

# Workforce Solutions

## Managing Financial Aid – Documenting Eligibility For TANF/Choices and SNAP E&T

Detailed instructions for using this form are in the desk aid titled:  
Desk Aid - Financial Aid Eligibility Form – Child Care

- **Childcare Referral – Provide Aid.** When giving financial aid for the first time or re-starting financial aid previously discontinued, copy and paste the form below into TWIST Counseling Notes and complete all fields:

Customer's Name:  
Child Care Referral – Action:  
Eligibility Group:  
Child(ren) Information: (for each child)  
    Name:  
    DOB:  
    SSN:  
    Race:  
    Ethnicity:  
Child Care Needed (FT/PT):  
Days and Hours Needed:  
Provider Name and Phone:  
Vendor Transportation Needed:  
Child Care Start Date:  
Eligibility End Date/Redetermination Date:  
Reason for Action:

- **Childcare Referral – Continue Aid - Update:** When continuing care, discontinuing care, or discontinuing care and re-determining eligibility for transitional aid, copy and paste the appropriate form below into TWIST Counseling Notes and complete the fields necessary to describe the action.

Customer's Name:  
Child Care Referral – Action: **Continue Aid/Update**  
Eligibility Group:  
Child Care Start Date:  
Eligibility End Date/Redetermination Date:  
Reason for Action:

**Childcare Referral – Discontinue Aid:**

Customer's Name:  
Child Care Referral – Action: **Discontinue Aid**  
Child Care End Date:  
Reason for Action:

**Childcare Referral – Discontinue and Re-Determine for Transitional Aid:**

Customer's Name:  
Child Care Referral – Action: **Discontinue and Re-Determine for Transitional Aid**  
Child Care End Date:  
Reason for Action: