

FAMILY INDEPENDENCE ADMINISTRATION

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POLICY BULLETIN #04-44-OPE

CONSOLIDATION OF NYCWAY NOTICES

Date: March 12, 2004	Subtopic(s): Forms
 This procedure can now be accessed on the FIAweb.	<p>The purpose of this bulletin is to inform staff that, in preparation for the implementation of system-generated multilingual forms, selected NYCWAY notices have been consolidated into new or existing forms. Form numbers have been assigned to the new NYCWAY forms. All forms are designed with new standardized formats, as follows:</p> <ul style="list-style-type: none">• The Spanish language text has been separated from the English language form to facilitate the multilingual translation of forms.• The address area on the upper left-hand side of the forms, the logo and the data underneath the logo have been removed. The new standardized format for each has been added instead.• The body of each form provides the telephone number of the appointment destination, a more detailed appointment address listing, and an area to specify the travel directions.• The Social Security number field is not being provided in response to confidentiality concerns.• A box has been added to accommodate specific language that relates to each code.

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*

The following form replaces NYCWAY notices associated with Action Codes, indicated below:

W-500M Notice to Report Employment Information

This form is associated with Action Codes:

108A Call-in Letter - Incomplete Information (TANF)

108B Call-in Letter - Incomplete Information (SNA)

The consolidation of these notices does not affect the current process or use of the NYCWAY codes associated with the various actions. However, each consolidated form can now be driven by one or more NYCWAY action codes according to subject matter.

Effective Immediately

Forms can now be accessed through Print on Demand at all Job Centers.

Attachments:

W-500M Notice to Report Employment Information (3/12/04)

W-500M(S) Notice to Report Employment Information (Spanish) (3/12/04)



Date: _____
Case Type: _____
Case Number: _____
Caseload: _____
Center: _____
Action Code: _____

Notice to Report Employment Information

The agency has been informed that you are now employed. Our records, however, are missing important information regarding your employment. We therefore require that you submit the following:

- pay stubs for the last four weeks (originals – not photocopies);
- a letter from your employer on his/her official letterhead verifying the date you started working, hourly wage, number of hours per week and the frequency of pay; or
- Other: _____

In addition, if you pay for child care during the hours that you are working and are not receiving assistance for this expense, have the enclosed Child Care Provider and Voucher Form (**W-273B**) completed and submit it with the required documents. We will use the information you give us to determine your correct public assistance and Food Stamp benefits.

The required documents must be submitted no later than _____. You may bring them in person to the location listed below or mail them in, using the enclosed business-reply envelope.

Appointment Date: _____ Day: _____ Time: _____ Phone: _____

Location: _____
Location Name

Address Line 1

Address Line 2

City _____ State _____ Zip Code _____

Travel Directions:

This is a mandatory eligibility appointment. Failure to comply and/or cooperate without good cause may result in the closing of your public assistance case.

Sincerely,

Catherine McAlevey
Deputy Commissioner

Encl: Child Care Provider and Voucher Form (**W-273B**)
Business-reply envelope



Fecha: _____

Tipo de Caso: _____

Número del Caso: _____

Unidad de Casos: _____

Centro: _____

Código de Acción: _____

Aviso para Presentar Información de Empleo

La agencia ha sido informada de que usted está actualmente empleado. Sin embargo, a nuestros archivos les falta información importante sobre su empleo.

Por lo tanto se requiere que usted presente lo siguiente:

- talones de paga de las cuatro últimas semanas (originales – no fotocopias);
- una carta de su empleador en su membrete oficial que comprueba la fecha en que empezó a trabajar, cuanto gana por hora, el salario bruto, el número de horas a la semana, y la frecuencia de pagos; o
- Otro: _____

Además, si usted paga por cuidado infantil durante las horas en que trabaja, pero no recibe asistencia para este gasto, llene el formulario del Solicitud y Formulario de Comprobante para Proveedor de Cuidado para Niños (W-273B [S]) (Child Care Provider Application and Voucher Form) adjunto, y sométalo con los documentos requeridos. Hemos de utilizar la información que nos proporcione para determinar exactamente su asistencia pública y Beneficios de Cupones para Alimentos.

Los documentos requeridos deben ser entregados antes del _____. Usted puede traerlos en persona al lugar indicado a continuación o enviarlos por correo en el sobre adjunto con la dirección del remitente.

Fecha de la Cita: _____ Día: _____ Hora: _____ Teléfono: _____

Local: _____

Nombre del Local

Línea de Dirección 1

Línea de Dirección 2

Ciudad

Estado

Código Postal

Indicaciones de Viaje:

Esta cita de elegibilidad es obligatoria. El no cumplir/cooperar sin motivo suficiente puede resultar en el cierre de su caso de asistencia pública.

Atentamente,

Catherine McAlevey
Deputy Commissioner

Adjunto: Solicitud y Formulario de Comprobante para Proveedor de Cuidado para Niños (W-273B[S])
Sobre con la dirección del remitente