

TRACKING NON-CALIFORNIA TANF ASSISTANCE FOR TIME LIMITS

INDIVIDUAL'S NAME	
CASE NAME	CASE #
WORKER #	REQUESTING COUNTY

If an individual receives federal TANF aid outside of California, counties are required to request specific information from the other states, U.S. territories, and/or Tribal TANF programs in order to adjust both the federal TANF 60-month and CalWORKs 48-month time clocks in California. It is also necessary for this information to be entered into the WDTIP system for tracking the aggregate time on aid.

- For the **federal TANF clock**, counties will track months of assistance from the date the recipient received TANF assistance in the other state, U.S. territory, and/or Tribal TANF programs.
- For the **state CalWORKs clock**, counties must track TANF assistance received in other states on or after January 1, 1998.

TANF-Funded Aid Received in Other State/U.S.Territory/Tribal TANF Programs	What period of time did the recipient receive the TANF assistance?
1. STATE/U.S. TERRITORY/TRIBAL TANF PROGRAM: COUNTY/CITY: CASE WORKER: PHONE NUMBER:	1. START DATE - END DATE START DATE - END DATE START DATE - END DATE
2. STATE/U.S. TERRITORY/TRIBAL TANF PROGRAM: COUNTY/CITY: CASE WORKER: PHONE NUMBER:	2. START DATE - END DATE START DATE - END DATE START DATE - END DATE
3. STATE/U.S. TERRITORY/TRIBAL TANF PROGRAM: COUNTY/CITY: CASE WORKER: PHONE NUMBER:	3. START DATE - END DATE START DATE - END DATE START DATE - END DATE

Time Limit Exemptions

In recording months of aid received outside of California, counties must ask about the following exemptions to the TANF 60-month time limit. If the answer is "Yes", the county must exempt the month(s) from both the TANF and CalWORKs time clocks.

Did the individual receive TANF aid as a minor non-head of household or spouse of non-head of household?

- YES -
 NO

START DATE	END DATE
-	-

Did the individual live in Indian country, as defined by federal law, or an Alaskan native village with at least 50 percent unemployment?

- YES -
 NO

START DATE	END DATE
-	-

INFORMATION PROVIDED BY - WORKER NAME	WORKER NUMBER
SIGNATURE	DATE