																		24-778 HHSA Eng (03-13)	Relationship Provider-Child		Form used for Child Care program, No CalSAWS document type name/substitute available	CSF XXX	Statement of Relationship	
Ventura	x																	56-04-062	Approved Relative Caregiver Request Form	Informing letter; contains case information	Created by CBS and sent to relative caregiver to request the completion of the ARC 1, as well as family tree and sworn statement if applicable - No Match	CSF XXX	Statement of Relationship	
Los Angeles																		CS 909	Declaration of Paternity		No possible map found in listing	CSF XXX	Statement of Relationship	
Los Angeles																		DCFS 5420	Verification of Relative Status	Relationship verification	Eligibility determination.	CSF XXX	Statement of Relationship	
Riverside																		DPSS 750 A	Affidavit of Relatedness	Affidavit explaining relatedness	Used when the customer is a caretaker relative that's not the parent of a child in the program HH.	CSF XXX	Statement of Relationship	
Riverside																		DPSS 750C	Affidavit of Relatedness	Affidavit explaining relatedness	Used to explain how the CCP is related to the child(ren) for subsidized child care.	CSF XXX	Statement of Relationship	
Shasta																		DS5 8063	Statement of Paternity	Declaration of Paternity	Unsure of what mapping would be appropriate, form attached	CSF XXX	Statement of Relationship	
Initial - Kern																		KCDHS 613-Serv	Verification of Non-Relative...			CSF XXX	Statement of Relationship	
Initial - Kern																		KCDHS 645-Serv	Verification of Non-Relative...			CSF XXX	Statement of Relationship	
Lake																		LAK 00579	Relatedness Chart	CalWorks	Lake County form-not found on list	CSF XXX	Statement of Relationship	
Napa																		SSSD 2025	Relationship Grid			CSF XXX	Statement of Relationship	
Stanislaus																		STAN GEN 400	Degrees of Relationship	Relationship Mapping to a Child	Form is used to determine degrees of relationship. There is no comparable option on the forms list provided	CSF XXX	Statement of Relationship	

San Francisco																		N/A	HSA declaration under penalty of perjury	County Form	This form is giving to client during FTF interview or mailed to client to request sworn statement regarding earned or unearned income received. Used for both IRS Asset match or BEER match.	CSF XXX PA 168	Sworn Statement Monthly Earnings Report	
Contra Costa																		ETR 01	Authorization for Education Travel Reimbursement			GN 6161	Transportation Checklist/GRAM	
Santa Barbara																		FC ETR 1	EDUCATIONAL TRAVEL REIMBURSEMENT	EDUCATIONAL TRAVEL REIMBURSEMENT	REIMBURSEMENT OF TRAVEL EXPENSE FOR FOSTER CARE	GN 6161	Transportation Checklist/GRAM	
Contra Costa																		WTWCC 001	WTW Transportation/Ancillary Authorization Worksheet			GN 6161	Transportation Checklist/GRAM	
Contra Costa																		WTWCC 31	WTW Vehicle Expense Approval Worksheet			GN 6161	Transportation Checklist/GRAM	
Contra Costa																		WTWCC 34	WTW Monthly Transportation Authorization Worksheet			GN 6161	Transportation Checklist/GRAM	
Alameda																		63-58	Drug and Alcohol Treatment Facility Departure Report	Communication for from Drug and Alcohol facility	Form is used in a county-specific process	ABP 132	Treatment Provider Progress Report	
Los Angeles																		PA 6153	GRHSCMP Two-Way Gram		No possible map found in listing	ABP 1468	Two-Way Referral Gram	
Ventura																		56-00-706	Request for Verification or Appointment Letter for CAPI or GR Programs	Request letter for CAP and GR programs	This is a version of the CW 2200 for CAPI and GR - No Match	CSF XXX	Type of Verification	
Initial - Kern																		KCDHS 729-GA	Documents That Will be Needed with an Application			CSF XXX	Type of Verification	
San Diego																		11-79 HHSA	Identification Requirements	Notification of ID requirements	No CalSAWS document - County specific instructions	DHCS 0001	U.S. Citizens and Nationals Applying for Medical Must Show Proof of Citizenship and Identity	
Initial - Kern																		KCDHS 224-Gen	MC Citizenship/ID Documentation Summary			DHCS 0001	U.S. Citizens and Nationals Applying for Medical Must Show Proof of Citizenship and Identity	
Initial - Kern																		KCDHS 406.1-MC	Import. Info. ~ MC Citizen Requirements Have Changed			DHCS 0001	U.S. Citizens and Nationals Applying for Medical Must Show Proof of Citizenship and Identity	
Initial - Kern																		KCDHS 406.2-MCCIT	Info for MC Application ~ Born in California			DHCS 0001	U.S. Citizens and Nationals Applying for Medical Must Show Proof of Citizenship and Identity	
San Luis Obispo																		DSS GA 250	GA Proof of RSDI Retirement Application.docx	Informing notice to GA applicant informing of requirement to apply for RSDI	County specific informing notice for GA applicants/recipients with due date	Since this is an informing notice, is this actually imaged? Verification? GR 6	Unemployment Insurance Benefits Referral Form	
Initial - Kern																		KCDHS 604-WTW	Referral to EDD - Employment Services			CW 2201 GR 6	Unemployment Insurance Benefits Referral Form Unemployment Insurance Benefits Referral Form	
Santa Barbara																		W 505	VENDOR PAYMENT AGREEMENT FOR HOUSING ONLY	VENDOR PAYMENT AGREEMENT FOR HOUSING ONLY	NEEDED FORM NOT ON TIER 1 LIST	PA 320	Vendor Service Order and Invoice	
San Diego																		07-69	Request for Benefit Verification	Benefit verification	Allows to provide verification to of benefits received for multiple months	CSF XXX	Verification of Benefits	
Ventura																		56-00-005	Client Benefit Inquiry Response	Form to provide to a client or third party a client's benefits (current and 1 yr history)	Sometimes clients need verification of benefits for other programs (such as subsidized housing). No match	CSF XXX	Verification of Benefits	
Ventura																		56-04-019	Kin-GAP School Verification	Contains rate information; contains case information and rate	Requested by guardian and provided for the purpose of verifying KG benefits - Possible Match CSF XXX Verification of Benefits	CSF XXX	Verification of Benefits	
Ventura																		56-04-067	Approved Relative Caregiver Income Verification	Contains rate information; contains case information and rate	Requested by relative caregiver and provided for the purpose of verifying ARC benefits - Possible Match CSF XXX Verification of Benefits	CSF XXX	Verification of Benefits	
Santa Clara																		SCD 1594	Letter Of Authorization (LOA) Request	LOA	request for a letter of authorization for MC to be issued; existing CalSAWS documents do meet this need	CSF XXX	Verification of Benefits	
Napa																		SSSD 2070	Statement of Aid Received			Is this a verification of benefits? Or aid received in another county or state? CSF XXX	Verification of Benefits	
Initial - Santa Cruz																		WEL1560	Verification of Benefits Letter	Verification of Benefits Letter		CSF XXX	Verification of Benefits	
Initial - Santa Cruz																		WEL1564	Response to HUD Verification of Public Assistance	Response to HUD Verification of Public Assistance		CSF XXX	Verification of Benefits	
Butte																		Bu287-IFD	Declaration of custodian of records	Statement from employer of customer stating that they are the custodian of record	Statement signed by employer under fraud and perjury stating that they sent payroll records and that they are the custodian of record.	CSF XXX	Verification of Employment/Earning	
