NOTICE OF FORM CHANGE NO. 11-14	DATE	
		11/17/2011
TO: County Welfare Director Supply Clerk / Forms Coordinator Community Care Licensing District O District Attorney Private and Public Adoption Agencies Other	ffices	rms Management Unit
Listed below is information regarding a form char	ge. Only applicable informatio	n is shown.
This notice updates your California Department	of Social Services (CDSS) Cou	inty Forms Catalog (PUB 69).
		nded Foster Care Participation
ORDER UNIT MASTER ONLY	ESTIMATED PRICE	
New Revised 9/11	REPLACES	□ Obsolete
REQUIRED FORM- No Change Permitted Substitute I	Permitted With Prior DSS Appr	oval Recommended Form
UNLESS OTHERWISE SPECIFIED STOCK MAINTAINED AT: Department of Social Services Warehouse P.O. Box 980788	OTHER:	
West Sacramento, CA 95798-0788		
	OSITION AND SPECIAL INST	RUCTIONS
DISPOSITION OF OLD SUPPLY	Destroy	
USE NEW FORM	$oxed{\boxtimes}$ Use new form ef	fective immediately
All County Letter No. Other (specify)		
ADDITIONAL INFORMATION REGARDING FORM CHANGE		

http://www.cdss.ca.gov/cdssweb/entres/forms/English/SOC161.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.