

# Title IV-A Emergency Assistance (EA) Program Caseload Report

SEND ONE COPY OF THIS REPORT TO:  
California Department of Social Services  
Data Systems and Survey Design Bureau, M.S. 9-081  
P.O. Box 944243  
Sacramento, CA 94244-2430  
FAX: (916) 657-2074

COUNTY NAME	REPORT MONTH AND YEAR	
<b>CASELOAD</b>		
1. Emergency Assistance (EA) Child Welfare Services (CWS) cases during the month.....	<b>NUMBER OF CASES</b>	
COMMENTS		
CONTACT PERSON (Print)	TELEPHONE (       )	DATE COMPLETED
TITLE/CLASSIFICATION	FAX (       )	
<b>INSTRUCTIONS</b>		
<b>CONTENT</b>		
<p>The monthly CA 237 EA report contains statistical information on the number of Child Welfare Services cases receiving Emergency Assistance (EA) during the month in Emergency Shelters, EA/Foster Care and Crisis Resolution Services.</p>		
<b>PURPOSE</b>		
<p>This report provides county, state and federal entities with information needed for budgeting, staffing, program planning, and other purposes.</p>		
<b>DUE DATE AND CONTACT</b>		
<p>The CWD is responsible for ensuring that this report is fully and accurately completed. If portions of the report are completed by more than one entity within the CWD and/or outside agencies, the contact person responsible for submitting the report to the state shall review the report for completeness and accuracy prior to submittal. Reports are to be received on or before the 15th calendar day of the month following the report month. <b>Fax or mail reports to number/address listed above.</b></p>		
<p>Report data and the report's form and instructions are available on the CDSS, Research and Development Division (RADD) web site at: <a href="http://www.dss.cahwnet.gov/research/">http://www.dss.cahwnet.gov/research/</a>. Copies may be printed from the web site.</p>		
<p>If you have questions regarding this report, contact Data Systems and Survey Design Bureau (DSSDB) at (916) 651-8269.</p>		
<b>GENERAL INSTRUCTIONS</b>		
<p>Enter in the boxes provided near the top of the form the county name and the report month and year.</p> <p>Enter the data required for each item. If there is nothing to report for an item, enter "0". <b>Do not leave any items blank.</b></p> <p>Enter in the boxes at the end of the form the name, job title or classification, telephone and fax number of the person to contact if there are questions about the report. This person may or may not be the person who completed the report. Enter the date the report was completed.</p>		
<b>DEFINITIONS</b>		
<p><b>Case:</b> A case shall be defined as child specific; i.e., each child is a case.</p> <p>This count represents the total number of children, excluding presumptive eligibility cases, receiving Emergency Assistance services.</p>		
<b>ITEM INSTRUCTIONS</b>		
<p>1. <u>Emergency Assistance (EA) Child Welfare Services (CWS) cases during the month:</u> Enter the total number of cases receiving Emergency Assistance services in Emergency Shelters, EA/Foster Care and Crisis Resolution Services during the month.</p>		
<b>COMMENTS</b>		
<p>Use the Comments section to:</p> <ol style="list-style-type: none"> <li>1) Explain any major fluctuations in data.</li> <li>2) Explain any adjustment entries.</li> <li>3) Provide information as directed in the report instructions.</li> <li>4) Provide any other comments the county determines necessary.</li> </ol>		