NOTICE OF FORM CHANGE NO. 10-022				DATE	
				05-27-2010	05-27-2010
To: County Welfare Director Supply Clerk / Forms Coordinator Community Care Licensing District Offices District Attorney Private and Public Adoption Agencies Other			M: Forms Manage	ment Unit	
Listed below is information re	garding a form change. Or	nly applicable info	rmation is shown.		
This notice updates your Cal	ifornia Department of Soci	al Services (CDS	S) County Forms Ca	atalog (PUB 69).	
FORM NUMBER, REVISION DATE AND TITLE GEN 1031 (5/10) Annual County Training Plan					
ORDER UNIT MASTER ONLY	<u> </u>		ESTIMATED PRICE		0
☐ New ☐ Revised	DATE OF FORM 5/10	REPLACES 11/09		☐ Obsolete	
REQUIRED FORM- REQUIRED FORM- No Change Permitted Substitute Permitted With Prior DSS Approval Recommended Form					
UNLESS OTHERWISE SPECIFIED STOCK MAINTAINED AT:		OTHER:			
Department of Social Services Warehouse P.O. Box 980788 West Sacramento, CA 95798-0788					
Use until exhausted		⊠ Destroy			
USE NEW FORM When supply available in DSS Warehouse		oxtimes Use new f	☐ Use new form effective date of		
USE FORM IN ACCORDANCE WITH					
☐ All County Letter No.					
	7-10				
ADDITIONAL INFORMATION REGARDING FOR		OEN4024			
http://www.cdss.ca.gov/cdss	web/entres/torms/English/	GENTUST.pat			

Camera-ready copies are currently available on the CDSS Internet. Go to http://www.dss.cahwnet.gov/cdssweb/FormsandPu_271.htm.

Form information on forms not listed in the catalog, you may contact FMU at fmudss@dss.ca.gov.