

DEPARTMENT OF SOCIAL SERVICES

744 P Street, Sacramento, CA 95814  
(916) 322-5387



July 26, 1982

ALL-COUNTY INFORMATION NOTICE I- 92-82

TO: ALL COUNTY WELFARE DIRECTORS

SUBJECT: REVISED FORM CA 2 (STATEMENT OF FACTS SUPPORTING ELIGIBILITY  
FOR ASSISTANCE)

REFERENCE: ACIN I-07-82 AND I-34-82

Attached is a copy of the revised CA 2 (Statement of Facts Supporting Eligibility for Assistance) and a listing of all the changes made to the form since the last revision.

This revision takes into consideration changes required by state AFDC regulations (Parts I and II) implementing the provisions of the Federal Omnibus Budget Reconciliation Act of 1981 and SB 633.

Input for the revision of the CA 2 was received from a variety of sources including individual suggestions from various counties, the County Welfare Directors Association Subcommittee on Food Stamp Forms and the AFDC County Forms Advisory Committee.

Significant changes made to the CA 2 are:

1. Made language changes to the Coversheet to clarify certain areas, e.g., age requirements and pregnancy.
2. Added a section to collect information on anyone who has applied and/or has received public assistance in the past.
3. Added a section to collect information on anyone who wants to request aid and/or a special need payment because of pregnancy.
4. Added a section to identify persons who are aliens and have been sponsored by an individual.
5. Added a section to collect information on anyone who is on a labor strike.
6. Revised Section 9 to collect work history information on both parents in the home.

7. Revised Section 12 to collect employment information for two persons.
8. Rearranged numerical sequence of Sections 13 through 17.
9. Added Section 21 for food stamp applicants.

The addition of Section 21 will eliminate the need to provide an applicant/recipient with the CA 2 FS supplement if the "no" box is checked.

The attached copy of the CA 2 is provided for counties that do their own printing and to allow for training of staff. Regular supplies of the CA 2 are expected to be available by mid-September 1982, from the DSS warehouse. Orders for this revision will be accepted after September 1, 1982, via the GEN 727B, County Forms Order.

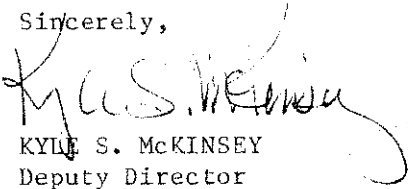
A Spanish translation of the CA 2 should be available within a month of the English. If you want a camera ready copy of the Spanish form, please submit your request to:

AFDC Forms Coordinator  
AFDC Program Systems Bureau  
744 P Street, M.S. 16-31  
Sacramento, CA 95814

Regular supplies of the Spanish CA 2 are expected to be available by mid-October 1982.

As with all state AFDC forms, an open file is maintained in order to receive recommendations and suggestions for future forms improvements. If you have any suggestions or comments, please provide them in written form to the AFDC Forms Coordinator. If you have questions about the revised CA 2, please contact your AFDC Program Management Consultant at (916) 445-4458. Questions relating to the use of the CA 2 for food stamps should be directed to your Food Stamp Program Consultant at (916) 322-3141. Questions relating to the use of the CA 2 for the Refugee or Entrant Cash Assistance Programs should be directed to your Refugee Program Consultant at either (916) 322-3141 or (415) 557-8588.

Sincerely,



KYLE S. MCKINSEY  
Deputy Director

Attachments

cc: CWDA