NOTICE OF FORM CH	ANCE NO 40 04E		T	
NOTICE OF FORM CHANGE NO. 16-015				DATE
				2/16/2016
TO:     County Welfare Director     Supply Clerk / Forms Coordinator     Community Care Licensing District Offices     District Attorney     Private and Public Adoption Agencies     Other			FROM: Forms Manageme	ent Unit
Listed below is information regarding a form change. Only applicable information is shown.				
This notice updates your California Department of Social Services (CDSS) County Forms Catalog (PUB 69).				
FORM NUMBER, REVISION DATE AND TITLE LIC 9140 (1/16) Request For Course Approval - Administrator Certification Program				
		ESTIMATED	PRICE	INITIAL SUPPLY SENT
MASTER ONLY				☐ Yes ☒ No
☐ New ☐ Revised	1/16	7/04		Obsolete
REQUIRED FORM- REQUIRED FORM- REQUIRED FORM- REQUIRED FORM-				
No Change Permitted ☐ Substitute Permitted With Prior DSS Approval ☐ Recommended Form  UNLESS OTHERWISE SPECIFIED STOCK MAINTAINED AT: OTHER:				
UNLESS OTHERWISE SPECIFIED STOCK MAINTAINED AT:				
Department of Social Services Warehouse P.O. Box 980788		X INTE	ERNET:	
			RANET:	
FORMS DISPOSITION AND SPECIAL INSTRUCTIONS				
DISPOSITION OF OLD SUPPLY  Use until exhausted		⊠ De:	stroy	
USE NEW FORM  ☐ When supply available in DSS Warehouse  ☐ Use new form elements  ☐ Use new form			n effective Imme	ediately
USE FORM IN ACCORDANCE WITH				
All County Letter No.				
Other (specify)				
ADDITIONAL INFORMATION REGARDING FORM CHANGE				
http://www.cdss.ca.gov/cdssweb/entres/forms/English/lic9140.pdf				

Camera-ready copies are currently available on the CDSS Internet. Go to http://www.dss.cahwnet.gov/cdssweb/FormsandPu\_271.htm. Form information on forms not listed in the catalog, you may contact FMU at fmudss@dss.ca.gov.