



George E. Pataki
Governor

NEW YORK STATE
OFFICE OF TEMPORARY AND DISABILITY ASSISTANCE
40 NORTH PEARL STREET
ALBANY, NY 12243-0001

Robert Doar
Acting Commissioner

Informational Letter

Section 1

Transmittal:	03 INF 38
To:	Local District Commissioners
Issuing Division/Office:	Division of Program Support & Quality Improvement
Date:	October 22, 2003
Subject:	Availability of the following forms in Arabic and Chinese: <ul style="list-style-type: none"> • LDSS-2921 Statewide-AR: "Common Application" (Rev.5/02) (Arabic) • PUB-1301 Statewide-AR: "How to Complete the Application" (Rev.5/02) (Arabic) • LDSS-2921 Statewide-CH: "Common Application" (Rev.5/02) (Chinese) • PUB-1301 Statewide-CH: "How to Complete the Application" (Rev.5/02)(Chinese)
Suggested Distribution:	Temporary Assistance Food Stamp Directors Medical Assistance Directors Director of Services CAP Coordinators Staff Development Coordinators Child Support Enforcement Coordinators Employment Coordinators Forms Coordinators WMS Coordinators
Contact Person(s):	John Paolucci, Assistance Division Director (518) 474-1683
Attachments:	LDSS-2921 Statewide-AR, LDSS-2921 Statewide-CH, PUB-1301 Statewide-AR and PUB-1301 Statewide-CH
Attachment Available On – Line:	<input checked="" type="checkbox"/>

Filing References

Previous ADMs/INFs	Releases Cancelled	Dept. Regs.	Soc. Serv. Law & Other Legal Ref.	Manual Ref.	Misc. Ref.
85 ADM-38 89 INF-53 95 INF-8 95 INF-29 02 INF-20	95 INF-29 95 INF-8	350.4 351.21 360.1 369.1 369.4 387.6 387.17 404.1		<u>PASB</u> III-E, III-H, V-B-1, V-C <u>FSSB</u> IV-E-2, IV-F IV-E-5, VI-A <u>MARG</u> p. 364	95 ADM-1

Section 2

I. Purpose

The purpose of this release is to inform local districts that the (Rev. 05/02) LDSS-2921 Statewide “Common Application” and PUB-1301 “How to Complete the Application” forms are now available in **Arabic** and **Chinese**.

- **LDSS-2921 STATEWIDE-AR:** “Common Application” (Rev.5/02) (**Arabic**)
- **PUB-1301 STATEWIDE-AR:** “How to Complete the Application” (Rev.5/02) (**Arabic**)
- **LDSS-2921 STATEWIDE-CH:** “Common Application” (Rev.5/02) (**Chinese**)
- **PUB-1301 STATEWIDE-CH:** “How to Complete the Application” (Rev.5/02) (**Chinese**)

II. Background

02-INF-20 announced the “first” release of our “Statewide Common Application” LDSS-2921 Statewide and the associated PUB-1301 Statewide: ”How to Complete the Application”.

This Informational Letter announces the translation and printing of these forms into **Arabic** and **Chinese**.

III. Forms Implications

Only NYC districts have received supplies of these forms. Other districts must order Arabic and Chinese versions using the procedure described below.

Since these are the first Arabic and Chinese releases of this form, no previous versions need to be destroyed.

Requests for printed copies of the these forms and publications should be submitted on OTDA-876 (Rev.6/98): Request for Forms or Publications” form, and should be sent to:

Office of Temporary and Disability Assistance
Document Services
P.O. Box 1990
Albany, New York 12201

Questions concerning ordering forms should be directed to Document Services at 1-800-343-8859, extension 4-9522.

These forms and publications are also published on the Office of Temporary and Disability Assistance, Intranet Home Page, which you can access on the LDSS E-FORMS site at:

http://sdssnet5/otda/ldss_eforms/eforms/2921statewide-ar-060603.pdf

http://sdssnet5/otda/ldss_eforms/eforms/1301statewide-ar-060603.pdf

http://sdssnet5/otda/ldss_eforms/eforms/2921statewide-CH-060503.pdf

http://sdssnet5/otda/ldss_eforms/eforms/1301statewide-CH-021403.pdf

Because these forms provide current program and policy information as well as mandated legal information, comments on the format and content are welcomed. Comments received will be pended and considered at the next printing of these forms.

Any comments may be forwarded to:

John Paolucci, Assistant Division Director
Division of Program Support and Quality Improvement
40 North Pearl Street
12th Floor, 12A
Albany, New York 12243
(518) 474-1683
John.Paolucci@dfa.state.ny.us

Issued By:

Name: Mary Meister
Title: Deputy Commissioner
Division/Office: Program Support & Quality Improvement