

## **DWP/MFIP Child Care Transmittals**



#### **Transmittals**

Impacts Employment - Priority

Continuation of Open Case

Open or Re-Open Case

DWP/MFIP Child Care Transmittal Request for Authorization



Complete all fields in this section

 $\rightarrow$ 

TODAY'S DATE: 5/1/2023 Employment Counselor Name: Donald Smith
Child Care Worker Name: Lisa Sellers Counselor Phone Number: 651-266-1234
Worker Phone Number: 651-266-2345 Counselor E-mail Address: Donald.smith@co.ramsey.mn.us
Agency Name: Workforce Solutions

PARTICIPANT INFORMATION

Participant Name: Mickey Mouse Maxis Case Number: 234523

2nd Parent Name: 234523

AUTHORIZATION INFORMATION

Complete participant name and case number. If there are two participants in the household, each participant needs their own transmittal.



Current Activity	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Job Search Start: End:		8AM-3PM	8AM-3PM	8AM-3PM	8AM-3PM	8AM-3PM	
Employment Start: End:							
Training/School Start: End:							
Study Time Start: End:							
Social Service Start: End:							
Work Experience Start: End:							
Housing Start: End:							

Complete the activities above on field with a start date, but an end date is not required. Complete the travel time field.

SUPPORTING DOCUMENTATION INFORMATION											
	Att	ache	i	In E	SI	File		Att	ached	In E	S File
Employment Verification							Training/School Schedule				
Work Schedules							Job Search Logs				X
Training/School Monthly Attendance							Other:				

Comments:

The above schedule includes travel time: Yes

This transmittel form is to request authorization from Ramsey County to assist with payment for child care for Employment Plan activities; I understand that this transmittal is NOT an authorization for child care. Ramsey County Child Care Unit will issue a separate authorization form if child care is approved. I also understand that if the participant's activities change, a new transmittal form may be required.

Complete the supporting documentation information section for all approved activities:

- If indicated as attached, the verification must be attached.
- If indicated in ES, the verification does not need to be provided.
- If the supporting documentation section is not complete, the transmittal cannot be used.
- If the supporting documentation section, does not correspond with the approved activity, the transmittal cannot be used. For instance, job search is approved but work schedules are in ES file.



# **Activity begin and end dates**

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DWP/MFIP Child Care Transmittal Request for Authorization



TODAY'S DATE:	2/2/2022	Employment Counselor Name:	Donald Smith
Child Care Worker Name:	Lisa Sellers	Counselor Phone Number:	651-266-1234
Worker Phone Number:	651-266-2345	Counselor E-mail Address:	Donald.smith@co.ramsey.mn.us
		Agency Name:	Workforce Solutions

PARTICIPANT INFORMATION								
Participant Name:	Mickey Mouse	Maxis Case Number:	234523					
2nd Parent Name:								

If participant	is anguard in mor			INFORMATION		a daily start and a	nd times
Current Activity	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Job Search Start: End:							
Employment Start: End:							
Training/School Start: End:		8AM-4PM	8AM-4PM	8AM-4PM	8AM-4PM	8AM-4PM	
Study Time Start: End:							
Social Service Start: End:							
Work Experience Start: End:							
Housing Start: End:							
The activities abo	ve on: 2/5/201	8 and end on:	4/30/2013				

Activity begin date is 2018 and end date is 2013

T	ne	activit	ties	above	on:	2/5/	2018	and	end	on:	4/30/	2013
П	ne	above	scl	nedule	incl	udes	trave	el tin	ne: Y	es		

SUPPORTING DOCUMENTATION INFORMATION								
	Attached	In ES File		Attached	In ES File			
Employment Verification			Training/School Schedule		$\boxtimes$			
Work Schedules			Job Search Logs					
Training/School Monthly Attendance								

Comments:

This transmittal form is to request authorization from Ramsey County to assist with payment for child care for Employment Plan activities; I understand that this transmittal is NOT an authorization for child care. Ramsey County Child care Unit will size a separate authorization form if child care is approved. I also understand that if the participant's activities change, a new transmittal form may be required.



# **Activity begin and end dates**

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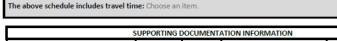


TODAY'S DATE:	3/16/2023	Employment Counselor Name:	Donald Smith
Child Care Worker Name:	Lisa Sellers	Counselor Phone Number:	651-266-1234
Worker Phone Number:	651-266-2345	Counselor E-mail Address:	Donald.smith@co.ramsey.mn.us
		Agency Name:	Workforce Solutions

PARTICIPANT INFORMATION								
Participant Name:	Mickey Mouse	Maxis Case Number:	234523					
2nd Parent Name:								

