

NOTICE OF FORM CHANGE NO. 06-042

DATE

04/17/2006

TO:
County Welfare Director
Supply Clerk / Forms Coordinator

FROM:
Forms Management Unit
(916) 657-1907

Community Care Licensing District Offices
 Private and Public Adoption Agencies

District Attorney
 Other

Listed below is information regarding a form change. Only applicable information is shown.

This notice updates your Department of Social Services County Forms Catalog.

FORM NUMBER AND TITLE **STAT 48 (10/06) - Annual Work Registrant and Food Stamp Employment and Training (FSET) Program Caseload Report**

ORDER UNIT MASTER ONLY	<input checked="" type="checkbox"/> Free <input type="checkbox"/> Sold	ESTIMATED PRICE	INITIAL SUPPLY SENT <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<input type="checkbox"/> New <input checked="" type="checkbox"/> Revised	DATE OF FORM 10/06	REPLACES 10/03	<input type="checkbox"/> Obsolete

REQUIRED FORM-

 No Change Permitted

REQUIRED FORM-

 Substitute Permitted With Prior DSS Approval Recommended Form

UNLESS OTHERWISE SPECIFIED STOCK MAINTAINED AT:

Department of Social Services Warehouse
P.O. Box 980788
West Sacramento, CA 95798-0788

 Other:**FORMS DISPOSITION AND SPECIAL INSTRUCTIONS**

DISPOSITION OF OLD SUPPLY

 Use until exhausted Destroy

USE NEW FORM

 When supply available in DSS Warehouse Use new form effective 10/06

USE FORM IN ACCORDANCE WITH

 All County Letter No. 06-08 Other (specify)

ADDITIONAL INFORMATION REGARDING FORM CHANGE

Attached is a Reproducible Copy

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, or by electronic mail at: fmudss@dss.ca.gov. Contact Language Services for other languages at (916) 651-8876 or by electronic mail at LTS@dss.ca.gov.

Annual Work Registrant and Food Stamp Employment and Training (FSET) Program Caseload Report

SUBMIT THIS REPORT FORM VIA EMAIL
(see <http://www.cdss.ca.gov/dssdb/>)
OR SEND ONE COPY TO:
California Department of Social Services
Data Systems and Survey Design Bureau, M.S. 9-081
P.O. Box 944243
Sacramento, CA 94244-2430
FAX: (916) 657-2074

COUNTY NAME	VERSION	REPORT DATE October 1	YEAR
PART A. FOOD STAMP WORK REGISTRATION STATUS ON OCTOBER 1 (All Counties)			October 1
1. Food Stamp work registrants on October 1.....			1
2. Food Stamp work registrants who held a deferral status on October 1.....			2
3. FSET mandatory participants on October 1 (Item 1 minus Item 2).....			3
PART B. FSET COMPONENT PLACEMENTS ON OCTOBER 1 (FSET Counties Only)			October 1
4. Job club participants on October 1 (Item 4a plus Item 4b).....			4
a. ABAWD participants.....			5
b. Non-ABAWD participants.....			6
5. Job search participants on October 1 (Item 5a plus Item 5b).....			7
a. ABAWD participants.....			8
b. Non-ABAWD participants.....			9
6. Workfare participants on October 1 (Item 6a plus Item 6b).....			10
a. ABAWD participants.....			11
b. Non-ABAWD participants.....			12
7. Self-initiated workfare participants on October 1 (Item 7a plus Item 7b).....			13
a. ABAWD participants.....			14
b. Non-ABAWD participants.....			15
8. On-the-job-training participants on October 1 (Item 8a plus Item 8b).....			16
a. ABAWD participants.....			17
b. Non-ABAWD participants.....			18
9. Work experience participants on October 1 (Item 9a plus Item 9b).....			19
a. ABAWD participants.....			20
b. Non-ABAWD participants.....			21
10. Vocational training participants on October 1 (Item 10a plus Item 10b).....			22
a. ABAWD participants.....			23
b. Non-ABAWD participants.....			24
11. Education participants on October 1 (Item 11a plus Item 11b).....			25
a. ABAWD participants.....			26
b. Non-ABAWD participants.....			27
12. Participants in other components on October 1 (Item 12a plus Item 12b).....			28
a. ABAWD participants.....			29
b. Non-ABAWD participants.....			30
13. Total number of participants in all component categories on October 1 (Item 13a plus Item 13b).....			31
a. ABAWD participants (Add Items 4a through 12a).....			32
b. Non-ABAWD participants (Add Items 4b through 12b).....			33
COMMENTS			
CONTACT PERSON (Print)		TELEPHONE	EXTENSION
TITLE/CLASSIFICATION		FAX	EMAIL
DATE COMPLETED			

**ANNUAL WORK REGISTRANT AND
FOOD STAMP EMPLOYMENT AND TRAINING (FSET)
PROGRAM CASELOAD REPORT
STAT 48 (10/06)**

INSTRUCTIONS

CONTENT

The annual STAT 48 report contains statistical information concerning California's Nonassistance Food Stamp (NAFS) recipients. This form collects point-in-time FSET caseload, and work registrant population data in county-administered FSET programs. This data collection is required by the Food Stamp Act of 1977, as amended by Public Law 104-193 in 1996.

Report form and instructions can be viewed or printed from the California Department of Social Services (CDSS), Research and Data Reports (RADR), website at <http://www.cdss.ca.gov/research/>. Annual statewide and county-specific data is also available on the website.

PURPOSE

The STAT 48 data is used by the United States Department of Agriculture, Food and Nutrition Service, to track Food Stamp work registrants and the FSET program population. This report provides county, state, and federal entities with information needed for budgeting, staffing, program planning, and other purposes.

COMPLETION AND SUBMISSION

The County Welfare Department (CWD) is responsible for ensuring that this report is fully and accurately completed. If portions of the report are completed by more than one entity within the CWD and/or outside agencies, the contact person responsible for submitting the report to the state shall review the report for completeness and accuracy.

Reports are due on or before November 15th each year. This report may be submitted via email or in hard copy:

Email submission: Download an Excel version of the report form from <http://www.cdss.ca.gov/dssdb/> to your PC desktop, complete the downloaded report form, and email to the CDSS, Data Systems and Survey Design Bureau (DSSDB). This email submission process contains automatic computation of some cells and easy email transmission of completed report forms to DSSDB; the website contains specific instructions and guidance.

Hard copy submission: If email submission is not possible, complete a paper copy of the report form and fax or mail to:

California Department of Social Services
Data Systems and Survey Design Bureau, M.S. 9-081
P.O. Box 944243
Sacramento, CA 94244-2430

FAX: (916) 657-2074

If you have questions regarding this report, contact the Data Systems and Survey Design Bureau at (916) 651-8269.

GENERAL INSTRUCTIONS

Select in the drop down boxes provided near the top of the form the county name and the year. (The report month and day are pre-filled.)

Enter the data required for each item. If there is nothing to report for an item, enter “0”. **Do not leave any item blank.**

Enter in the boxes at the end of the form the contact person's name, job title or classification, telephone number, fax number, and email address in case there are questions about the report. The contact person may or may not be the person who completed the report. Enter the date the report was completed.

DEFINITIONS

ABAWD: A NAFS recipient who is 18 through 49 years of age and who must meet the federal ABAWD work requirement in order to remain eligible for Food Stamps.

Federal Fiscal Year: The federal fiscal year (FFY) is from October 1 through September 30 of the following year.

Food Stamp Work Registrant: A Food Stamp applicant or recipient who does not qualify for any of the work registration exemptions in MPP Section 63-407.21. (Applicable to all counties.)

FSET Component: A service, activity, or program designed to help recipients gain skills, training, or work experience. Components can consist of “work” and/or “non-work” activities including but not limited to: Job Search, Job Club, Vocational Training, Education, Workfare, 30-day Workfare Job Search, Self-Initiated Workfare, Work Experience, and On-the-Job Training.

FSET County: A county that offers a State approved FSET program.

