NOTICE OF FORM CHANGE NO. 16-134				DATE	
				12/07/2016	
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 Cal	ifornia Department of Socia	al Service	es (CDSS) County Forms Cata	log (PUB 69).	
FORM NUMBER, REVISION DATE AND TITLE RFA 01A (11/16) Resource Family Application RFA 05A (11/16) Resource Family Approval Certificate					
ORDER UNIT MASTER ONLY		ESTIMATED	PRICE	INITIAL SUPPLY SENT Yes No	
New ☐ Revised	DATE OF FORM	REPLACES		Obsolete	
REQUIRED FORM- No Change Permitted Substitute Permitted With UNLESS OTHERWISE SPECIFIED STOCK MAINTAINED AT:		OTH	IER:		
Department of Social Services Warehouse P.O. Box 980788 West Sacramento, CA 95798-0788					
FORMS DISPOSITION AND SPECIAL INSTRUCTIONS					
DISPOSITION OF OLD SUPPLY	FURING DISPUSITIO	IN AND S	SPECIAL INSTRUCTIONS		
☐ Use until exhausted ☐ Destroy					
USE NEW FORM When supply available in DSS Warehouse USE FORM IN ACCORDANCE WITH All County Letter No. Other (specify)					
ADDITIONAL INFORMATION REGARDING FORM CHANGE					
RFA 01A (11/16) Resource Family Application					
http://www.cdss.ca.gov/cdssweb/entres/forms/English/RFA01A.pdf					
RFA 05A (11/16) Resource Family Approval Certificate					
http://www.cdss.ca.gov/cdssweb/entres/forms/English/RFA-05A.pdf					
Check on the Internet to see if forms are available at www.dss.cahwnet.gov.					
For camera-ready copies of English and Spanish forms, please call the Forms Management Unit (FMU) at (916) 657-1907. Contact Language Services for other languages at (916) 445-6778.					