

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 #04-195-EMP

SAFETY NET CASH ASSISTANCE (SNCA) PARTICIPANT REFERRAL TO BEGIN PROGRAMS

Date: November 1, 2004	Subtopic(s): Employment
☐ This procedure can now be accessed on the FIAweb.	The purpose of this policy bulletin is to inform the Job Opportunity Specialists (JOS)/Workers at the Job Centers and the Skills Assessment and Placement (SAP) vendor sites that Begin Employment Gain Independence Now (BEGIN), which until now only serviced Family Assistance (FA) participants, will now service eligible Safety Net (SN) participants at selected sites in Brooklyn and Manhattan.
BEGIN Language Work Study (BLWS)	Safety Net Cash Assistance (SNCA) participants who have been assessed as having a language and literacy employment barrier can be referred to the BEGIN Language Work Study (BLWS) program. BLWS is designed to improve the participant's English language skills and employability by simultaneously offering work readiness and language training/support along with work experience.
	The program currently has two locations:
	 248 Duffield Street, 5th floor, Brooklyn, New York and 450 West 41st Street, 5th floor, Manhattan, New York.
	To refer a participant to the BLWS program, the JOS/Worker must:
	 Select BEGIN Managed Programs from the Assignment Menu in NYCWAY. Select Language for BLWS from the BEGIN Managed Programs Selection Menu. Select the preferred BLWS site. The BEGIN Program Referral Letter (W-573XX) will print out, informing the participant of the appointment date, time and location.

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*

Note: JOS/Workers should note that 25% of the slots in the BLWS are set aside for SNCA.

BEGIN Employment Plus (BE+)

SNCA and Safety Net Non-Cash (SNNC) participants who are employed twenty or more hours per week can be referred to the BEGIN Employment Plus program located at 248 Duffield Street, 5th floor, Brooklyn New York. BEGIN Employment Plus (BE+) is a post-employment program that offers evening and Saturday classes in English as a Second Language (ESL), General Equivalency Diploma (GED), Adult Basic Education (ABE) and computer training. The emphasis of the BEGIN Employment Plus program is to provide participants with the opportunity to continue their education while working thus leading to a career path that will ultimately result in the participant obtaining full self-sufficiency.

To refer a participant to the BE+ program, the JOS/Worker must:

- Select BEGIN E+ from the BEGIN Managed Programs
 Assignment Menu in NYCWAY.
- The BEGIN Employment Plus (W-500B) referral letter will print out informing the participant of the appointment date, time and location.

JOS/Workers must follow the steps in Policy Directive #03-46-EMP (Referrals to BEGIN Managed Programs) when making a referral.

Effective Immediately

Attachments

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

W-500B BEGIN Employment Plus Mandatory Appointment
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Notice for Part-Time Employed Participants

(Rev. 11/1/04)

W-500B(S) BEGIN Employment Plus Mandatory Appointment

Notice for Part-Time Employed Participants

(Spanish) (11/1/04)

W-573XX BEGIN Program Referral Letter (Rev. 11/1/04)

W-573XX(S) BEGIN Program Referral Letter (Spanish)

(Rev. 11/1/04)

Form W-500B (Page 1)	LLF
Rev. 11/1/04	



Date:	
Case Number:	
Case Name:	
CIN:	
Center:	
Action Code:	

BEGIN Employment Plus Mandatory Appointment Notice for Part-Time Employed Participants

As long as you are not employed full-time and continue to receive public assistance, New York State law requires that you be engaged in an active and continuing search for employment. As part of this obligation, you are required to work with a BEGIN Employment Plus vendor who will help you to enhance your skills and find full-time employment.

If you have children under 13 years of age, you may need to make child care arrangements. If you already have a child care provider, have your provider complete and return the enclosed Child Care Provider Form (W-273B) to you. You must bring the completed form with you to your BEGIN Employment Plus appointment.

If you are unable to find a child care provider, call the Child Care Services Unit at (212) 835-7610. It is your responsibility to make child care arrangements or to let us know that you have been unable to find appropriate child care. In order to avoid delays, all child care arrangements must be completed at least one week before your BEGIN Employment Plus vendor appointment.

Your BEGIN Employment Plus vendor appointment is indicated on the next page. To the best of our knowledge, the appointment has been made for a time that does not interfere with your work schedule.

Appointment Date:		Time:	Telephone:							
Location:										
	Location Name									
	Address Line 1									
	Address Line 2									
	City		State	Zip Code						
Travel Dire	ections:									

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

This is a mandatory engagement appointment. Failure to keep this appointment or failure to participate as required may result in the reduction of your current public assistance benefits for a specific period of time or termination of your public assistance benefits. Please bring this letter to your appointment.

Please note: Failure to comply with public assistance work requirements has no effect on your Medicaid eligibility. There are no work requirements for Medicaid.

Form W-500B (S) (Page	1)	LLF
11/1/04		



Fecha:	
Número del Caso:	
Nombre del Caso:	
CIN:	
Centro:	
Código de Acción:	

Programa de Empleo BEGIN Plus Aviso de Cita Obligatoria para los Participantes Empleados a Tiempo Parcial

Mientras que usted no esté trabajando a tiempo completo y continúe recibiendo asistencia pública, las leyes del Estado de Nueva York requieren que esté buscando trabajo activa y seguidamente. Como parte de esta obligación, usted tiene que colaborar con un vendedor del Programa de Empleo BEGIN Plus (BEGIN Employment Plus) que le ayudará a mejorar sus capacidades de trabajo y a encontrar empleo a tiempo completo.

Si usted tiene niños menores de 13 años de edad, puede que necesite hacer arreglos para cuidado infantil. Si ya tiene un proveedor de cuidado infantil, su proveedor tiene que llenar el formulario (W-273B) adjunto del Proveedor de Cuidado Infantil (Child Care Provider Form) y traer el formulario lleno del programa BEGIN Employment Plus a su cita.

Si usted no puede encontrar un proveedor de cuidado infantil, llame a la Unidad de Servicios de Cuidado Infantil (Child Care Services Unit) al (212) 835-7610. Usted tiene la responsabilidad de hacer arreglos para cuidado infantil, o avisarnos de que no ha podido encontrar cuidado infantil apropiado. Para evitar demoras, todo arreglo de cuidado infantil debe ser llevado a cabo por lo menos una semana antes de su cita con el vendedor del programa de Empleo BEGIN Employment Plus.

Su cita con el contratista del Programa de Empleo BEGIN Plus (BEGIN Employment Plus) está indicada en la página siguiente. Según nosotros sepamos, la cita se ha fijado a una hora que no interfiere con su horario de trabajo.

de la Cita:	Hora:	Teléfono:	Teléfono:							
Nombre del Local										
Línea de Dirección 1										
Línea de Dirección 2										
Ciudad		Estado	Código Postal							
iones de Viaje:										
	Nombre del Local Línea de Dirección 1 Línea de Dirección 2 Ciudad	Nombre del Local Línea de Dirección 1 Línea de Dirección 2 Ciudad	Nombre del Local Línea de Dirección 1 Línea de Dirección 2 Ciudad Estado							

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.

Esta cita de participación es obligatoria. El no acudir a esta cita o no participar como se require puede resultar en la reducción de sus beneficios actuales de asistencia pública por un período de tiempo determinado o en la terminación de sus beneficios de asistencia pública. Favor de traer esta carta a su cita.

Por favor note: El no cumplir con los requisitos de trabajo de asistencia pública no afecta su derecho a Medicaid. No existen requisitos de trabajo para Medicaid.

Form W-573XX LLF/ML	F
Rev. 11/1/04	

The CI	TY of NEW YORK
	esources Administration
Family Ind	ependence Administration
Date:	
Case Number: _	
Case Name: _	
Гelephone Number: _	
Job Center:	

BEGIN Program Referral Letter

Federal and State welfare laws require all nonexempt adults to be engaged in work activities as a condition of eligibility for public assistance and Food Stamp benefits. Upon completion of your educational testing and your Employability Plan at your current activity, it was determined that you are now required to report to an assignment that will assist you in further developing the skills needed to attain self-sufficiency.

If you have children, it is important that you continue the child care arrangements that are already in place for your child(ren). However, if there is a problem with your child care, you must immediately inform your JOS/Worker and request a Child Care Provider Application and Voucher Form (W-273B) 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.

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The BEG	IN																		
				4															
You will r below:	receive cart	are <mark>an</mark> d	child	care	s long	as '	you a	re fu	lly p	arti <mark>cip</mark>	ating	in the	prog	ram.	Your	appo	intmen	t is i	ndicated
Location:																			
	Location Nam	е																	
	Address Line	1																	
	Address Line	2																	
	City									St	ate		Zip Co	ode					
Appointm	ent Date: _				Time	e:			Te	lephor	ne:								
Travel Dir	rections:																		

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

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.

Form W-573XX (S) LLF/MLF Rev. 11/1/04	The CITY of NEW YORK Human Resources Administration Family Independence Administration
	Número del Caso:
	Nombre del Caso:
	Número de Teléfono:
	Centro de Trabajo:
Carta	a de Referencia del Programa BEGIN
máximo de 35 horas por semana com Alimentos. Al haber completado usted su	n que los adultos no exonerados deben participar en actividades de trabajo hasta un o requisito de elegibilidad para beneficios de asistencia pública y Cupones para us pruebas educacionales y su plan de empleabilidad en su actividad actual se lleg presentarse a una asignación que le ayudará mejor a desarrollar las cualidade
embargo, en caso de cualquier problem pedirle una Solicitud y Comprobante de l las instrucciones impartidas por su Traba	conserve los arreglos de cuidado infantil ya establecidos para su(s) niño(s). Sina con el cuidado infantil, debe notificarle inmediatamente a su Trabajador/JOS y Proveedor de Cuidado Infantil (W-273B) y cualquier otro documento necesario. Sigai jador en relación a una cita para devolver los formularios llenos. Para evitar retrasos es arreglos de cuidado infantil deben de hacerse por lo menos una semana antes de
El Programa BEGIN	
Usted recibirá su tárifa de transporte y d	cuidado infantil siempre y cuando participe plenamente en el programa. Su cita se

indica a continuación:

Local:				
	Nombre del Local			
	Línea de Dirección 1			
	Línea de Dirección 2			
	Ciudad		Estado	Código Postal
Fecha de la Cita:		Hora:	Teléfono:	
Indica	ciones de Viaje:			

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.

Esta cita de participación es obligatoria. El no cumplir con todos los requisitos de actividades de trabajo puede resultar en una reducción o terminación de su asistencia pública y/o Beneficios de Cupones para Alimentos. No existen requisitos de trabajo para Medicaid.