If participant i	AUTHORIZATION INFORMATION If participant is engaged in more than one activity, please provide information for all that apply, including daily start and end times.								
Current Activity	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday		
Job Search Start: End:									
Employment Start: End:		2PM-8PM	2PM-8PM	2PM-8PM	2PM-8PM				
Training/School Start: End:									
Study Time Start: End:									
Social Service Start: End:									
Work Experience Start: End:									
Housing Start: End:									

Activity above on begin date was not provided and travel time was not answered



SUPPORTING DOCUMENTATION INFORMATION							
	Attached	In ES File		Attached	In ES File		
Employment Verification	$\boxtimes$		Training/School Schedule				
Work Schedules			Job Search Logs				
Training/School Monthly Attendance			Other:				

Comments:

This transmittal form is to request authorization from Ramsey County to assist with payment for child care for Employment Plan activities; I understand that this transmittal is NOT an authorization for child care. Ramsey County Child Care Unit will issue a separate authorization form if child care is approved. I also understand that if the participant's activities change, a new transmittal form may be required.



# **Overlapping Activities**

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TODAY'S DATE:	2/2/2022	Employment Counselor Name:	Donald Smith
Child Care Worker Name:	Lisa Sellers	Counselor Phone Number:	651-266-1234
Worker Phone Number:	651-266-2345	Counselor E-mail Address:	Donald.smith@co.ramsey.mn.us
		Agency Name:	Workforce Solutions

PARTICIPANT INFORMATION					
Participant Name:	Mickey Mouse	Maxis Case Number:	234523		
2nd Parent Name:					

Current Activity	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Job Search Start: End:							
Employment Start: End:			7:30AM- 4PM	7:30AM- 4PM	7:30AM- 4PM	7:30AM- 4PM	7:30AM- 4PM
Training/School Start: End:		9:30AM- 10AM	9:30AM- 10AM	9:30AM- 10AM	9:30AM- 10AM	9:30AM- 10AM	
Study Time Start: End:							
Social Service Start: End:							
Work Experience Start: End:							
Housing Start: End:							

The activities above on: 9/20/2022 and end on: 9/20/2023 The above schedule includes travel time: Yes

SUPPORTING DOCUMENTATION INFORMATION						
	Attached	In ES File		Attached	In ES File	
Employment Verification		$\boxtimes$	Training/School Schedule			
Work Schedules			Job Search Logs			
Training/School Monthly Attendance		$\boxtimes$	Other:			

Comments:

This transmittal form is to request authorization from Ramsey County to assist with payment for child care for Employment Plan activities; I understand that this transmittal is NOT an authorization for child care. Ramsey County Child Care Unit will issue a separate authorization form if child care is approved. I also understand that if the participant's activities change, a new transmittal form may be required.

Authorized activities overlap Tues - Fri



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TODAY'S DATE:	3/16/2023	Employment Counselor Name:	Donald Smith
Child Care Worker Name:	Lisa Sellers	Counselor Phone Number:	651-266-1234
Worker Phone Number:	651-266-2345	Counselor E-mail Address:	Donald.smith@co.ramsey.mn.us
		Agency Name:	Workforce Solutions

PARTICIPANT INFORMATION						
Participant Name:	Mickey Mouse	Maxis Case Numbe	er: 234523			
2nd Parent Name:						

Current Activity	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Job Search Start: End:	Junuay	12:30AM- 4:30PM	9:30AM- 4:30PM	8:30AM- 4:30PM	8:30AM- 4:30PM	8:30AM- 4:30PM	Suturuuy
Employment Start: End:							
Training/School Start: End:							
Study Time Start: End:							
Social Service Start: End:		8:30AM- 12:30PM	8:30AM- 9:30AM				
Work Experience Start: End:							
Housing Start: End:							

The above schedule includes travel time: No

Job search and social service is authorized but the supporting documentation is incomplete

SUPPORTING DOCUMENTATION INFORMATION						
	Attached	In ES File		Attached	In ES File	
Employment Verification			Training/School Schedule			
Work Schedules			Job Search Logs			
Training/School Monthly Attendance			Other:			

Comments: Mickey will turn in job/activity logs at the end of the month.

This transmittal form is to request authorization from Ramsey County to assist with payment for child care for Employment Plan activities; I understand that this transmittal is NOT an authorization for child care. Ramsey County Child Care Unit will issue a separate authorization form if child care is approved. I also understand that if the participant's activities change, a new transmittal form may be required.