Sacramento																		SC 540	Generic Verify Employment Information	Request for verification sent to customer	Request for employment verification sent to customer, upon receipt should be imaged into case file and assigned to EW	CSF XXX	Verification of Employment/Earning	
Ventura																		56-02-149	Living Arrangement Authorized Representative Responsibilities	Group Living Arrangement Authorized Representative	Describes the responsibilities for an authorized representative of a Group Living facility- No match	WFP&I 275	Verification of Living Arrangement	
San Luis Obispo																		DSS GEN 688	Spouse Moved In.docx	Contact about participant reporting that spouse has moved into home. List of requirements needed.	County form for all programs used when a spouse has moved into the home. List information needed, verifications and interviewed scheduled.	WFP&I 275	Verification of Living Arrangement	
San Luis Obispo																		DSS GEN 689	Non-Spouse Moved In.docx	Contact about participant reporting that non-spouse has moved into home. List of requirements needed.	County form for all programs used when a non-spouse has moved into the home. List information needed, verifications and interviewed scheduled.	WFP&I 275	Verification of Living Arrangement	

Placer					x										P-224	Verification of Welfare to Work Participation Hours				GN 6005A	Verification of Welfare to Work Participation Hours		
Placer															P-224-41	Monthly Activity Report	WTW Participation			GN 6005A	Verification of Welfare to Work Participation Hours		
Contra Costa					x										WPR 1	Work Participation Verification Letter (08/07)				GN 6005A	Verification of Welfare to Work Participation Hours		
Placer													x		CSF 5	Vets Benefits Verif/Referral	Income			CW 5	Veterans Benefits Verification And Referral		
Placer													x		Veterans Benefits Verif	Veterans Benefits Verif	Income			Verifications CW 5	Veterans Benefits Verification And Referral		
Initial - Santa Cruz													x		WEL1538	Military Service Questionnaire	Military Service Questionnaire			CW 5	Veterans Benefits Verification And Referral		
Tehama					x										TDW 175P	Learning Disabilities Evaluation (Spanish)	LD Evaluation - Spanish	State Form		WTW 17	Waiver of CalWORKS Learning Disabilities Screening and/or Evaluation		
Tehama					x										TEH WTW 33	Career Assessment Report	Participant's Assessment Report	Summary of assessment/career goal - no state form		WTW 2	Welfare-to-Work Activity Assignment		
Santa Clara					x										WTW 2	Welfare to Work Plan Activity Assignment	Supportive Services	Forms in this category are related to various supportive services; CalSAWS forms/categories do not meet business needs		WTW 2	Welfare-to-Work Activity Assignment		
Alameda					x										42-111	Subsidized Employment Program Participant Agreement	Subsidized Employment Program Participant Agreement	Form is used in a county-specific process		GN 6386	Welfare-To-Work Assignment Plan Acknowledgement Form		
Sutter															SE559	Supportive services arrangement	appraisal document	supportive services information		GN 6386	Welfare-To-Work Assignment Plan Acknowledgement Form		
San Luis Obispo					x										DSS GA 404	Withdrawal-Conditional of Evidentiary Hearing.docx	Participant request to withdraw hearing	County specific request to withdraw/conditional withdraw of evidentiary hearing for GA. GA specific form		DPA 315	Withdrawal/Conditional Withdrawals of Request for Hearing		
Santa Clara					x										GA 21	Withdrawal Request for GA Hearing	GA Hearing	Clients withdrawal of General Assistance Hearing request; existing CalSAWS Documents are too specific to other GA/GR programs and do not meet the needs of Santa Clara		DPA 315	Withdrawal/Conditional Withdrawals of Request for Hearing		
Contra Costa					x										GA 72	GA Executive Appeal Withdrawal Notice	This is an Appeals Form			DPA 315	Withdrawal/Conditional Withdrawals of Request for Hearing		
Los Angeles	x											x			PA 199	Cover Letter Request for Hearing Withdrawal		No possible map found in listing		DPA 315	Withdrawal/Conditional Withdrawals of Request for Hearing		
Los Angeles												x			PA 199	Withdrawal Cover Letter	ASH use only	No possible map found in listing		DPA 315	Withdrawal/Conditional Withdrawals of Request for Hearing		
Sacramento															SAC 1018_34F	Hearing Cancellation Agreement	Hearing cancellation agreement for GA&CMISP Hearings. Customer signs agreeing to cancel hearing.	Form is signed when both DHA and customer agree to cancel hearing. Form is imaged to FileNet.		DPA 315	Withdrawal/Conditional Withdrawals of Request for Hearing		
Santa Clara													x		SCD 2293	Compliance Response to Conditional Withdrawal	Appeals	For Appeals purposes - conditional withdrawal- Existing CalSAWS Documents do not meet these needs		DPA 315	Withdrawal/Conditional Withdrawals of Request for Hearing		
Placer															CSF 50	Student Aid/Work Study Req	Income			GN 6006W	Work Study Service Provider Referral Form		
Lake															LAK 00804	GR Work Project Assignment	General Relief	Lake County form-not found on list		ABP 1463	Work Welfare-To-Work Plan Activity Assignment		
Placer															ACAR Review Checklist	ACAR Review Checklist	OP/OI			New Rec.	Worker Use-Program Checklists		
Initial - Kern															KCDHS 303-Gen	Checklist for Supervisor of New/Transferred Employees				New Rec.	Worker Use-Program Checklists		
Initial - Kern															KCDHS 642-Gen	Supervisor Review				New Rec.	Worker Use-Program Checklists		
Santa Barbara															W 45	IPV REQUIRED ACTION	DETAILS CASE ACTIONS TO BE TAKEN	USED AS CHECKLIST TO MAKE SURE ALL ACTIONS ARE TAKEN		New Rec.	Worker Use-Program Checklists		
Los Angeles															QA Case Review	QA Case Review	Checklist	Quality assurance		New Rec.	Worker Use-Program Checklists		
Los Angeles	x				x										GN 2016	Identification of a Participant with Family Reservation Program Needs	Used by the DCFS Community Based Liaison to notify the DPSS Family Preservation (FP) Liaison of a CalWORKS participant who is receiving FP services or is scheduled to start services. It is also used by the FP representative to notify the FP GSW of a subsequent Multi-Disciplinary Case Planning Committee meeting.	No possible map found in listing		New Rec.	Worker/Worker Contact		
Ventura															56-00-707	NVRA Voter Preference Form (01/13)	Voter Preference Form	Used to ask a client if they would like to register to vote. This is required for applications/redeterminations/change of address		CSF XXX	Would You Like to Register to Vote?		
San Francisco															NVRA	Voter Preference Form	Form used by the county to assist clients to register to vote.	NVRA document		CSF XXX	Would You Like to Register to Vote?		
Initial - Santa Cruz													x		NVRA English	NVRA Voter Preference Form	NVRA Voter Preference Form			CSF XXX	Would You Like to Register to Vote?		
Santa Clara													x		SCD 508	Would You Like to Register to Vote?	Client Request/Agreement	This form is a client request or agreement; county business needs require a generic category; existing CalSAWS documents do contain a general request and/or agreement		CSF XXX	Would You Like to Register to Vote?		
Placer					x										WEX-6X	Sub Wage Prog Training Specs	Income			New Rec.	WTW Activities		
Santa Clara					x										SCD 2526	Intern & Earn Participant Application	Application	Application related documents; existing CalSAWS documents are too specific to index to. In order to meet county needs we need generic categories		New Rec.	WTW Agreements, Assessments, etc.		
Placer															P-18	ES General Appointment Letter	WTW Correspondence			CSF XXX	WTW Appointment Letter		
Placer					x										CSF 7	Assessment Appointment	WTW Assessments			CSF XXX	WTW Appointment Letter		
Placer					x										Business Lic/StartUp Pkt	Business Lic/StartUp Pkt	WTW Employment			GN 6053-1	GAIN Appraisal Appointment Notice		
Placer					x															New Rec.	WTW Forms		

Placer					x										Business Start Up Paperwork Packet	Business Start Up Paperwork Packet	WTW Employment		New Rec.	WTW Forms	
Sacramento															CR 269	Drug Court Contract		Needed for the case and WTW program	New Rec.	WTW Forms	
San Francisco															6105	Interview Follow Up	Provides clients with nexts steps in their application proress	This document is used at interviews to provide clients with their Rights and Responsibilities, next steps in their application process, etc.	PUB 13	Your Rights Under California Welfare Programs	
San Mateo						x									C-475	Rights & Responsibilities for Foster Care	C-475 Rights & Responsibilities for Foster Care	FC- San Mateo required form. No match found from CalSAWS.	PUB 13	Your Rights Under California Welfare Programs	
San Luis Obispo	x														DSS CF 602	Privacy Act and Disclosure.docx	Privacy Act and Disclosure acknowledgement	Applicants/Recipients read sign that they have been notified of privacy and use of provided information. County specific	PUB 13	Your Rights Under California Welfare Programs	
San Francisco	x														Form 6105	CalFresh Interview Followup		Inform customer of their responsibilities post-interview.	PUB 13	Your Rights Under California Welfare Programs	
Placer															MCSP 219	Rights and Responsibilities	Applications/SOF/ICT		PUB 13	Your Rights Under California Welfare Programs	
Initial - Santa Cruz															WEL3242	Rights and Responsibilities for Caretakers of Children Who Have Been Placed in your Home Through Foster Care	Rights and Responsibilities for Caretakers of Children Who Have Been Placed in your Home Through Foster Care		PUB 13	Your Rights Under California Welfare Programs	
San Francisco															21338	Rights and Responsibilities (CAAP)	Rights and Responsibilities (CAAP)	No available index listed in CalSAWS	PUB 13 GR 21	Your Rights Under California Welfare Programs General Relief Rights and Responsibilities	
Ventura															56-06-641	Notice for WTW 24-Month Clock Un-ticked Months	Informing notice	Notification of 24 month clock -no match	CW 2208 WTW 38	Your Welfare-To-Work (WTW) 24-Month Time Clock Welfare-to-Work 24-Month Time Clock Notice	
Placer															184-0	Request for information	Correspondence		What info is being requested?		
Tulare					x										19358 TW	Job Site Placement Discrimination/Sexual Harassment Policy	Equal Employment/Discrimination/Sexual Harassment Policy	Policy that is given to the client - to verify that they understand their rights and obligations. There is no form on the CalSAWS listing that has information close to what this form is requesting	Is this signed? Does it need to be imaged?		
Merced	x														24-3117	HSP Brochure	pamphlet overviewing HSP	Category does not exist in CalSAWS.	Is this imaged?		
Merced	x														24-3120	HSP Training and Competency Checklist	Form used to track new team member training	Category does not exist in CalSAWS.	Is this imaged? It sounds like it's used to track employee training, and not related to eligibility.		
Merced					x										24-4001	General Assistance	Brochure-GA description; eligibility and requirements	Provides client information about GA Program - Do not see similar form	Is this imaged? Or info only?		
Merced															24-4031	Physician's Statement of Presumptive Disability	Medical	No similar forms on CalSAWS list.	Verification		
Merced															24-4670	GA For Your Reporting Information	Sample Rent Receipt	Provides example of rent receipt and the information that is required in order for receipt to be acceptable - Do not see similar form.	Is this imaged? Or info only?		
Placer													x	401K Verification	401K Verification	Property/Liens		Verification			
Ventura														x	56-00-140	Policy Interpretation and Help Desk Form Request (09/16)	used by staff to submit a program question to the program analyst	form is not required for any eligibility determination, only to send program questions to the program analysts/no match to CalSAWS, no match	Is this imaged to a case or person? Sounds like clarification to a worker, not necessarily case documentation.		
Ventura														x	56-00-140A	Policy Interpretation and Help Desk Response (11/16)	used by the program analysts to provide a response to program questions	form is not required for any eligibility determination, only to send the responses to program questions submitted to the program analysts/no match to CalSAWS, no match	Is this imaged to a case or person? Sounds like clarification to a worker, not necessarily case documentation.		
Ventura															56-00-699	Case ID and Client Notice Form	form	instruct clients to identify their case # and Name when submitting documents. No match.	Is this imaged?		
Ventura															56-00-713	IEVS FTI Tracking Report (10/19)	Used internally by the IEVS PA to monitor the steps taken when an IEVS is received and to record if there is a discrepancy.	Used internally by the IEVS PA to monitor the steps taken when an IEVS is received and to record if there is a discrepancy/ No Match	Is this imaged?		
Ventura															56-00-715	Ergonomic Desk Reference Guide (10/19)	Flyer		Is this imaged?		
Ventura															56-03-340	TRAC Change Request	Request to change or add TRAC information	Used to request changes to TRAC. No match	Is changes can be made with this form?What is TRAC? What program does this fall under?		
Ventura															56-03-341	WICAR Data Request	Request for information from WICAR	Used to request information form the WICAR legacy system. No match	Is this still going to be used? Is this data even available?		
Ventura															56-04-038	Provider Maintenance Request	Internal memo, contains provider information needed to create a new provider in CalWIN	Completed by CBS and provided to BIO to request the creation of a new provider in the CalWIN system - No Match	RDB mode has its own doc types. What are they? Can we reuse them for this?		
Ventura															56-06-164	Important Notice To Employees (03/13)	employee notification	state required notification-no match	Is this imaged to a case? What is it notifying staff of?		

Ventura																		56-06-673	CIP Work Order Form (04/18)	Workorder	CIP project request-no match	What is this form used for? What is CIP?		
Ventura																		56-08-099	Physician's Statement of Presumptive Disability	Allows physician to identify specific PD condition	Provides a list of Presumptive Disability conditions for the physician to choose from if applicable to the client. No match	Verifications?		
Ventura			x															56-08-126	Craig v. Bonta Information Notice (11/16)	county informational notice for Craig v Bonta referrals. Cover Letter for packet of informational notices.	Information for Craig v. Bonta beneficiaries when the County has received a referral to evaluate for Medi-Cal. Cover letter for packet of mandatory notices (MC 219, MC 007, DHS 7077) - No Match	Is the coverletter imaged? It sounds like info for customer only.		
Ventura			x															56-08-155	Deemed Eligibility Courtesy Letter	Cover letter for Deemed Eligible beneficiaries when a request is being sent for information/verification to evaluate continued MC eligibility after age 1 or when a Healthcare application is mailed for other household members.	Cover letter for Deemed Eligible beneficiaries when a request is being sent for information/verification to evaluate continued Medi-Cal eligibility after age 1 or when a Healthcare application is mailed for other household members - No Match	What is the purpose of the cover letter? Info only to the customer? Is this imaged?		
Ventura																		56-08-283	Information About Your Health Coverage Options	Non-MAGI Cover letter	Cover letter for Non-MAGI screening packet- No Match	Is this imaged?		
San Francisco																		7069C	Families Rising Universal ROI	Families Rising Universal Release of Information; <i>separate page</i>	local Home Visiting Program - no existing index code in CalSAWS	SF Specific Special Program		
San Francisco																		7069C	Form 7069C.Families Rising Referral & Referral form - <i>including Universal ROI</i>	Families Rising Program Enrollment and Referral form - <i>including Universal ROI</i>	local Home Visiting Program - no existing index code in CalSAWS	SF Specific Special Program		
San Francisco																		7069C Addendum	Form 7069C Addendum	Families Rising Addendum	local Home Visiting Program - no existing index code in CalSAWS	SF Specific Special Program		
Contra Costa			x															ABD 602A (6/95)	ABD 602 Processing Log			What info is on this? What is the form used for?		
Placer			x															Admission Docs for LTC Facility	Admission Docs for LTC Facility	Residency		Verification		
Placer																		ALL 1315	Adding Person to Active Case	Applications/SOF/ICT		Is this a form the customer fills out? Or something staff fills out and sends somewhere else to be completed?		
