NOTICE OF FORM CHANGE NO. 11-081					DATE
					07-19-2011
County Welfare Director Supply Clerk / Forms Coordinator Community Care Licensing District Offices District Attorney Private and Public Adoption Agencies Other			FROM: Forms Man	agemer	nt Unit
Listed below is information re	garding a form change	. Only applica	able information is show	n.	
This notice updates your Cal	lifornia Department of S	Social Service	es (CDSS) County Form	s Catalo	g (PUB 69).
FORM NUMBER, REVISION DATE AND TITLE	TEMP CW 2186A (7,	•	re-To-Work Participation	n Exemp	tion Request Form
ORDER UNIT ESTIMATED			D PRICE INITIAL SUPPLY SENT		· · · · · · · · · · · · · · · · · · ·
MASTER ONLY	⊠ Free ☐ Sold				☐ Yes ☐ No
☐ New ☐ Revised	DATE OF FORM 7/11	REPLACES 411			☐ Obsolete
REQUIRED FORM-  No Change Permitted	REQUIRED FORM-  Substitute Per	mitted With P	rior DSS Approval	□Re	commended Form
UNLESS OTHERWISE SPECIFIED STOCK MAINTAINED AT:			IER:		
Department of Social Services Warehouse P.O. Box 980788			NTERNET:		
West Sacramento, CA 95798-0788			☐ INTRANET:		
	FORMS DISPOS	ITION AND S	SPECIAL INSTRUCTIO	NS	
DISPOSITION OF OLD SUPPLY  Use until exhausted			stroy		
□ When supply available in DSS Warehouse			☐ Use new form effective re		to 11-50
SE FORM IN ACCORDANCE WITH   ☐ All County Letter No. htt  ☐ Other (specify)	p://www.cdss.ca.gov/le	ettersnotices/e	entres/getinfo/acl/2011/	11-50.pdf	:
ADDITIONAL INFORMATION REGARDING FOR	RM CHANGE				

http://www.cdss.ca.gov/cdssweb/entres/forms/English/TEMPCW2186A.pdf

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.

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