



TANF Referral for Child Care Services

Instructions for this form: This form and supporting documentation should be emailed to CAPSReferrals@dec.al.ga.gov. Please write "TANF Referral" in the email subject line. All required documentation must be provided for the case to be processed.

By completing this referral, TANF attests that the individual below is eligible for and participating in TANF employment or support services. TANF agrees to inform CAPS within 10 calendar days if the parent is no longer participating in employment or support services.

Economic Support Case Manager

Name _____ Phone _____ Email _____

Supervisor

Name _____ Phone _____ Email _____

County Director

Name _____ Phone _____ Email _____

Family Information

Name _____ Phone _____ Email _____

Mailing Address _____

Gateway Application/Confirmation # T- _____ Client ID _____

Please list the names and dates of birth for all children in the household.

Name	Date of birth
_____	_____
_____	_____
_____	_____

Which of the following documentation is in DIS?

TANF Work Plan	Proof of citizenship or qualified alien status (children)	Immunization
Provider Rate Sheet	Proof of income	Proof of identity (parent)
		Proof of residency

What is the DIS #?

Note: Any required documents that are not in Gateway must be attached to the email when the referral is submitted.



Is this individual participating in TANF employment or support services? Yes No

TANF Status: New Current Recipient Transitioned from TANF due to employment

If TANF Status is New or Current Recipient, complete this section.

Activity: _____

Parent 1 hours per week: _____ Parent 2 hours per week: _____

If TANF Status is Transitioned from TANF due to employment, complete this section.

If the family transitioned from TANF due to employment, was it within the past 60 days?

Yes No

Enter employment hours per week below.

Parent 1 employment hours per week: _____ Parent 2 employment hours per week: _____

Internal Use – CAPS

All required documentation received.

Application not processed due to:

Incomplete referral form

Missing documentation:

TANF Work Plan	Proof of citizenship or qualified alien status (children)	Immunization
Provider Rate Sheet	Proof of income	Proof of identity (parent)
		Proof of residency

Comments: