NOTICE OF FORM CHANGE NO. 08-064			DATE
			6/05/2008
To: County Welfare Director Supply Clerk / Forms Coordinator Community Care Licensing District Offices District Attorney Private and Public Adoption Agencies Other		FROM: Forms Ma (916) 657-	nagement Unit 1907
Listed below is information re	garding a form change. Or	nly applicable information is show	/n.
This notice updates your Cal	ifornia Department of Soci	al Services (CDSS) County Forn	ns Catalog (PUB 69).
FORM NUMBER, REVISION DATE AND TITLE	LIC 279 (5/08) - Applica	ation For A Family Child Care Ho	ome License
ORDER UNIT		ESTIMATED PRICE	INITIAL SUPPLY SENT
MASTER ONLY		DEDI AGEO	☐ Yes ⊠ No
□ New	5/08	REPLACES 1/06	☐ Obsolete
REQUIRED FORM- No Change Permitted 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: ☐ INTERNET: ☐ INTRANET:	
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	immediately
□ All County Letter No. □ Other (specify)			
ADDITIONAL INFORMATION REGARDING FOR	RM CHANGE		
http://www.dss.cahwnet.gov/d	cdssweb/entres/forms/Eng	lish/LIC279.pdf	

Camera-ready copies are currently available on the CDSS Internet. Go to www.dss.cahwnet.gov/cdssweb/FormsandPu_271.htm. Form information on forms not listed in the catalog, you may contact FMU at (916) 657-1907 or by e-mail at fmudss@dss.ca.gov.

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