FSET Participant: A Food Stamp applicant or recipient who is neither exempt from work registration, nor deferred from FSET and who is participating in an FSET component assigned by the county. (Applicable to FSET counties only.)

Non-ABAWD: An individual who is exempt from the ABAWD work requirement because he/she is:

- 1) Under age 18 or 50 years of age or older; or
- 2) Pregnant; or
- 3) Resides in a Food Stamp household that contains a dependent child under 18 years of age, even if the child is not eligible for Food Stamps; or
- 4) Meets the work registration exemptions at MPP 63-407.21.

Non-Qualifying FSET Component: A FSET component that does not satisfy the ABAWD work rule (e.g., stand-alone job search).

ITEM INSTRUCTIONS

PART A. FOOD STAMP WORK REGISTRATION STATUS ON OCTOBER 1 (All Counties)

Enter the total number of placements in an FSET component (include applicant placements) on October 1. This is a duplicated count of participants. Each participant should be counted once for each component placement after he/she begins a specific component.

ITEM INSTRUCTIONS (Continued)**PART A. FOOD STAMP WORK REGISTRATION STATUS ON OCTOBER 1 (All Counties)**

1. Food Stamp work registrants on October 1: Enter the number of persons who are work registered on October 1. [Cell 1]
2. Food Stamp work registrants who held a deferral status on October 1: Enter the total number of work registrants, new and continuing, who held a deferral from FSET participation on October 1. [Cell 2]
3. FSET mandatory participants on October 1 (Item 1 minus Item 2): Skip this item if completing the automated Excel version: it will be automatically calculated. Enter the difference between the number of work registrants and the number of work registrants who were deferred from FSET participation on October 1. [Cell 3]
4. Job club participants on October 1 (Item 4a plus Item 4b): Skip this item if completing the automated Excel version: it will be automatically calculated. Enter the total persons participating in this component category on October 1. [Cell 4]
 - a. ABAWD participants: Enter the October 1 count of ABAWD participants. [Cell 5]
 - b. Non-ABAWD participants: Enter the October 1 count of Non-ABAWD participants. [Cell 6]
5. Job search participants on October 1 (Item 5a plus Item 5b): Skip this item if completing the automated Excel version: it will be automatically calculated. Enter the total persons participating in this component category on October 1. [Cell 7]
 - a. ABAWD participants: Enter the October 1 count of ABAWD participants. [Cell 8]
 - b. Non-ABAWD participants: Enter the October 1 count of Non-ABAWD participants. [Cell 9]
6. Workfare participants on October 1 (Item 6a plus Item 6b): Skip this item if completing the automated Excel version: it will be automatically calculated. Enter the total persons participating in this component category on October 1. [Cell 10]
 - a. ABAWD participants: Enter the October 1 count of ABAWD participants. [Cell 11]
 - b. Non-ABAWD participants: Enter the October 1 count of Non-ABAWD participants. [Cell 12]
7. Self-initiated workfare participants on October 1 (Item 7a plus Item 7b): Skip this item if completing the automated Excel version: it will be automatically calculated. Enter the total persons participating in this component category on October 1. [Cell 13]
 - a. ABAWD participants: Enter the October 1 count of ABAWD participants. [Cell 14]
 - b. Non-ABAWD participants: Enter the October 1 count of Non-ABAWD participants. [Cell 15]
8. On-the-job-training participants on October 1 (Item 8a plus Item 8b): Skip this item if completing the automated Excel version: it will be automatically calculated. Enter the total persons participating in this component category on October 1. [Cell 16]
 - a. ABAWD participants: Enter the October 1 count of ABAWD participants. [Cell 17]
 - b. Non-ABAWD participants: Enter the October 1 count of Non-ABAWD participants. [Cell 18]

ITEM INSTRUCTIONS (Continued)**PART B. FSET COMPONENT PLACEMENTS ON OCTOBER 1 (FSET Counties Only)**

