CalWORKs CHILD CARE REQUEST FORM AND REIMBURSEMENT RULES

CalWORKs Child Care Coverage

Eligible CalWORKs recipients can get their child care paid for by the state. To be eligible, you must be working or participating in an approved county welfare-to-work (WTW) activity. This includes any county approved CalWORKs activities or employment listed in your WTW plan. For your child care to be reimbursed, you must be found eligible for child care, and your provider has to meet certain requirements. The child care must be with an eligible provider. These are licensed child care providers, or providers who are not licensed but have their background checked and become registered through a program called "TrustLine". A grandparent, aunt, or uncle of the children, does not need a background check, but must turn in a form called a Declaration of Exemption From TrustLine Registration And Health And Safety Self-Certification (CCP1).

The state reimburses child care for children under 13, and for older children with disabilities that prevent them from being left alone. In two-parent families, if a parent is home and able to care for the children, the state will not reimburse the child care. The parent is considered available to provide care unless he/she is working, doing a county approved WTW activity, or has a condition, verified by a doctor, that prevents him/her from caring for the child. For 11 or 12 year old children, the preferred child care placement is in a program such as the After School Education and Safety Program. To get information on these programs, go to www.cde.ca.gov/ls/ba/as, or you may call the Child Care Resource and Referral Agency listed below.

You must tell your worker as soon as possible if you need child care.

IMPORTANT: The state will not pay for retroactive CalWORKs child care provided more than 30 calendar days before the date you ask your worker to get child care. If you pick a provider who must be registered with TrustLine, the state cannot pay them until they are registered. Once registered, the state can pay them for actual care provided up to 120 calendar days from the day you asked for child care reimbursements. This is why you must tell your worker as soon as possible when changing your provider, to make sure the TrustLine-registration process gets started immediately.

Child Care Request

To ask for child care, sign and return this form to your worker.

Please check one of the following:		
	I need child care assistance at this time so I can go to work or attend my WTW activity.	
	I do not need child care at this time. I understand that I must request child care from my worker if I need it in the future.	
	Before or after school care such as the After School Education and Safety Program will meet all \square or part \square of my child care needs for my 11 or 12 year old child. If this does not meet all of your child care needs, additional child care can be provided.	

I understand that CalWORKs child care is available for me to work and to attend my county approved WTW activity. If I need help to find and/or choose a child care provider, I can contact the local Child Care Resource and Referral agency listed below:

Name: Community Connection for Child Care Telephone: (661) 861-5200 or Toll Free (877) 861-5200

I understand that I must tell my worker as soon as I need child care. I understand that CalWORKs will help reimburse for child care only after I ask for the child care.

I understand that after I ask for child care, I have to give my worker certain information to see whether I am eligible. I understand that I need to request child care within 30 calendar days from the first day I received child care services from my provider.

I understand that if I choose a child care provider who is required to be TrustLine-registered, the provider is not eligible for reimbursement if they do not obtain TrustLine-registration.

I understand that my child care provider has to meet certain requirements to be reimbursed, and if my child care provider does not meet these requirements, I must pay for any child care services I get from that person.

I have read this notice or have had it read to me. I understand that if I have any questions or need additional information regarding this notice, I can ask my worker.

Case Name	Case No.	
Case Name	Case No.	
Signature	Date	
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Worker Name	Phone	