

CalWORKs Welfare-to-Work Monthly Activity Report All (Other) Families

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		
PART A. ENROLLMENT DATA		DURING REPORT MONTH		
		ALL (OTHER) FAMILIES (A)	REFERRED (B)	
1. Enrollees.....	1			
2. Exemptions.....	2			
3. Removed from the Assistance Unit				
a. WTW sanctions.....	3			
b. Terminations due to time limits.....	4			
4. Entered employment.....	5			
5. Terminations due to employment.....	6			
PART B. ACTIVITIES				
6. Appraisal.....	7			
7. Assessment.....	8			
8. Reappraisal.....	9			
9. Job search & job readiness assistance.....	10			
10. Unsubsidized employment.....	11			
11. Self-employment.....	12			
12. Subsidized private sector employment.....	13			
13. Subsidized public sector employment.....	14			
14. On-the-job training (OJT).....	15			
15. Grant-based on-the-job training (OJT).....	16			
16. Work-study.....	17			
17. Supported work or transitional employment.....	18			
18. Work experience.....	19			
19. Community service.....	20			
20. Job skills training directly related to employment.....	21			
21. Vocational education training.....	22			
22. Education directly related to employment.....	23			
23. Adult basic education.....	24			
24. Satisfactory progress in a secondary school.....	25			
25. Other activities.....	26			
26. Providing childcare to community services participants.....	27			
27. Mental health services.....	28	29		
28. Substance abuse services.....	30	31		
29. Domestic abuse services.....	32	33		
a. Granted waiver of program rules (Subset of 29).....	34			
30. Number of individuals 6-29 (Unduplicated).....	35			
a. Self-initiated programs (SIPS) (Unduplicated subset of 30).....	36			
PART C. NONPARTICIPATION STATUS				
31. Noncompliance.....	37			
32. Good cause for not participating in WTW.....	38			
PART D. SUPPORTIVE SERVICES				
33. Transportation.....	39			
34. Ancillary services.....	40			
PART E. POST-EMPLOYMENT/JOB-RETENTION SERVICES				
35. Post-employment/Job-retention services.....	41			
36. Post CalWORKs 60-month time limit services.....	42			
COMMENTS				
CONTACT PERSON (Print)		TELEPHONE ()	DATE COMPLETED	
TITLE/CLASSIFICATION		FAX ()		