



DIVISION OF CHILDREN AND FAMILY SERVICES (DCFS)

## Concurrent TANF Benefits / Family Reunification Notice of Removal from TANF Home

DATE

Send Via E-Mail To: [coordinatedbenefits@dshs.wa.gov](mailto:coordinatedbenefits@dshs.wa.gov)

<b>FROM:</b>	DCFS ASSIGNED SOCIAL WORKERS NAME	DCFS OFFICE	TELEPHONE NUMBER
<b>RE:</b>	REMOVAL PARENT'S NAME	DATE OF BIRTH	SOCIAL SECURITY NUMBER
2. List children placed at the same time with <b>the same caregiver</b> . Must list child's name and at least one of the other identifier options. (See Item 3 below to enter siblings placed with a different caregiver.)			
CHILD'S NAME		BIRTH DATE	SOCIAL SECURITY NUMBER
* DATE OF REMOVAL OF CHILDREN FROM THE PARENT'S TANF HOUSEHOLD:		PLACEMENT INFORMATION	
		Child(ren) placed in: <input type="checkbox"/> Foster Care <input type="checkbox"/> Relative / Suitable Person	
CURRENT CAREGIVER'S NAME	CAREGIVER'S RELATIONSHIP TO CHILD	CAREGIVER SUBMITTING TANF APPLICATION	
		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Caregiver has passed Washington State BCCU background check: <input type="checkbox"/> Yes <input type="checkbox"/> No			
3. For any children removed at the same time, but placed with a different caregiver, complete this section. Must list child's name and at least one of the other identifier options.			
CHILD'S NAME		BIRTH DATE	SOCIAL SECURITY NUMBER
* DATE OF REMOVAL OF CHILDREN FROM THE PARENT'S TANF HOUSEHOLD:		PLACEMENT INFORMATION	
		Child(ren) placed in: <input type="checkbox"/> Foster Care <input type="checkbox"/> Relative/Suitable Person	
CURRENT CAREGIVER'S NAME	CAREGIVER'S RELATIONSHIP TO CHILD	CAREGIVER SUBMITTING TANF APPLICATION	
		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Caregiver has passed Washington State BCCU background check: <input type="checkbox"/> Yes <input type="checkbox"/> No			
Check the appropriate box(es) below:			
<b>A. <input type="checkbox"/> The current primary permanent plan is Reunification; child(ren) are currently anticipated to remain out of the home for 180 days or less. Department policy (WAC 388-454-0015) allows the TANF grant to remain open for up to 180 days (from date of removal*) while the family is working on family reunification.</b>			
<b>B. <input type="checkbox"/> This is an aggravated circumstances case; the child is not expected to return to the home.</b>			
<b>C. <input type="checkbox"/> The child's parent may benefit from protective payee services to assist with on-going money management issues.</b>			



**Update: Concurrent TANF Benefits / Family Reunification. To be completed when child(ren) are returned home or between 150 – 180 days from date of removal (OPD) from TANF household to request exceptions.**

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DCFS ASSIGNED SOCIAL WORKERS NAME	DCFS OFFICE	TELEPHONE NUMBER
REMOVAL PARENT'S NAME	SOCIAL SECURITY NUMBER	FAMLINK CASE ID #
NAME OF CHILD	DATE OF BIRTH	SOCIAL SECURITY NUMBER

1.  Primary permanent plan of reunification has been achieved on \_\_\_\_\_ .
2.  Primary permanent plan remains reunification – safely reunifying the child(ren) will occur after 180 days. Please request an Exception To Rule (ETR) to WAC 388-454-0015 to keep the TANF grant open for:  
 60 days  90 days.
3.  Primary permanent plan remains reunification – safely reunifying the child(ren) will occur after 180 days. Please request a second Exception To Rule (ETR) to WAC 388-454-0015 to keep the TANF grant open for additional  
 60 days  90 days. (Total number of days of ETR requests not to exceed 180 days.)
4.  Plan remains reunification – however, safe reunification of the child(ren) will not occur within 180 days of approved ETR extensions. The parent(s)' TANF should be closed or reduced.
5.  Parent's TANF benefits should be closed or reduced. The primary permanent plan has changed to: