



CDSS

WILL LIGHTBOURNE  
DIRECTOR

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

744 P Street • Sacramento, CA 95814 • [www.cdss.ca.gov](http://www.cdss.ca.gov)



EDMUND G. BROWN JR.  
GOVERNOR

July 26, 2011

ALL COUNTY INFORMATION NOTICE NO. I-44-11

REASON FOR THIS TRANSMITTAL

- State Law Change
- Federal Law or Regulation Change
- Court Order
- Clarification Requested by One or More Counties
- Initiated by CDSS

TO: ALL COUNTY WELFARE DIRECTORS

SUBJECT: CHILD CARE MONTHLY REPORT CALWORKS FAMILIES [CW 115 (7/11)] AND CHILD CARE MONTHLY REPORT TWO-PARENT FAMILIES [CW 115A (7/11)] DURING CAL-LEARN FY 11-12 SUSPENSION PERIOD

REFERENCES: ACL 11-36 SUSPENSION OF THE CALIFORNIA WORKS OPPORTUNITY AND RESPONSIBILITY TO KIDS (CALWORKS) CAL-LEARN PROGRAM FOR FISCAL YEAR 2011-12, DATED APRIL 21, 2011

ACL 06-49 CHILD CARE MONTHLY REPORT CALWORKS FAMILIES [CW 115 (10/06)] AND CHILD CARE MONTHLY REPORT TWO-PARENT FAMILIES [CW 115A (10/06)], DATED OCTOBER 18, 2006

ACL 11-36 provided County Welfare Departments (CWDs) with information and instructions to implement the provisions related to the one-year suspension of the Cal-Learn program effective July 1, 2011 to June 30, 2012. This ACIN is to notify counties that pregnant and parenting teens should continue to be reported on the CW 115 and CW 115A reports in Column B. The only change to the form and instructions is changing Column B's name from Cal-Learn to WTW Teen Parent to reflect the program transfer of Cal-Learn teens into the WTW Teen Parent Program during the Cal-Learn suspension period.

To complete the electronic form, counties will download a copy of the CW115/CW115A report form and instructions from <http://www.cdss.ca.gov/dssdb>.

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Please submit the CW115/CW115A reports via e-mail to the California Department of Social Services, Data Systems and Survey Design Bureau (DSSDB) at [admchw115@dss.ca.gov](mailto:admchw115@dss.ca.gov). For reference purposes, attached is the CW 115 (7/11) and CW 115A (7/11) report forms (with the Cal-Learn/WTW Teen Parents change noted in blue font color).

If you have any questions regarding the completion of these reports, please contact the DSSDB at (916) 651-8269. For program related questions, please contact the Child Care and Refugee Programs Branch at (916) 657-3442.

Sincerely,

***Original Document Signed By:***

M. AKHTAR KHAN, Ph.D., Chief  
Research Services Branch

Attachments

# Child Care Monthly Report CalWORKs Families

DOWNLOAD REPORT FORM (IN EXCEL) AT:  
<http://www.cdss.ca.gov/dssdb>  
EMAIL COMPLETED REPORT FORM (AS AN EXCEL ATTACHMENT) TO:  
[admchw115@dss.ca.gov](mailto:admchw115@dss.ca.gov)  
IF UNABLE TO EMAIL REPORT FORM, FAX OR MAIL TO:  
**FAX: (916) 657-2074**  
California Department of Social Services  
Data Systems and Survey Design Bureau, M.S. 9-13-081  
P.O. Box 944243  
Sacramento, CA 94244-2430

COUNTY NAME	INITIAL	REPORT MONTH AND YEAR			
	REVISED				
<b>Part A. Stage 1 Child Care Payments Made</b>	<b>Welfare to Work (A)</b>	<b>WTW Teen Parent* (B)</b>	<b>No Longer on Aid (C)</b>	<b>CalWORKs Safety Net (D)</b>	<b>TOTAL (E)</b>
1. Stage 1 <b>families</b> with child care payments made during the month.....	1	2	3	4	5
2. Stage 1 <b>children</b> with child care payments made during the month (Note: Item 2 is not the sum of Items 3 and 4).....	6	7	8	9	10
3. Stage 1 children in <b>license exempt</b> child care during the month.....	11	12	13	14	15
4. Stage 1 children in <b>licensed</b> child care during the month.....	16	17	18	19	20
5. Stage 1 child care expenditures paid during the month (Item 5a plus Item 5b).....	21	22	23	24	25
a. License Exempt.....	26	27	28	29	30
b. Licensed.....	31	32	33	34	35
6. Stage 1 children who will remain in Stage 1 due to program barriers .....	36	37	38	39	40
7. Stage 1 children submitted for transfer to Stage 2 during the month.....	41	42	43	44	45
8. Stage 1 children submitted for transfer to Stage 3 during the month.....	46	47	48	49	50
9. Stage 1 children waiting to transfer to Stage 2 during the month. (Item 9a plus Item 9b).....	51	52	53	54	55
a. Stage 1 children waiting to transfer to Stage 2, who are waiting due to Stage 2 funding issues.....	56	57	58	59	60
b. Stage 1 children waiting to transfer to Stage 2, who are eligible and waiting due to agency(s) staffing issues.....	61	62	63	64	65
10. Stage 2 children moved back to Stage 1.....	66	67	68	69	70
<b>Part B. Stage 1 Child Care Services Not Available</b>			<b>For Children Ages</b>		
			<b>0-10 years</b>	<b>11-12 years</b>	
11. Children <b>ages 0 - 10 years</b> whose parents were granted good cause for not participating in Welfare-to-Work activities due to the unavailability of Stage 1 Child Care during the month.....	71				
12. Primary reason Stage 1 Child Care was not received during the month. Enter the number of children in the appropriate age column provided. (Item 12a through 12e).....	72		73		
a. No funding available.....	74		75		
b. No provider available	76				
1) For children under 2 years of age.....	77				
2) For children ages 2-10.....					
3) For children ages 11-12.....				78	
c. Child care not available during nontraditional hours.....	79			80	
d. Transportation to and from child care not available.....	81			82	
e. Other (e.g. Special needs; sick care not available, etc.) Specify reasons below.....	83			84	
12e. Other Category Reason(s). Indicate in the reason the child's age group (0-10 or 11-12).					
COMMENTS List APP contact(s), phone number(s) and specify their responsibility of item(s)/program categories here (if applicable).					
CONTACT PERSON (PRINT)	TELEPHONE	EXTENSION	FAX		
TITLE/CLASSIFICATION	EMAIL	DATE COMPLETED			

\* Column B changed from Cal-Learn Program to Welfare to Work (WTW) Teen Parent Program during Cal-Learn suspension period from July 2011 through June 2012. Reference All County Letter 11-36 and All County Information Notice I-44-11.

# Child Care Monthly Report Two-Parent Families

DOWNLOAD REPORT FORM (IN EXCEL) AT:  
<http://www.cdss.ca.gov/dssdb>  
 EMAIL COMPLETED REPORT FORM (AS AN EXCEL ATTACHMENT) TO:  
[admchw115@dss.ca.gov](mailto:admchw115@dss.ca.gov)  
 IF UNABLE TO EMAIL REPORT FORM, FAX OR MAIL TO:  
**FAX: (916) 657-2074**  
 California Department of Social Services  
 Data Systems and Survey Design Bureau, M.S. 9-13-081  
 P.O. Box 944243  
 Sacramento, CA 94244-2430

COUNTY NAME	INITIAL	REPORT MONTH AND YEAR			
	REVISED				
<b>Part A. Stage 1 Child Care Payments Made</b>	<b>Welfare to Work (A)</b>	<b>WTW Teen Parent* (B)</b>	<b>No Longer on Aid (C)</b>	<b>CalWORKs Safety Net (D)</b>	<b>TOTAL (E)</b>
1. Stage 1 <b>families</b> with child care payments made during the month.....	1	2	3	4	5
2. Stage 1 <b>children</b> with child care payments made during the month (Note: Item 2 is not the sum of Items 3 and 4).....	6	7	8	9	10
3. Stage 1 children in <b>license exempt</b> child care during the month.....	11	12	13	14	15
4. Stage 1 children in <b>licensed</b> child care during the month.....	16	17	18	19	20
5. Stage 1 child care expenditures paid during the month (Item 5a plus Item 5b).....	21	22	23	24	25
a. License Exempt.....	26	27	28	29	30
b. Licensed.....	31	32	33	34	35
6. Stage 1 children who will remain in Stage 1 due to program barriers .....	36	37	38	39	40
7. Stage 1 children submitted for transfer to Stage 2 during the month.....	41	42	43	44	45
8. Stage 1 children submitted for transfer to Stage 3 during the month.....	46	47	48	49	50
9. Stage 1 children waiting to transfer to Stage 2 during the month. (Item 9a plus Item 9b).....	51	52	53	54	55
a. Stage 1 children waiting to transfer to Stage 2, who are waiting due to Stage 2 funding issues.....	56	57	58	59	60
b. Stage 1 children waiting to transfer to Stage 2, who are eligible and waiting due to agency(s) staffing issues.....	61	62	63	64	65
10. Stage 2 children moved back to Stage 1.....	66	67	68	69	70
<b>Part B. Stage 1 Child Care Services Not Available</b>	<b>For Children Ages</b>				
	<b>0-10 years</b>		<b>11-12 years</b>		
11. Children <b>ages 0 - 10 years</b> whose parents were granted good cause for not participating in Welfare-to-Work activities due to the unavailability of Stage 1 Child Care during the month.....	71				
12. Primary reason Stage 1 Child Care was not received during the month. Enter the number of children in the appropriate age column provided. (Item 12a through 12e).....	72	73			
a. No funding available.....	74	75			
b. No provider available	76				
1) For children under 2 years of age.....	77				
2) For children ages 2-10.....		78			
3) For children ages 11-12.....					
c. Child care not available during nontraditional hours.....	79	80			
d. Transportation to and from child care not available.....	81	82			
e. Other (e.g. Special needs; sick care not available, etc.) Specify reasons below.....	83	84			
12e. Other Category Reason(s). Indicate in the reason the child's age group (0-10 or 11-12).					
COMMENTS List APP contact(s), phone number(s) and specify their responsibility of item(s)/program categories here (if applicable).					
CONTACT PERSON (PRINT)	TELEPHONE	EXTENSION	FAX		
TITLE/CLASSIFICATION	EMAIL	DATE COMPLETED			

\* Column B changed from Cal-Learn Program to Welfare to Work (WTW) Teen Parent Program during Cal-Learn suspension period from July 2011 through June 2012. Reference All County Letter 11-36 and All County Information Notice I-44-11.