# CalWORKs Welfare-to-Work
## Monthly Activity Report
### Two-Parent Families

**WTW 25A**

<table>
<thead>
<tr>
<th>COUNTY NAME</th>
<th>VERSION</th>
<th>REPORT MONTH AND YEAR</th>
<th>2010</th>
</tr>
</thead>
<tbody>
<tr>
<td>43 Santa Clara</td>
<td>Initial</td>
<td>DURING REPORT MONTH</td>
<td></td>
</tr>
</tbody>
</table>

### PART A. ENROLLMENT DATA

1. **Enrollees**
2. **Exemptions**
3. **Removed from the Assistance Unit**
   - WTW sanctions
   - Terminations due to time limits
4. **Entered employment**
5. **Terminations due to employment**

### PART B. ACTIVITIES

1. **Appraisal**
2. **Assessment**
3. **Reappraisal**
4. **Job search & job readiness assistance**
5. **Unsubsidized employment**
6. **Self-employment**
7. **Subsidized private sector employment**
8. **Subsidized public sector employment**
9. **On-the-job training (OJT)**
10. **Grant-based on-the-job training (OJT)**
11. **Work-study**
12. **Supported work or transitional employment**
13. **Work experience**
14. **Community service**
15. **Job skills training directly related to employment**
16. **Vocational education training**
17. **Education directly related to employment**
18. **Adult basic education**
19. **Satisfactory progress in a secondary school**
20. **Other activities**
21. **Providing childcare to community services participants**
22. **Mental health services**
23. **Substance abuse services**
24. **Domestic abuse services**
   - Granted waiver of program rules (Subset of 29)
   - Self-initiated programs (SIPS) (Unduplicated subset of 30)
25. **Number of individuals 6-29 (Unduplicated)**
26. **Post-employment/Job-retention services**
27. **Post CalWORKs 60-month time limit services**

### PART C. NONPARTICIPATION STATUS

1. **Noncompliance**
2. **Good cause for not participating in WTW**

### PART D. SUPPORTIVE SERVICES

1. **Transportation**
2. **Ancillary services**

### PART E. POST-EMPLOYMENT/JOB-RETENTION SERVICES

1. **Post-employment/Job-retention services**
2. **Post CalWORKs 60-month time limit services**

**COMMENTS**

**CONTACT PERSON**
- **Print**: Raul Aldana
- **Telephone**: (408)491-6819
- **Fax**: (408)975-4533

**E-MAIL**: raul.aldana@ssa.sccgov.org

**DATE COMPLETED**: 4/20/2010

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**STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY**
**CALIFORNIA DEPARTMENT OF SOCIAL SERVICES**
**DATA SYSTEMS AND SURVEY DESIGN BUREAU**

**CalWORKs Welfare-to-Work**
**Monthly Activity Report**
**Two-Parent Families**

**WTW 25A**

**VERSION REPORT MONTH AND YEAR**
**COUNTY NAME**

**DOWNLOAD REPORT FORM AND INSTRUCTIONS AT:**
http://www.cdss.ca.gov/dssdb

**MAIL COMPLETED REPORT FORM TO:**
admwtw25a@dss.ca.gov

**IF UNABLE TO E-MAIL REPORT FORM, FAX OR MAIL TO:**
FAX: (916) 657-2074

California Department of Social Services
Data Systems and Survey Design Bureau, M.S. 19-081
P.O. Box 94423
Sacramento, CA 94244-2430

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