Placer																	x	ALL 425	Loan Agreement	Income		Verification		
Placer																	x	All Homeless Asst NOAs/verifs	All Homeless Asst NOAs/verifs	Homeless		See "HSP and Homeless Assistance Forms" Doc Type		
Placer																	x	Bank Account Printout	Bank Account Printout	Property/Liens		Verification		
Placer																	x	Bank Statement Printouts	Bank Statement Printouts	Property/Liens		Verification		
Placer																	x	Bank Statements	Bank Statements	Property/Liens		Verification		
Placer																	x	Bankruptcy Paperwork	Bankruptcy Paperwork	Property/Liens		Verification		
Placer																	x	BIC card (if you must scan)	BIC card (if you must scan)	Vitals		Verification		
Placer																	x	Birth Cert for Absent Parent	Birth Cert for Absent Parent	Absent Parent		Verification		
Placer																	x	Birth Certificates	Birth Certificates	Vitals		Verification		
Placer																	x	Birth verifications	Birth verifications	Vitals		Verification		
Placer																		Blue Book Copies	Blue Book Copies	Property/Liens		Verification		
Placer																		Bonds	Bonds	Property/Liens		Verification		
Butte			x															BU 543	Minor Consent Medical/Counseling	Minor Consent application	For Minor Consent applications-can't find comparable form	New Rec.		
Butte			x															BU CW-41	Sheriff Department Voucher	Sheriff Department Voucher	Sheriff Department Voucher	What is this voucher for? What would the customer use it for?		
Butte																	x	BU95 A	Scenario Guide	Captures client information before intake and RE	Captures client data for reference	Is this imaged? Or for worker use only?		
Butte																		BUGA 401				Need details on this form.		
Placer																		Burial Plot Info/Verification	Burial Plot Info/Verification	Property/Liens		Verification		
Placer																		Burial Trust Information	Burial Trust Information	Property/Liens		Verification		
Placer																		Business Card	Business Card	WTW Job Readiness		Is this imaged?		
Placer																		Business Card-proof of job search	Business Card-proof of job search	WTW Participation		Verification		
San Mateo			x															C-731	Every Woman Counts	C-731 (Eng) Every Woman Counts	MC- San Mateo required form. No match found from CalSAWS.	Is this imaged? Sounds like flyer give to customer only.		
San Mateo			x															C-742	Conlan Reimbursement Flyer	C-742 Conlan Reimbursement Flyer	MC- San Mateo required form. No match found from CalSAWS.	Is this imaged? Sounds like flyer give to customer only.		
San Mateo			x															C-756	CalFresh Expedited Services Information	C-756 (Eng) CalFresh Expedited Services Information	CF- San Mateo required form. No match found from CalSAWS.	Is this imaged? Sounds like flyer give to customer only.		

				x													
San Mateo				x							C-761	BACC Transmittal	C-761 Bay Area CAPI Corsotium 56C Transmittal	CAPi- San Mateo required form. No match found from CalSAWS.	What information is in this? What is this recording? Is this imaged?		
San Mateo			x								C-774	15 Percent Informing Notice	C-774 15 Percent Informing Notice	CF- San Mateo required form. No match found from CalSAWS.	What info is on this?		
Contra Costa											CA 342	Stepparent/Senior Parent/ineligible Alien Parent Worksheet			What program is this form for? What content it on it? What is it's purpose?		
Placer											CalJOBS Verification/Printout	CalJOBS Verification/Printout	Disability/Work Reg		Verification		
Placer											CalJOBS Work Reg Verif/Printout	CalJOBS Work Reg Verif/Printout	Disability/Work Reg		Verification		
Placer											Car Insurance Bill	Car Insurance Bill	Property/Liens		Verification		
Placer											Car Insurance Identification Card	Car Insurance Identification Card	Property/Liens		Verification		
Placer											CASAS	CASAS	WTW Job Readiness		What information is in this? Is this imaged?		
Initial - Santa Cruz											CCAH Aid Codes	CCAH Aid Codes	CCAH Aid Codes		What information is in this? Is this imaged?		
Tehama		x				x	x				CCP 8	CalWORKS Stage One Child Care Authorization Form	CC Stage 1 Authorization	State Form	Added with SCR 209488		
Stanislaus		x									CCP 8 State Form	CALWORKS STAGE ONE CHILD CARE AUTHORIZATION FORMS	Authorization to receive paid child care for child care provider selected	Authorization to pay selected child care provider. This Form not Found on Forms List	Added with SCR 209489		
San Francisco										x	CDS 525-CalWIN (04/03)	Rescind - All Programs	Rescind - All Programs	There is no index for GA			
Placer											Cert of Completion - Various	Cert of Completion - Various	WTW Participation		Verification		
Placer											Cert of Completion - Job Readiness	Cert of Completion -Job Readiness	WTW Job Readiness		Verification		
Sacramento											CF 1002_34F	Applicant Declines ES Face-to-Face	Customer wishes to decline scheduled FTF appt and schedule a phone appt instead	Needed as verification for the case that the customer was provided a FTF appointment			
Placer											Child Support Payment Verif	Child Support Payment Verif	Deductions/Shelter Costs		Verification		
Placer		x				x	x				Class Schedules	Class Schedules	School & Immunizations		Verification		
Placer						x					Class Schedules (if in WTW file)	Class Schedules (if in WTW file)	WTW School/VTR		Verification		
Sacramento											Completion Cert	Completion Certificate Substance Abuse Completion Certificate	Verification received from customer	Verification received from customer regarding substance abuse completion, upon receipt should be imaged into case file and assigned to EW for processing	Verifications		
Placer											Copy of Adoptions Paperwork	Copy of Adoptions Paperwork	Vitals		Verification		
Placer											Court Order - Child Custody	Court Order - Child Custody	Vitals		Verification		
Placer											Court Order - Marriage Status	Court Order - Marriage Status	Vitals		Verification		
Initial - Santa Cruz			x								CSC 91 EN	Insurance Affordability Programs Request for Additional Information	Insurance Affordability Programs Request for Additional Information				
Riverside							x				CSD 1511	Request for CWS/CMS Data Correction	Request to change information in CWS/CMS	Used by the ET to request Services update/correct information in CWS/CMS. No comparable form.	New Rec.		
Riverside							x				CSD 3712	Information Regarding Social Security Benefits for Children Placed in Foster Care	Internal correspondence form.	Used to correspond with Foster Care liaison when child has SSA income. No comparable form.	Is this something that is actually imaged?		
Placer											CSF 1033	EITC Assistance Flyer	Correspondence		Is this imaged?		
Placer											CSF 1099	EITC Assistance Flyer	Correspondence		Is this imaged?		
Placer										x	CSF 19	Dependent Care Receipt	Deductions/Shelter Costs		Verification		
Sacramento											CSF 19	Dependent Care Receipt		Needed for CalWORKs case	Verification		
Sacramento											CSF 24	Medical Report Verification of Physical-Mental incapacity	Medical Report Verification of Physical/Mental Incapacity	Needed for the case separate from the CW 61	Verification		
Sacramento											CUTE or CFDA Documents	CUTE or CFDA Documents		Do not image CUTE or CFDA documents	If it's not imaged should it be on this list?		
Santa Barbara		x									CW 2223	DEMOGRAPHIC QUESTIONNAIRE	CW REFUGEE ASSISTANCE INFORMATION	NEEDED STATE FORM NOT ON TIER 1 LIST USED IN ELIGIBILITY DETERMINATION	SCR CA-205612 to implement form		
Placer		x									CW 2223	Demographic Questionnaire for CalWORKs	Vitals		SCR CA-205612 to implement form		
Placer		x									CW 2224	Home Visit Opt-In	WTW Supportive Services		SCR CA-208265 to implement form		
Contra Costa						x					CW 61 Placeholder	CW 61 Placeholder			What info is on this? What is the form used for?		
Initial - Santa Cruz		x	x								CW2223E	Demographic Questionnaire for Calworks, RCA, ECA, TCVPAP and Calfresh Programs	Demographic Questionnaire for Calworks, RCA, ECA, TCVPAP and Calfresh Programs		SCR CA-205612 to implement form What information is on this form? What is it's purpose?		
Los Angeles											DCFS 1758	Child Support	Child support	Eligibility determination.			
Los Angeles											DCFS 280	Technical Assistance Action Request	CSW request form	Documented changes/additions to case.	New Rec.	Foster Care Forms	Social Worker Internal Communication

Initial - Kern																	KCDHS 194-Gen	Kern County Review Sheet				What information is on this form? Is it imaged		
Initial - Kern																	KCDHS 196-Gen	Random Drug Testing				Verifications?		
Initial - Kern																	KCDHS 1-Reg	CPS Folder Request				Is this imaged?		
Initial - Kern																	KCDHS 203.1-Reg	Split Case Folder				Is this imaged?		
Initial - Kern																	KCDHS 203-Reg	Instructions to Registrar				What info is on this? Is this to verify birth certificate?		
Initial - Kern																	KCDHS 204-Gen	Medi-Cal & FS Program Brochure				Is this imaged?		
Initial - Kern																	KCDHS 206-HG	Heart Gallery Brochure				Is this imaged?		
Initial - Kern																	KCDHS 207-HG	Heart Gallery Location Handout				Is this imaged?		
Initial - Kern																	KCDHS 208-PHN	Public Health Nurse (CalWORKs) Brochure				Is this imaged?		
Initial - Kern																	KCDHS 209.1-AFDC	Messenger Routing Slip (Cash Grant)						
Initial - Kern																	KCDHS 209.2-AFDC	Messenger Routing Slip (Cash Denied)						
Initial - Kern																	KCDHS 209.4-Gen	Messenger Routing Slip						
Initial - Kern																	KCDHS 209-Gen	Messenger Routing Slip						
Initial - Kern																x	KCDHS 211-Pers	Employee Self Identification				Is this used for customers or staff?		
Initial - Kern																	KCDHS 212-HG	Heart Gallery Adoption Facts Handout				Is this imaged?		
Initial - Kern																	KCDHS 213-HG	Heart Gallery Informational Contact Card				Is this imaged?		
Initial - Kern																	KCDHS 215-HG	Heart Gallery Info Brochure				Is this imaged?		
Initial - Kern																	KCDHS 216-Gen	Program for Children in Foster Care Brochure				Is this imaged?		
Initial - Kern																x	KCDHS 217-Gen	CalWORKs Welfare to Work Brochure				Is this imaged?		
Initial - Kern																	KCDHS 218-HG	Heart Gallery Table Top Display				Is this imaged?		
Initial - Kern																	KCDHS 226-LIC	Letter Requiring Fingerprints & TB Tests						
Initial - Kern																x	KCDHS 232-Pers	Safety Rules Booklet Receipt				Is this used for customers or staff?		
Initial - Kern																x	KCDHS 233-Pers	County Vehicle Dispatch Policy & Procedures...				Is this used for customers or staff?		
Initial - Kern																	KCDHS 237-SIU	Teletype				What info is on this?		
Initial - Kern																x	KCDHS 242-CF	5 Point CF Flyer (CalFresh)				Is this imaged?		
Initial - Kern																x	KCDHS 243-CF	General SSI/SSP CF Flyer				Is this imaged?		
Initial - Kern																x	KCDHS 245-CF	SSI/SSP CF Pass It On Card				Is this imaged?		
Initial - Kern																	KCDHS 247-Reg	Borrowed Case Form				What is this form?		
Initial - Kern																x	KCDHS 252-Pers	Automobile Insurance Memo				Is this used for customers or staff?		
Initial - Kern																x	KCDHS 255-Pers	Interview Guidelines (Traits)				Is this used for customers or staff?		
Initial - Kern																	KCDHS 256B-SDev	Trainers Report				Is this tracking training for Staff? For customers?		
Initial - Kern																	KCDHS 256-SDev	Staff Training Report				Is this imaged?		
Initial - Kern																x	KCDHS 257-Pers	County Vehicle Policy				Is this used for customers or staff?		
Initial - Kern																	KCDHS 260-Gen	Volunteer Opportunities Brochure				Is this imaged?		
Initial - Kern																	KCDHS 263-Gen	Safety Plan (Pages 1 & 2)				What program is this for?		
Initial - Kern																	KCDHS 270.1-MN	Business Card				Is this imaged?		
Initial - Kern																	KCDHS 270-Gen	Eligibility Worker Business Card				Is this imaged?		
Initial - Kern																	KCDHS 274.1-Gen	Vehicle Check-Out Record				Is this for customers or staff?		
Initial - Kern																	KCDHS 274-Gen	Stop & Think				What info is on this?		
Initial - Kern																	KCDHS 276-Gen	Important Application Information				What info is on this?		
Initial - Kern																	KCDHS 287.1-Gen	District Health Care Options Presentations				Is this imaged?		
Initial - Kern																	KCDHS 287-Gen	Important Medi-Cal Information				What info is on this?		
Initial - Kern																	KCDHS 289-Gen	Health Care Referral Archive Sheet				Is this imaged?		
Initial - Kern																x	KCDHS 294.1-Pers	Rate of Accrual of Sick Leave				Is this used for customers or staff?		
Initial - Kern																x	KCDHS 294-Pers	Rate of Accrual of Vacation				Is this used for customers or staff?		
Initial - Kern																x	KCDHS 295-Pers	Conflict of Interest				Is this used for customers or staff?		
Initial - Kern																x	KCDHS 296-Pers	Sexual Harassment Policy				Is this imaged?		
Initial - Kern																x	KCDHS 298-Pers	New Employee Checklist				Is this used for customers or staff?		
Initial - Kern																x	KCDHS 302-Pers	Authorization to Acknowledge Signature				Is this used for customers or staff?		
Initial - Kern																	KCDHS 307-YES	YES Program -- Did You Know?				What info is on this?		
Initial - Kern																	KCDHS 309-Gen	Time To Network				Is this an agreement? Or a notice?		
Initial - Kern																	KCDHS 311-Gen	Helpful Tips Form				Is this imaged?		
Initial - Kern																	KCDHS 312-Gen	Online Tips				What info is on this?		
Initial - Kern																	KCDHS 313-CU	Certified Mail Return Receipt Requested				Is this imaged?		
Initial - Kern																	KCDHS 315.1-Gen	Storeroom Request Form				Is this imaged?		

Initial - Kern																KCDHS 315.81-JC	Jamison Center to Caretaker					What info is on this?		
Initial - Kern																KCDHS 315-Gen	Maintenance Request Form					Is this imaged?		
Initial - Kern																KCDHS 316-Gen	Request for Purchase					Is this imaged?		
Initial - Kern																KCDHS 317-Pers	Employee Resp. for Leave of Absence					Is this imaged? Is this form completed for a county employee? Or an eval of something else?		
Initial - Kern				x												KCDHS 318-Gen	Professional Resume					Is this imaged?		
Initial - Kern																KCDHS 31-Gen	Important Message					What info is on this?		
Initial - Kern																KCDHS 321-Gen	Functional					What info is on this?		
Initial - Kern															x	KCDHS 322-Gen	References					What info is on this?		
Initial - Kern																KCDHS 323-Gen	Sample Resume					Is this imaged?		
Initial - Kern																KCDHS 325-Gen	Sample Cover Letter					Is this imaged?		
Initial - Kern																KCDHS 326-Gen	Emailing Your Resume					Is this imaged?		
Initial - Kern				x												KCDHS 327-Gen	Professional Attire					Is this imaged?		
Initial - Kern																KCDHS 328-Gen	Incident Report					What type of incident? In office? At a customer job site?		
Initial - Kern																KCDHS 329-Gen	Dress To Impress							
Initial - Kern																KCDHS 32-Gen	Pll Sweep					What info is on this?		
Initial - Kern																KCDHS 330-Gen	What Do Employers Really Want?					Is this imaged?		
Initial - Kern																KCDHS 331-Gen	Taking Control Of The Interview					Is this imaged?		
Initial - Kern																KCDHS 334-Gen	What Are Your Greatest Strengths?					Is this imaged?		
Initial - Kern															x	KCDHS 335-Gen	60 Second Commercial					Is this imaged?		
Initial - Kern																KCDHS 336-Gen	Educational Rights for Foster Parents					Is this imaged?		
Initial - Kern																KCDHS 337-Gen	Two Minute Pitch					What's on this form?		
Initial - Kern																KCDHS 340-FC	158 & Renewal Control Log					What info is on this?		
Initial - Kern																KCDHS 347-Gen	Resource Directory Service Referral Form					What info is on this?		
Initial - Kern																KCDHS 348-Gen	Domestic Abuse Services and Information					Is this imaged?		
Initial - Kern																KCDHS 349-Gen	Resource Directory					What info is on this?		
Initial - Kern																KCDHS 350-Gen	Answers That Stand Out					What info is on this?		
Initial - Kern															x	KCDHS 351-Pers	Helpful Phone Numbers					Is this used for customers or staff?		
Initial - Kern																KCDHS 355-Gen	You Hold The Key					What info is on this?		
Initial - Kern																KCDHS 356-Serv	Transporting Our Littlest Babies							
Initial - Kern																KCDHS 360-Pers	Cell Phone Policy and Procedures					Is this used for customers or staff?		
Initial - Kern																KCDHS 361-Gen	EASE Brochure					Is this imaged?		
Initial - Kern																KCDHS 36-Pers	Report of Safety Hazard					Is this used for customers or staff?		
Initial - Kern																KCDHS 377-Gen	Family to Family Brochure					Is this imaged?		
Initial - Kern																KCDHS 378-YES	YES Brochure					Is this imaged?		
Initial - Kern																KCDHS 381-Gen	Differential Response Brochure					Is this imaged?		
Initial - Kern																KCDHS 384-Gen	Healthy Kids Kern County Hardship Fund Application							
Initial - Kern																KCDHS 387-JC	Medication Receipt/Instructions					Verification		
Initial - Kern																KCDHS 3-Gen	You Have Rights...					What info is on this?		
Initial - Kern																KCDHS 405-Gen	Child Abuse Reporting Brochure					Is this imaged?		
Initial - Kern																KCDHS 410-Gen	CDF Destroyed 1/4 sheet					What information is in this? Is this imaged?		
Initial - Kern																KCDHS 413-Gen	Notice of Child Abuse Central Index Listing					What info is on this?		
Initial - Kern																KCDHS 416-Gen	Workstation Ergonomic Evaluation					Is this imaged?		
Initial - Kern															x	KCDHS 419.3-FP	Frequently Asked Questions About Foster Parenting Brochure					Is this imaged?		
Initial - Kern																KCDHS 419-FC	Questions & Answers for New Caregivers Brochure					Is this imaged?		
Initial - Kern																KCDHS 41-Gen	Supervisor Meeting Notes (Tressa Hooks)					Is this imaged to a case? What is it used for?		
Initial - Kern															x	KCDHS 420.1-PHN	Foster Care Public Health Nursing Brochure					Is this imaged?		
Initial - Kern																KCDHS 420-FHN	Emergency Response Public Health Nurses Brochure					Is this imaged?		
Initial - Kern																KCDHS 422-SOC	SSW Recruitment Brochure					Is this imaged?		
Initial - Kern																KCDHS 42-Gen	Visitation Brochure					Is this imaged?		
Initial - Kern																KCDHS 431-Gen	V.V.P.					What is this form?		
Initial - Kern																KCDHS 434-F2F	Family to Family Brochure					Is this imaged?		
Initial - Kern																KCDHS 435-GA	GA Brochure					Is this imaged?		
Initial - Kern																KCDHS 454-Gen	Generic Letter to Client Re: 694					What info is on this?		
Initial - Kern																KCDHS 456-JC	Jamison Center Visitor Register					What info is on this?		
Initial - Kern																KCDHS 457-HG	FAQ Brochure					Is this imaged?		
Initial - Kern																KCDHS 459-CL	Cal Learn Computer Workshop Brochure					Is this imaged?		
Initial - Kern																KCDHS 463-JC	Runaway Notification Letter							
Initial - Kern																KCDHS 464-IVR	IVR System Flyer					Is this imaged?		
Initial - Kern																KCDHS 465-HCR	Health Care Reform Flyer					Is this imaged?		
Initial - Kern				x												KCDHS 466-HCR	Health Care Reform Contact Card							

Initial - Kern			x												KCDHS 468-HCR	Health Care Reform Coverage for All Poster			Is this imaged?		
Initial - Kern															KCDHS 469-Gen	Immunization Records			Verification		
Initial - Kern															KCDHS 474-Gen	Parent Leadership Task Force Brochure			Is this imaged?		
Initial - Kern															KCDHS 481-Gen	Community Resource Page					
Initial - Kern															KCDHS 484-CG	Cal Grad Brochure			Is this imaged?		
Initial - Kern														x	KCDHS 485-Pers	Receipt of Employee Handbook			Is this used for customers or staff?		
Initial - Kern														x	KCDHS 486-Pers	Computer Policy Statement			Is this used for customers or staff?		
Initial - Kern															KCDHS 487-Gen	Call Center Brochure			Is this imaged?		
Initial - Kern															KCDHS 488-Gen	When a Child Dies in Out-of-Home Care Brochure			Is this imaged?		
Initial - Kern															KCDHS 498-Gen	DHS Family Planning Resources Guide			Is this imaged?		
Initial - Kern															KCDHS 501-MC	Important Medi-Cal Information			What info is on this?		
Initial - Kern															KCDHS 506-CWS	Child Information			Other county drawer - CWS		
Initial - Kern															KCDHS 507-Gen	Set Up Your C 4 Yourself Account			Is this imaged?		
Initial - Kern															KCDHS 516-JC	Jamison Center Intake Information Sheet			What info is on this?		
Initial - Kern														x	KCDHS 525-Gen	Records Destruction Certification Memo			Is this imaged?		
Initial - Kern															KCDHS 536-JC	Jamison Special Incident Report			What info is on this?		
Initial - Kern															KCDHS 545-Gen	Relative Assessment Brochure			Is this imaged?		
Initial - Kern															KCDHS 549-Gen	Important Info for Caregivers			What info is on this?		
Initial - Kern															KCDHS 54B-Reg	Boxing Card			What is this form?		
Initial - Kern															KCDHS 570-Gen	App/Re Packet Order Form			Is this to order more of the paper applications themselves?		
Initial - Kern	x														KCDHS 598-SCW	CalWORKs Supplemental Packet			Is this for intake? Or for specific information?		
Initial - Kern															KCDHS 610-Serv	Child's Personal Rights					
Initial - Kern															KCDHS 612-Serv	Table of Consanguinity			What info is on this?		
Initial - Kern															KCDHS 624-SDev	Request for Training from Staff Development			Is this imaged?		
Initial - Kern															KCDHS 626-ER	ER Fund Budget					
Initial - Kern															KCDHS 627-Gen	Paging Number for Lobby Clients			Is this imaged?		
Initial - Kern															KCDHS 629-RFA	Resource Family Friendly Business - Brochure			Is this imaged?		
Initial - Kern															KCDHS 643-Serv	Helpful Info. For Relative & Extended Family Members			Is this imaged?		
Initial - Kern															KCDHS 644-Gen	Children's Safety Issues Brochure			Is this imaged?		
Initial - Kern															KCDHS 650-Serv	Deficiency Notification...					
Initial - Kern															KCDHS 655-Gen	Emergency Evacuation Plan			Is this imaged?		
Initial - Kern						x									KCDHS 656-LIC	Foster Family Licensing Brochure			Is this imaged?		
Initial - Kern															KCDHS 664-Gen	Grievance Review Procedure			Internal form? Not case related?		
Initial - Kern															KCDHS 668-Gen	Safely Surrender Baby Brochure			Is this imaged?		
Initial - Kern															KCDHS 677-Gen	Parenting Tips (14 different color flyers) .1 through .13			Is this imaged?		
Initial - Kern															KCDHS 679-Gen	Special Immigrant Status					
Initial - Kern															KCDHS 67-Gen	Building Evacuation Map			Is this imaged?		
Initial - Kern															KCDHS 693-SOC	Family Decision Meeting Brochure			Is this imaged?		
Initial - Kern														x	KCDHS 706-Gen	Application – Request Packet Order Form			Is this to order more of the paper applications themselves?		
Initial - Kern						x									KCDHS 712-JC	Emergency Foster Home Program Brochure			Is this imaged?		
