

FAMILY INDEPENDENCE ADMINISTRATION

Seth W. Diamond, Executive Deputy Commissioner



James K. Whelan, Deputy Commissioner Policy, Procedures and Training

Lisa C. Fitzpatrick, Assistant Deputy Commissioner Office of Procedures

POLICY BULLETIN #07-50-EMP

REVISIONS TO THE BEGIN PROGRAM REFERRAL LETTER (W-573XX)

Detai	Cubtonia/a).
Date:	Subtopic(s): Forms
April 25, 2007	Forms
☐ This procedure can	This policy bulletin is to inform Job Center staff that the BEGIN
now be accessed on the.	Program Referral Letter (W-573XX) has been revised as follows:
FIAweb	
	The language in the first paragraph was changed to read:
	The BEGIN Managed Programs coordinate services to help public assistance participants acquire basic literacy and vocational skills and to successfully transition from welfare to work. Based upon the completion of your educational testing and/or Employability Plan at your current activity, you have been assigned to the BEGIN Program described below.
	A third text box was added to indicate whether the appointment is mandatory or non-mandatory.
	In addition, Action Code 124E (BEGIN Employment Plus Mandatory) and Action Code 149B (BEGIN Employment Plus Non-mandatory) have been added to the W-573XX template.
	When a Worker refers a participant to any of the BEGIN Managed Programs via the Employment Plan (EP), the online W-573XX will only print the relevant language for the program being selected. The Worker should ensure that the notice generated matches the correct program.
	When the BEGIN Employment Plus (BE+) Part-Time Program is selected in the EP, NYCWAY will post Action Code 124E and the following paragraphs will print in the W-573XX :

HAVE QUESTIONS ABOUT THIS PROCEDURE?
Call 718-557-1313 then press 2 at the prompt followed by 765 or send an e-mail to *FIA Call Center*

Box 1

The BEGIN Employment Plus (BE+) program will enhance your skills and assist you in finding a full-time Job. This program is available in the evenings and Saturdays to accommodate your current employment schedule. The schedule is as follows: Tuesdays, Wednesdays and Thursdays 5:30 PM to 8:30 PM and on Saturdays 9 AM to 3 PM.

Box 3

This is a mandatory engagement appointment. Failure to fulfill all work activity requirements may result in the reduction or termination of your public assistance and/or Food Stamp benefits. There are no work requirements for Medicaid.

If the BEGIN Employment Plus (BE+) Full-Time program is selected, NYCWAY will post Action Code **149B** and the following paragraphs will print in the **W-573XX**:

Box 1

BEGIN Employment Plus (BE+) program will help you enhance your skills and assist you in finding a better paying job. You will not have to interrupt your current work schedule to participate in this program. This program is available in the evenings and Saturdays to accommodate your current employment schedule. The schedule is as follows: Tuesdays, Wednesdays and Thursdays 5:30 PM to 8:30 PM and on Saturdays 9 AM to 3 PM. You will be able to arrange a schedule with the program coordinator that accommodates your work hours.

Box 3

As long as you are employed full-time, this service to you is optional. However, we strongly encourage you to take advantage of this opportunity.

A sample of the **W-573XX** is attached.

Center Directors must ensure that all prior versions of the **W-573XX** are removed from circulation and recycled.

Effective Immediately

☐ Please use Print on Demand to obtain copies of forms.

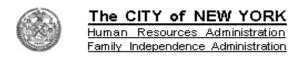
Attachments:

Attachment A Snippet language

W-573XX BEGIN Program Referral Letter (Rev 4/25/07) W-573XX (S) BEGIN Program Referral Letter (Rev. 4/25/07)

(Spanish)

Form W-573XX (page 1) LLF Rev. 4/25/07



Date:
Case Number:
Case Name:
Telephone:
Job Center:
BEGIN Program Referral Letter The REGIN Managed Programs coordinate services to help public assistance participants acquire basic literacy.
The BEGIN Managed Programs coordinate services to help public assistance participants acquire basic literacy and vocational skills and to successfully transition from welfare to work. Based upon the completion of your educational testing and/or Employability Plan at your current activity you have been assigned to the BEGIN Program described be ow. If you have children, it is important that you continue the child care arrangements that are already in place for them. However, if there is a problem with your child care, you must immediately inform your JOS/Worker and request a child care provider envolument form and any other needed documents. Follow the instructions your Worker gives you regarding an appointment to return the completed forms. In order to avoid delays or disruption in services, all child care arrangements should be completed at least one week before your assignment start date
The BEGIN
You will receive carfare and child care as long as you are fully participating in the program. Your appointment is indicated below:

Appointment Date: ______ Time: _____ Telephone: _____ Location Name: City: ______ State: ____ Zip: _____

(see next page)

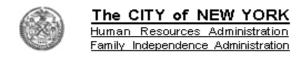
Travel Directions:	2

If you are unable to keep this appointment, please call the telephone number above prior to your reporting time to arrange for a new appointment.

3			



Form W-573XX (S) (page 1) LLF



Fecha:	
Número del Caso:	
Nombre del Caso:	
Teléfono:	
Centro de Trabajo:	

Carta de Cita al Programa BEGIN

Los programas de BEGIN coordinan servicios para ayudar a participantes de asistencia pública a desarrollar las aptitudes vocacionales y de lectura y escritura básicas para lograr la transición del bienestar público al trabajo. Después de usted haber completado sus pruebas educacionales y/o su Plan de Empleabilidad (Employability Plan) en su actividad actual, se le ha asignado al Programa BEGIN corno indicado más abajo.

Si tiene hijos, es importante que usted conserve los arreglos de cuidado infantil ya establecidos para ellos. Sin embargo, en caso de cualquier problema con el cuidado infantil, debe notificarle inmediatamente a su Trabajador/JOS y pedir un formulario de inscripción de proveedor de cuidado infantil y cualquier otro documento necesario. Siga las instrucciones que le dé su Trabajador respecto a una cita para devolver los formularios llenados. Para evitar retrasos o interrupciones en los servicios, todos los arregios de cuidado infantil deben ser completados por lo menos una semana antes de la fecha en que comience su asignación.

El Programa BEGIN			
1			
Usted recibirá su tarifa de tran Su cita se indica a continuaciór		npre y cuando participe plena	amente en el programa.
Fecha de la Cita:	Hora: _	Teléfono:	
Local:			
Ciudad:		do: Código Postal:	
Gludad	Lotat	do Obdigo i Ostai	

(vea la próxima página)

Indicaciones de Viaje:	2

Si usted no puede acudir a la cita, por favor llame antes de la hora de su cita al número teléfonico que aparece más arriba para programar otra cita.

3			