9. Work experience participants on October 1 (Item 9a plus Item 9b): Skip this item if completing the automated Excel version: it will be automatically calculated. Enter the total persons participating in this component category on October 1. [Cell 19]
 - a. ABAWD participants: Enter the October 1 count of ABAWD participants. [Cell 20]
 - b. Non-ABAWD participants: Enter the October 1 count of Non-ABAWD participants. [Cell 21]
10. Vocational training participants on October 1 (Item 10a plus Item 10b): Skip this item if completing the automated Excel version: it will be automatically calculated. Enter the total persons participating in this component category on October 1. [Cell 22]
 - a. ABAWD participants: Enter the October 1 count of ABAWD participants. [Cell 23]
 - b. Non-ABAWD participants: Enter the October 1 count of Non-ABAWD participants. [Cell 24]
11. Education participants on October 1 (Item 11a plus Item 11b): Skip this item if completing the automated Excel version: it will be automatically calculated. Enter the total persons participating in this component category on October 1. [Cell 25]
 - a. ABAWD participants: Enter the October 1 count of ABAWD participants. [Cell 26]
 - b. Non-ABAWD participants: Enter the October 1 count of Non-ABAWD participants. [Cell 27]
12. Participants in other components on October 1 (Item 12a plus 12b): Skip this item if completing the automated Excel version: it will be automatically calculated. Enter the total persons participating in component categories on October 1. In the Comments section below, specify the other components and the number of ABAWD and Non-ABAWD participants placed in each. [Cell 28]
 - a. ABAWD participants: Enter the October 1 count of ABAWD participants. [Cell 29]
 - b. Non-ABAWD participants: Enter the October 1 count of Non-ABAWD participants. [Cell 30]
13. Total number of participants in all component categories on October 1 (Item 13a plus Item 13b): Skip this item if completing the automated Excel version: it will be automatically calculated. Enter the total number of placements in an FSET component (include applicant placements) on October 1. This is a duplicated count of participants. Each participant should be counted once for each component placement after he/she begins a specific component. [Cell 31]
 - a. ABAWD participants (Add Items 4a through 12a): Enter the October 1 count of total ABAWD participants. [Cell 32]
 - b. Non-ABAWD participants (Add Items 4b through 12b): Enter the October 1 count of total Non-ABAWD participants. [Cell 33]

COMMENTS

Use the Comments section to:

- Explain any major fluctuations in data.
- Explain any adjustment entries.
- Provide information as directed in the report instructions.
- Provide any other comments the county determines necessary.

ANNUAL WORK REGISTRANT AND FOOD STAMP EMPLOYMENT AND TRAINING (FSET) PROGRAM CASELOAD REPORT (STAT 48)

VALIDATION RULES AND EDITS

PART A. FOOD STAMP WORK REGISTRATION STATUS ON OCTOBER 1 (All Counties)

CELL 3: Cell 3 must equal to (Cell 1 minus Cell 2)

PART B. FSET COMPONENT PLACEMENTS ON OCTOBER 1 (FSET Counties Only)

CELL 4: Cell 4 must equal to (Cell 5 plus Cell 6)

CELL 7: Cell 7 must equal to (Cell 8 plus Cell 9)

CELL 10: Cell 10 must equal to (Cell 11 plus Cell 12)

CELL 13: Cell 13 must equal to (Cell 14 plus Cell 15)

CELL 16: Cell 16 must equal to (Cell 17 plus Cell 18)

CELL 19: Cell 19 must equal to (Cell 20 plus Cell 21)

CELL 22: Cell 22 must equal to (Cell 23 plus Cell 24)

CELL 25: Cell 25 must equal to (Cell 26 plus Cell 27)

CELL 28: Cell 28 must equal to (Cell 29 plus Cell 30)

CELL 31: Cell 31 must equal to (Cell 32 plus Cell 33)

CELL 32: Cell 32 must be equal to (Cell 5 plus Cell 8 plus Cell 11 plus Cell 14 plus Cell 17 plus Cell 20 plus Cell 23 plus Cell 26 plus Cell 29)

CELL 33: Cell 33 must be equal to (Cell 6 plus Cell 9 plus Cell 12 plus Cell 15 plus Cell 18 plus Cell 21 plus Cell 24 plus Cell 27 plus Cell 30)