Initial - Kern															KCDHS 718-Gen	How to Apply C4 Yourself Handout			Is this imaged?		
Initial - Kern															KCDHS 724-Gen	Successful Application Stipend (SAS)					
Initial - Kern															KCDHS 765-Gen	Request for Analysis			What info is on this?		
Initial - Kern															KCDHS 766-Gen	Toxicology Client Card			Is this verification? Authorization for release of info?		
Initial - Kern														x	KCDHS 768-Pers	Confidentiality Policy			Is this used for customers or staff?		
Initial - Kern															KCDHS 793-Lic	Child Abuse Reporting Requirements					
Initial - Kern															KCDHS 796-Gen	Building Evacuation Form			Is this imaged?		
Initial - Kern															KCDHS 801-Gen	Choices Transitional Housing Program Brochure			Is this imaged?		
Initial - Kern															KCDHS 802-Gen	Building Blocks Brochure			Is this imaged?		
Initial - Kern															KCDHS 804-	C4 Yourself Mobile App			Is this imaged?		
Initial - Kern															KCDHS 809-Gen	Need to Apply for Assistance Flyer			Is this imaged?		
Initial - Kern															KCDHS 818-Admin	Emergency Information Card			Is this imaged?		
Initial - Kern															KCDHS 831-HG	Heart Gallery Handout			Is this imaged?		
Initial - Kern															KCDHS 833-Gen	Safely Surrendered Newborns – Order Sheet			Is this imaged?		
Initial - Kern															KCDHS 834-RFA	Important Info for Families Considering Placement of a Child			What info is on this?		

Initial - Kern																x	KCDHS 848-Gen	Read Me -- Notice of Computer Systems					Is this imaged?		
Initial - Kern																	KCDHS 84-KF	Commitments for Parents							
Initial - Kern																	KCDHS 857-JC	Letter Re: Donated Items Value					Verificationso?		
Initial - Kern																	KCDHS 85-KF	Children Learn Best...							
Initial - Kern																	KCDHS 863-DV	Signs of an Abusive Relationship							
Initial - Kern																	KCDHS 864-DV	Effects of Domestic Violence on Children							
Initial - Kern																	x	KCDHS 880-Pers	Notice of Mileage Authorization...				Is this used for customers or staff?		
Initial - Kern																	x	KCDHS 881-Pers	Notice if Automobile Insurance Expiration				Is this used for customers or staff?		
Initial - Kern																	KCDHS 886-HT	Human Trafficking Brochure				Is this imaged?			
Initial - Kern																	KCDHS 921-Maint	Request for Service from Facilities Management				Is this imaged?			
Initial - Kern																	KCDHS 930-Gen	Healthy Choices Brochure (SNAP)				Is this imaged?			
Initial - Kern																	KCDHS 937-Gen	Early Intervention Services Brochure				Is this imaged?			
Initial - Kern																	KCDHS 939-Gen	Child and Family Team Meetings							
Initial - Kern																	KCDHS 945-FC	5 Steps Toward Beginning Adoption/FFH				Is this imaged?			
Initial - Kern				x													KCDHS 953-MC	Free Health Insurance -- 3-up card							
Initial - Kern																	KCDHS 954-MC	You Have Applied for Medi-Cal, Now What's Next Flyer				Is this imaged?			
Initial - Kern																	KCDHS 955-MC	Need H.R. Insurance Appointment Card -- 4-up card							
Initial - Kern																	KCDHS 956-MC	Need H.R. Insurance Flyer				Is this imaged?			
Initial - Kern																	KCDHS 979-FRA	Families Formed with Love				What is on this?			
Initial - Kern																	KCDHS 372-Gen	I Speak Cards				Is this imaged?			
Placer																	Kelley Blue Book Copies	Kelley Blue Book Copies	Property/Liens			Verification			
Lake				x													LAK 00809 & LAK00810	Purchase order	General Relief		Lake County form-not found on list	What is that purchasing? Textbooks? Clothes? County forms?			
Lake					x												LAK01489	Comprehensive discussion	WTW		Lake County form-not found on list	Is this like a case review sheet? Or an interview checklist?			
Placer					x												Landlord House/Apt Rental Stmt	Landlord House/Apt Rental Stmt	Deductions/Shelter Costs			Verification			
Placer					x												Learning Style Preference Form	Learning Style Preference Form	WTW Assessments			Verification			
Placer																x	Legal Perm Resident Alien Card	Legal Perm Resident Alien Card	Vitals			Verification			
Placer	x																Los Rios CW Aid Verif Form	Los Rios CW Aid Verif Form	Correspondence			Verification			
Placer																	Master Application	Master Application	WTW Job Readiness			Assuming application submitted by participants to jobs. Verifications			
Placer																	MC 171	MC LTC Admission/Discharge Notice	Residency			Since this form is completed by the facility and sent to the county office for records, can it be scanned as a Verification?			
Placer																	MC 180	Elig Ltr of Authorization	OHC/TPL/MEDS 1			What is being authorized? An authorized rep? Benefit authorization?			
Initial - Santa Cruz	x																MC 338 G	MC 250 PERCENT WORKING DISABLED DENIAL NOA	MC 250 PERCENT WORKING DISABLED DENIAL NOA			SCR CA-20338 to add			
Initial - Santa Cruz	x																MC 338 J	MC 250 PERCENT WORKING DISABLED DISCONTINUANCE NOA	MC 250 PERCENT WORKING DISABLED DISCONTINUANCE NOA			SCR CA-20338 to add			
San Francisco				x													MC 381	Cancellation or Change to a Medic-Cal Authorized Representative Appointment		Inform of AR cancellation/change		SCR CA-206898 to add form			
San Francisco				x													MC 383	Appointment of Authorized Representative (Organization)		Establish Auth Rep for MC		SCR CA-206898 to add form			
San Francisco																	MC 604 MDV	Doctor's Verification for Home and Community Based Services Under Spousal Impoverishment Provisions		Verify that customer is in need of HCBS waiver		SCR CA-203671 to add form			
Contra Costa				x													MC 821 (11/06)	Incomplete MC 845 Follow-Up				What info is on this? What is the form used for?			
San Francisco																	MC380	Notice of Authorized Representative		Inform of AR appointment		SCR CA-206898 to add form			
Contra Costa				x													MCC 90 (5/17)	Medi-Cal Courtesy Letter				What info is on this? What is the form used for?			

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Placer					x										p-55	Volunteer Student E&T Information	WTW School/VTR			Is this imaged?		
Placer															P-57	Request to Traffic Court	WTW Referrals			Is this imaged?		
Placer															P-61	Student Ed Training Plan	WTW School/VTR			Is this imaged?		
Placer															P-65Q	Remoteness Questionnaire	WTW Correspondence	Rarely used filer		Is this imaged?		
Placer															P-75	Voucher Request	WTW Supportive Services			What type of voucher is this requesting? Bus pass? Clothing? Something else?		
Los Angeles					x										PA 1325	Record of Eligibility Activity	Log used to manually document all actions taken on MC 180 issuance for beneficiaries who do not have a case with the County (i.e., SSI/SSP Recipients).	No possible map found in listing		If the customer does not have a case with the county, will this be imaged into CalSAWS?		
Los Angeles	x														PA 175	Child Support Guide		No possible map found in listing		Is this imaged? It the guide only given to customers as FYI Only? Is there an acknowledgement that's signed?		
Los Angeles	x														PA 355	Request for information		No possible map found in listing		Request for what information and from who?		
Los Angeles	x														PA 4043	DPSS CalWORKS Housing Programs		No possible map found in listing		This is a brochure. Is it imaged? New Rec.		
Los Angeles													x		PA 4046	New Rules for U.S. Citizens		No possible map found in listing		Rules for what program? Is this similar to Right and responsibilities? Is it signed?		
Los Angeles													x		PA 5801	Exchange of Information Lettergram		No possible map found in listing		What information is being exchanged? What programs?		
Contra Costa					x										PDO 4	Contra Costa Clean Slate Brochure				Is this imaged?		
Placer															Permanent Resident Alien Card	Permanent Resident Alien Card	Vitals			Verification		
Placer															Placer CW Case Quick Ref - WTW	Placer CW Case Quick Ref - WTW	WTW Intake/Ore		What info is on this? Is this imaged?			
Placer															Police Report	Police Report	WTW Exemptions		Verification			
Placer															Proof of Insurance	Proof of Insurance	WTW Trans & Mileage		Verification			
Placer															Receipt for Books	Receipt for Books	WTW Supportive Services		Verification			
Placer															Receipts for Self Employment	Receipts for Self Employment	Income		Verification			
Placer															Receipts-support services - WTW	Receipts-support services - WTW	WTW Supportive Services		Verification			
Placer															Rental Agreement	Rental Agreement	Deductions/Shelter Costs		Verification			
Los Angeles	x														REP DOC 007	Certification Letter From ORR	Certification Letter from ORR.	No possible map found in listing		What is on this form? Is this used as verification for something?		
Los Angeles	x														REP DOC002	Older Refugee Discretionary Program (ORDG) Request for Services Form	Request for Services to Older Refugees (SOR).	No possible map found in listing		If this is requesting something, is it imaged?		
Placer															Report Card	Report Card	School & Immunizations		Verification			
Placer															Request for Live Scan	Request for Live Scan	WTW Employment		Verification			
Placer															Request for Reconsider - SSA	Request for Reconsider - SSA	Income		Verification			
Placer															Resident Alien Card	Resident Alien Card	Vitals		Verification			
Placer															Restraining Order	Restraining Order	Absent Parent		Verification			
Placer															Revocable Trust	Revocable Trust	Property/Liens		Verifications			
Los Angeles															RFA 05A	Resource Family Approval Certificate	Certificate of home approval	Eligibility determination.	New Rec.	Foster Care Forms	Placement Approval or Change	
Placer															Room Rental Forms	Room Rental Forms	Income		Verification			
Riverside					x										RVCL 3579	Child Care Provider Rate Information	CC provider details	Staff send to RDB maintainer to update resource details		RDB mode has its own doc types. What are they? Can we reuse them for this?		
Initial - Santa Cruz															Sample	Sample Affidavit for Hurricane Maria Evacuees	Sample Affidavit for Hurricane Maria Evacuees			Is this imaged?		
Placer													x		SAVE	Alien Verification	IEVS/SAVE			Verification		
Sacramento															SC 362	Good News for California Families Receiving Food Stamps	Brochure to customers receiving CF	Brochure sent to customers receiving aid enrollment verification provided by customer. When received should be imaged into case and assigned to EW		Is this imaged?		
Sacramento															SC 41 B	School Verification College	college verification provided by customer	Verification received on case in regards to death of case holder. When received should be imaged to case and assigned to EW for processing.		Verification		
Sacramento															SC 465	Notice of Death to EW-SW	Verification received on case			Verification		
Sacramento															SC 684	Food Stamp Applicant Declines Expedited Appointment	CalFresh Applicant Declines Application ES Appointment Date	Used to decline Expedited services. Customer will sign this form and it needs to be imaged				

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Placer																		SSA 40 Quarters Verification	SSA 40 Quarters Verification	Income			Verification		
Placer																		SSA 8125	Letter from SSA or DRR	Fiscal/Issuance/SFIS			Verification		
Placer																	x	SSA 827	Auth to Disclose Info to SSA	Disability/Work Reg			Verification		
Placer																		SSA Adjudication Decision NOA	SSA Adjudication Decision NOA	Disability/Work Reg			Verification		
Sacramento																		SSA Decision Notice	Social Security Admin Office of Disability Adjudication and Review Notice of Decision	Verification provided by the customer	Verification provided by the customer, when submitted should be imaged and assigned to an EW		Verification		
Sacramento																		SSA Disapvd Claim	Social Security Administration Notice of Disapproved Claim	Verification provided by the customer	Verification provided by the customer, when submitted should be imaged and assigned to an EW		Verification		
Placer																		SSA Income / Award Letters	SSA Income / Award Letters	Income			Verification		
Placer																		SSA L8155	SSA Letter of Planned Action	Income			Verification		
Placer																		SSA MediCare Award Letter	SSA MediCare Award Letter	OHC/TPL/MEDS 1			Verification		
Placer																		SSA Notice of Denied Claim	SSA Notice of Denied Claim	Income			Verification		
Sacramento																		SSA Verif Request	AFDC Verification Request from SSA	Verification provided by the customer	Verification provided by the customer, when submitted should be imaged and assigned to an EW		Verification		
Sacramento																		SSA Verif Request	SSA Verif Request Proof of SSI Claim	Verification provided by the customer	Verification provided by the customer, when submitted should be imaged and assigned to an EW		Verification		
Placer																		SSA/SSI Award Ltrs/Printouts	SSA/SSI Award Ltrs/Printouts	Income			Verification		
Placer																		SSA/SSI On-Line App PrintOut	SSA/SSI On-Line App PrintOut	Income			Verification		
Sacramento																		SSA-2458	Report of Confidential Social Security Benefit Information	Verification provided by the customer	Verification provided by the customer, when submitted should be imaged and assigned to an EW		Verification		
Sacramento																		SSI Advocacy Forms	SSI Advocacy Forms - Sacto, San Joaquin, Yolo Counties	Verification provided by the customer	Advocate form provided by the customer, when submitted should be imaged and assigned to an EW		Verification		
Sacramento																		SSI Referral	SSI Referral Forms Ineligible due to Immigrant Status- App- Recon- Hearing- SSI Referral Forms	Verification provided by the customer	Verification provided by the customer, when submitted should be imaged and assigned to an EW		Verification		
Sacramento																		SSI Verification	SSI Verification SSI Verification Forms- Notices	Income Verification provided by the customer	Proof of income provided by the customer, when submitted should be imaged and assigned to an EW		Verification		
Placer																		SSI/SSA Printout	SSI/SSA Printout	Disability/Work Reg			Verification		
Sacramento																		SSI-SSA Printout	SSI-SSA Printout SSI-SSA Printout	Income Verification provided by the customer	Proof of income provided by the customer, when submitted should be imaged and assigned to an EW		Verification		
Placer																		SSN Verif Printout from SSA	SSN Verif Printout from SSA	Vitals			Verification		
Napa																		SSSD 2006	Insurance Information Request				What is this used for? To request info from the customer, insurance agency, SSA? To send MC info to another agency?		
Napa																	x	SSSD 2007	Declaration of Loan/Gift				Verification		
Napa																		SSSD 2012	Hospital Release				Verification		
Napa																		SSSD 2032	Collateral Contact Sheet				What is this asking to verify? Identity? Citizenship? Is it used for SIU investigations?		
Napa																		SSSD 2044	MC Telephone Information Sheet				Info only?		
Napa																		SSSD 2046	Request for Updated Information				What type of information? What programs?		
Napa																		SSSD 2052	V/V Landowner Contact				What does V/V stand for? Is this for housing?		
Napa																		SSSD 2053	Request for Social Services - Third Party Query (TPQY)				Is this something received from another department for status on MC?		
Napa																		SSSD 2054	Third Party Query (TPQY) - Pickle Amendment Questionnaire				Is this something received from another department for status on MC? Verifications?		
Napa																		SSSD 2055	Third Party Query (TPQY) - Disabled Adult Child (DAC)				Is this something received from another department for status on MC? Verifications?		
Napa																		SSSD 2056	Third Party Query (TPQY) for Disabled Widow(er)				Is this something received from another department for status on MC? Verifications?		

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Los Angeles															Reconsideration Documents	Verification of eligibility	Eligibility determination.	New Rec.	Foster Care Forms	Referral to Eligibility
Los Angeles															Medical Records	Medical records	Eligibility determination.	Verification		
Los Angeles															School Records	School records	Eligibility determination.	Verification		
Los Angeles															30 1/3 Form	Financial information	Eligibility determination.	What info is on this? What is this used for?		