

DEPARTMENT OF SOCIAL SERVICES
744 P Street, Sacramento, CA 95814

August 18, 1989



ALL COUNTY INFORMATION NOTICE NO. I-56-89

TO: ALL COUNTY WELFARE DIRECTORS

SUBJECT: STATEMENT OF FACTS TO ADD A CHILD UNDER AGE 16,
CA 8A (7/89)

REFERENCE: All County Letter #89-52, June 8, 1989

The purpose of this letter is to transmit a reference copy of the Statement of Facts to Add a Child Under Age 16, CA 8A (7/89). The form was originally developed to add only a newborn child to the AFDC assistance unit and the Food Stamp household. However, as a result of a field test conducted in Butte, Merced, Napa, San Bernardino, San Joaquin, Santa Clara and Sutter counties, suggestions were received to extend use of the form to all children up to age 16 years. All field test counties found the form easy to use and recommended it to add a child to the AFDC assistance unit or to the Food Stamp household. The CA 8A is a recommended form for use at county option; it is not a required form.

Along with suggestions received from the field test counties for improvement of the form, development of the CA 8A was accomplished with the support of the CWDA Forms Sub-Committee.

FORM USE

The following are examples of how the CA 8A could be used and are restated in the form instruction section attached to this letter.

If a newborn child is being added to an AFDC assistance unit, information on the father, if living in the home, will already have been gathered on the CA 1, Application for Public Assistance, and the CA 2, Statement of Facts (refer to ACL #89-52). At the time of the child's birth, the father, if all eligibility factors are met, will be added along with the newborn to the assistance unit. The CA 8A could be used at this point to document the addition of the newborn.

If the father moves into the home at the time of the baby's birth, a new CA 2 or CA 8 should be used to document the addition of the newborn and father to the AFDC assistance unit, in accordance with MPP 40-118.1. For Food Stamps, a new DFA 285-A2 may be given or the most recent DFA 285-A2 may be updated with the new information; or, a CA 8 may be provided to the household for completion.


In situations where a child alone comes into the home, only a CA 8A need be given. However, forms currently in use for the respective programs could be taken instead: the CA 2, CA 8 or the DFA 285-A2.

STOCK AND TRANSLATIONS

The CA 8A will not be stocked in the DSS Warehouse because it is not a required form. If counties request it, we may consider stocking the form in the future.

Counties interested in receiving reproducible copies of the CA 8A in English and/or the Cambodian, Chinese, Lao, Spanish and Vietnamese translations, may contact Shirley Lu, Language Services Bureau at (916) 323-9562 or ATSS 473-9562.

If there are any questions regarding the CA 8A, please call Le Anne Torres, AFDC and Food Stamp Policy Implementation Bureau at (916) 324-2016 or ATSS 454-2016.


for ROBERT A. HOREL
Deputy Director

Attachments

cc: CWDA

August 9, 1989

FORM INSTRUCTIONS
(FOR CWD)

Statement of Facts to Add a Child Under Age 16, CA 8A (7/89)
(Supplemental application and request for Cash Aid and/or Food Stamps)

PURPOSE

The CA 8A is one of several acceptable methods of collecting information needed to add a child under age 16 years to the Cash Assistance unit and/or the Food Stamp household. If more than one child is added, one form is completed for each.

FORM USE

If a newborn child is being added to an AFDC assistance unit, information on the father, if living in the home, will already have been gathered on the CA 1, Application for Public Assistance, and the CA 2, Statement of Facts (refer to ACL #89-52). At the time of the child's birth, the father, if all eligibility factors are met, will be added along with the newborn to the assistance unit. The CA 8A could be used at this point to document the addition of the newborn.

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PREPARATION OF QUESTIONS

Questions #1 and #2 are used to gather identifying information.

NOTE: To establish citizenship/alien status, a CA 64, Statement of Citizenship/Alien Status must be completed on the child.

Questions #3 and #4 are used to determine deprivation status for an AFDC child. This information is not necessarily pertinent to the Food Stamp program.

Questions #5 and #6 are used to determine if the child is currently receiving Cash Aid or Food Stamp benefits elsewhere. If the child has received benefits elsewhere in the month the CWD intends to add the child to the AFDC assistance unit or the Food Stamp household, he/she would not be eligible for benefits again in that month. For AFDC purposes, the eligibility worker may want to pursue the possibility of an Intercounty Transfer.

Question #7 is used to determine income received by the child. It will be necessary for the applicant to list the source of income, amounts received, dates received and if it is a weekly, bi-monthly or monthly source of income.

Question #8 is used to determine property and resources owned by the child. It will be necessary for the applicant to list each item, give the account number or identifying information and the current value.

Question #9 is used for AFDC purposes and is necessary for gathering information on health insurance coverage. The worker should list the appropriate coverage on the Medi-Cal card.

Question #10 is used to determine the need for CHDP services or other social services. CHDP services must be explained to the applicant. The applicant should be informed of services which are available and be given the choice to request these services. If a request for services is made, the eligibility worker should make the appropriate referral for CHDP or other social services.

SIGNATURES

The caretaker relative, adult Food Stamp household member or Authorized Representative must sign and date the form. For AFDC, the signature of the second cash aided spouse or other parent of cash aided children must also sign and date the form.

COUNTY USE ONLY-Case Disposition

The purpose of this section is to document the date of review by the eligibility worker and to document the disposition of the request to add a child to the AFDC assistance unit and/or the Food Stamp household. A signature area is provided for supervisory review also. Use of this section is a county option.