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Continuation of Open Case

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TODAY'S DATE:	7/6/2022	Employment Counselor Name:	Donald Smith
Child Care Worker Name:	Lisa Sellers	Counselor Phone Number:	651-266-1234
Worker Phone Number:	651-266-2345	Counselor E-mail Address:	Donald.smith@co.ramsey.mn.us
		Agency Name:	Workforce Solutions

PARTICIPANT INFORMATION					
Participant Name:	Mickey Mouse	Maxis Case Number:	234523		
2nd Parent Name:					

If participant i	AUTHORIZATION INFORMATION If participant is engaged in more than one activity, please provide information for all that apply, including daily start and end times.							
Current Activity	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	
Job Search Start: End:								
Employment Start: End:		8:30AM- 5:30PM	8:30AM- 5:30PM	8:30AM- 5:30PM	8:30AM- 5:30PM	8:30AM- 5:30PM		
Training/School Start: End:								
Study Time Start: End:								
Social Service Start: End:								
Work Experience Start: End:								
Housing Start: End:								

The activities above on: 10/1/2022 and end on: Click here to enter a date. The above schedule includes travel time: No

Paystubs were attached to the transmittal.

SUPPORTING DOCUMENTATION INFORMATION						
	Attached	In ES File		Attached	In ES File	
Employment Verification	$\boxtimes$		Training/School Schedule			
Work Schedules			Job Search Logs			
Training/School Monthly Attendance			Other: Child Care Application		X	

Comments:

This transmitted form is to request authorization from Ramsey County to assist with payment for child care for Employment Plan activities; I understand that this transmittal is NOT an authorization for child care. Ramsey County this Care Unit will issue a separate authorization form if child care is approved. I also understand that if the participant's activities change, a new transmittal form may be required.

ccap application cannot be used as supporting documentation on a transmittal



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TODAY'S DATE:	7/6/2022	Employment Counselor Name:	Donald Smith
Child Care Worker Name:	Lisa Sellers	Counselor Phone Number:	651-266-1234
Worker Phone Number:	651-266-2345	Counselor E-mail Address:	Donald.smith@co.ramsey.mn.us
		Agency Name:	Workforce Solutions

PARTICIPANT INFORMATION						
Participant Name:	Mickey Mouse	Maxis Case Number:	234523			
2nd Parent Name:						

If participant i	s enaaaed in moi			INFORMATION information for all to	hat apply. includin	a dailv start and e	nd times.
Current Activity	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Job Search Start: End:							
Employment Start: End:		8:30AM- 5:30PM	8:30AM- 5:30PM	8:30AM- 5:30PM	8:30AM- 5:30PM	8:30AM- 5:30PM	
Training/School Start: End:							
Study Time Start: End:							
Social Service Start: End:							
Work Experience Start: End:							
Housing Start: End:							

The activities above on: 10/1/2022 and end on: Click here to enter a date. The above schedule includes travel time: No

Paystubs were attached to the transmittal.

SUPPORTING DOCUMENTATION INFORMATION								
	Attached	In ES File		Attached	In ES File			
Employment Verification	$\boxtimes$		Training/School Schedule					
Work Schedules			Job Search Logs					
Training/School Monthly Attendance			Other: Child Care Application		X			

Comments:

This transmittal form is to request authorization from Ramsey Country to assist with payment for child care for Employment Plan activities; I understand that this transmittal is NOT an authorization for child care. Ramsey Country Child Care unit will issue a separate authorization form if child care is approved. I also understand that if the participant's activities change, a new transmittal form may be required.

cCAP application cannot be used as supporting documentation on a transmittal



Impacts Employment - Priority

Continuation of Open Case

Open or Re-Open Case

DWP/MFIP Child Care Transmittal Request for Authorization



TODAY'S DATE:	5/10/2023	Employment Counselor Name:	Donald Smith
Child Care Worker Name:	Lisa Sellers	Counselor Phone Number:	651-266-1234
Worker Phone Number:	651-266-2345	Counselor E-mail Address:	Donald.smith@co.ramsey.mn.us
		Agency Name:	Workforce Solutions

PARTICIPANT INFORMATION						
Participant Name:	Mickey Mouse	Maxis Case Number:	234523			
2nd Parent Name:						

AUTHORIZATION INFORMATION If participant is engaged in more than one activity, please provide information for all that apply, including daily start and end times.							
Current Activity	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Job Search Start: End:							
Employment Start: End:		8AM-3PM	8AM-3PM	8AM-3PM	8AM-3PM	8AM-3PM	
Training/School Start: End:							
Study Time Start: End:							
Social Service Start: End:							
Work Experience Start: End:				·			
Housing Start: End:							

Days and times for therapy not provided

The above schedule includes travel time: No

SUPPORTING DOCUMENTATION INFORMATION								
Attached	In ES File		Attached	In ES File				
	$\boxtimes$	Training/School Schedule						
		Job Search Logs						
		Other: therapy logs		X				
	Attached	Attached In ES File	Attached In ES File Training/School Schedule Job Search Logs	Attached In ES File Attached  Training/School Schedule  Job Search Logs				

ES worker disclosed taking clients verbal for hours

Comments: A new transmittal for above activities. Participant verbally disclosed these hours and attend 1 to 2 hours for each week. The activities for therapy is various throughout the week.



### QUESTIONS?