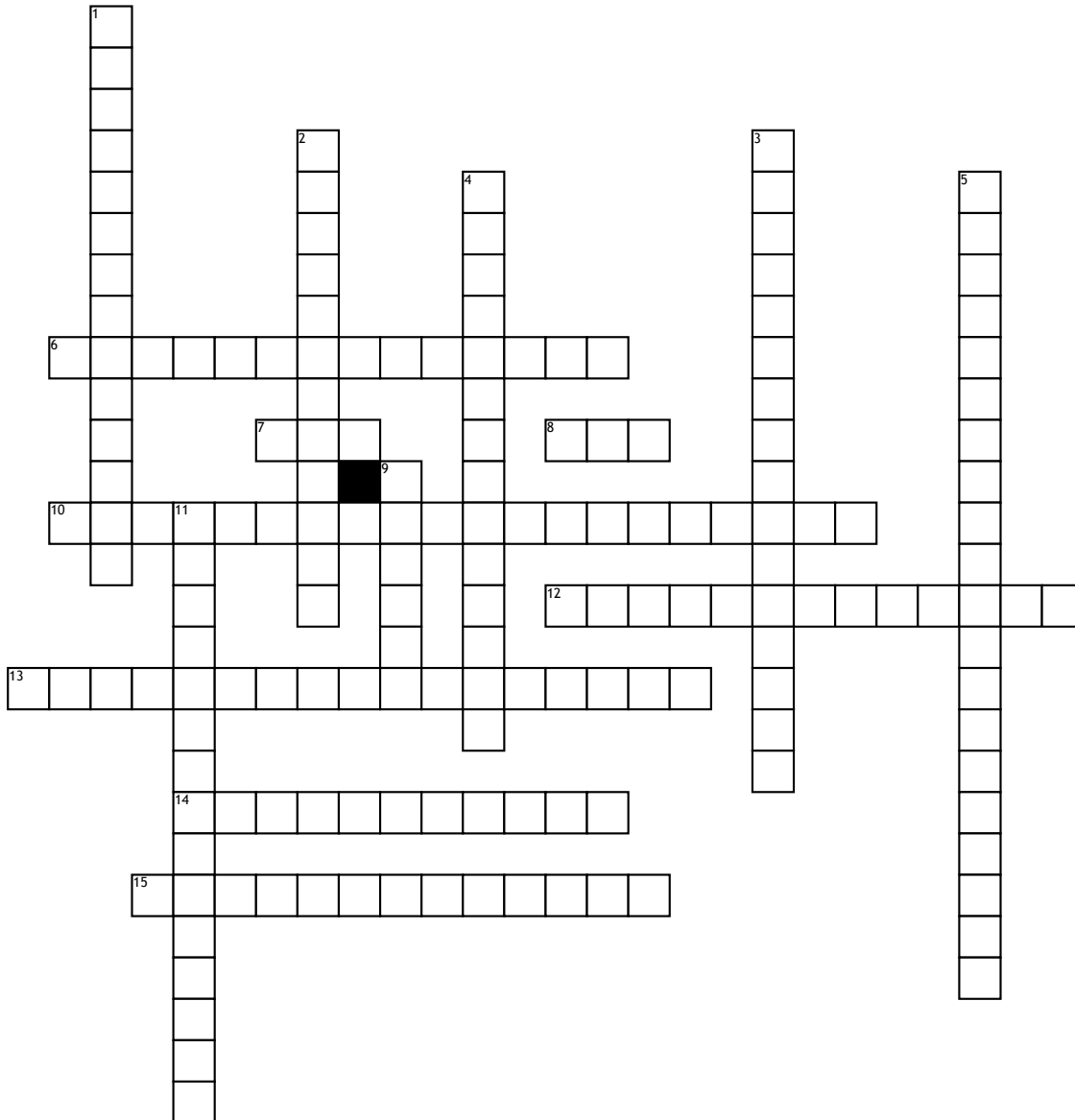


Name: _____

Date: _____

FEP



Across

- 6. /When documentation represents two full weeks of ongoing employment hours and worker creates ongoing participation hours
- 7. These months received do not count towards the federal or state TANF/FEP time limits.
- 8. This form needs to be completed before enrolled in fep training
- 10. When we have permission to discuss information w/an outside entity regarding our customer we complete this form or add them to the employment plan
- 12. This screen must be completed after training service is added to the employment plan including the date the customer started school

- 13. Needed if the customer has received 36 months of fep
 - 14. When hours entered do not match the verification/documentation that the ec has imaged/attached
 - 15. Can only be conducted on activities involving an employer
- Down**
- 1. /A worker will add this to the employment plan if the customer is not participating at the negotiated level
 - 2. Must be completed before or on the same day as the first issuance of Y funds for the month
 - 3. If the customer does not begin participation or show reasonable cause, close the "Activity Review" service and open this service

- 4. Must be signed within 10 days of negotiating or updating. With the exception of adding AR to it.
- 5. Child care being approved during the application period prior to the approval of FEP
- 9. Must be used to support to support a customer for work and training related expenses to alleviate circumstances impeding the customer's ability to begin or continue employment, job search, training or education
- 11. If eligible or no longer eligible, must be added or removed within 10 calendar days of verifying participation