TO: Commissioners of Social Services

DATE: May 14, 1998

SUBJECT: Learnfare

SUGGESTED DISTRIBUTION:
- IM Directors
- Accounting Staff
- Directors of Services
- WMS Coordinators
- FS Directors
- CAP Coordinators
- Domestic Violence Liaisons
- Staff Development Coordinators

CONTACT PERSON:
Call 1-800-343-8859 and ask for the following:
- Temporary Assistance: Team I, 3-0332; Team II, 4-9344; Team III, 4-9307; Team IV, 4-9300; Team V, 3-1469; Team VI, 212-383-1658
- Fiscal Questions: Regions I-IV, Roland Levee, extension 4-7549; and Region V, Marvin Gold, (212) 383-1733.

ATTACHMENTS:
- Attachment I: Learnfare Plan (On-line)
- Attachment II: Authorization for Release of Information (On-line)
- Attachment III: Counseling Letter Learnfare (On-line)
- Attachment IV: Informal Notice (On-line)
- Attachment V: Quarterly Learnfare Report (On-line)

FILING REFERENCES

Previous ADMs/INFs: Cancelled

Previous Releases: None

Previous Dept. Regs.: Part 351.12

Previous Law & Other Ref.: 131-y

Previous Legal Ref.: 153(e)

DSS-296EL (REV. 9/89)
I. PURPOSE

Learnfare is a program intended to promote school attendance of public assistance (PA) children enrolled in grades one to six. The purpose of this Directive is to advise social services districts (SSDs) of a change to Social Services Law 131-y regarding the phased-in implementation of Learnfare.

Learnfare has been implemented in three Upstate sites and three sites in New York City (NYC). By September 1, 1998, six additional Upstate sites and three additional NYC sites must offer Learnfare. Statewide implementation must be completed by September 1, 1999.

II. BACKGROUND

The Learnfare program in New York State establishes a system based on level of school attendance with the main objective of keeping children engaged in the education system. All children in receipt of PA, enrolled in grades one through six, are required to attend school with no more than four unexcused absences during an academic quarter as defined by the State Education Department (SED). Families of children who fail to meet these attendance requirements will have $60 per offending child per month of their basic allowance removed from their household's public assistance grant for three consecutive months. The full amount of the grant reduction is returned to the family, if the student has no unexcused absences in the following academic quarter. Children with three unexcused absences during an academic quarter must be referred to counseling.

III. PROGRAM IMPLICATIONS

A. Definitions

1. Excused Absence

Excused absences can be defined either by the SED or the local school district. Excused absences may include, but are not limited to, those due to:

- Illness, as certified by a physician or by other documentation determined appropriate by the school;
- Hospitalization and/or attendance at a medical facility;
- Disability or sickness of a family member;
- Death of a family member;
- Religious holidays;
- Appearances in court;
- Crisis situations; and
- Impassable roads or weather conditions.
2. Unexcused Absence

All absences not meeting the criteria for an excused absence will be considered unexcused absences. The school district is responsible for determining if the absence is excused or unexcused regardless of definitions. Unexcused absences without good cause count toward the three (counseling) or five (sanction) day limit.

Examples of unexcused absences include the following:

- **Parental Detention** - this occurs when a pupil is absent with the knowledge and consent, stated or implied, of his parent for other than the excused criteria. Excuses such as the following come under this heading: visiting, away, vacation, shopping, needed at home, caring for the baby, overslept, etc.

- **Truancy** - This occurs when a parent/guardian expects the pupil to be in school and the pupil does not attend for other than the excused criteria.

Note: School suspensions are not unexcused absences.

3. Good Cause

A child shall have good cause for an unexcused absence when unsafe or unsanitary conditions at the school present a threat to the child's physical or emotional health, safety or welfare or other circumstances exist that justify absenteeism pursuant to the rules of the local school district. The school Learnfare administrator shall make the determination of good cause. Unexcused absences with good cause will not count toward the three (counseling referral) or five day limit (grant reduction).

IV. REQUIRED ACTION

A. Responsibility of SSD

1. Learnfare Plan

A Learnfare plan must be submitted to the Office of Temporary and Disability Assistance (OTDA) for approval. SSDs must develop a plan (Attachment I) with local school districts working towards the implementation of Learnfare. Plans for the 1998 expansion are addressed in a letter to SSDs dated February 19, 1998. Plans for the 1999 expansion must be submitted by March 31, 1999.
2. Release of Attendance Information

Applicants/recipients are required to sign a release (Attachment II) permitting local school districts to release their child(ren)'s attendance records to the SSD. Refusal to sign this release without good cause will result in the denial/termination of PA benefits. Good cause for failure to sign the form may occur, for example, if the child is home schooled, or attends private or parochial school.

After the submission of the Learnfare Plan, at next contact, SSDs will require recipients of PA who have not previously provided consent, or if the child(ren) has changed schools during the certification period to provide similar consent as a condition of continued eligibility.

3. Counseling

If a Learnfare child accumulates three unexcused absences during an academic quarter without good cause the child must be referred to counseling (Attachment III). The counseling may be SSD, school or community based.

The counseling session must include (but is not limited to) a discussion appropriate to the age of the child of:

- the expectations of the school regarding attendance requirements, including a review of what is defined as an excused and an unexcused absence.

- the consequences of the student's non-attendance.

- the events in the student's home and school life leading up to the unexcused absences.

- an intervention plan: This plan should include the responsibilities of the parents/guardians that will encourage the student to attend school, and the designation of what follow-up counseling services are available. The plan should identify the overall goals and specific objectives that will describe the behaviors the student should establish in order to accomplish the final goal of no unexcused absences and other kinds of family intervention and supports which may be necessary to remedy the situation. Appropriate referral procedures must be addressed. Each SSD will develop its own format for the intervention plan.

The SSD or the school district must afford the parent/guardian or other head of household with an opportunity for a conference when he/she is notified that the child is being referred to the counseling, and the reasons for the referral. The counseling services shall be provided in the school. If the SSD determines that such services are either unavailable or inappropriate, the services may be provided directly by the
SSD, by other government agencies, not-for-profit, or other available community resources. Whenever possible, the scheduling of the services will be done in a manner to include the parent(s) or guardian(s) in the intervention plan.

Districts should strongly encourage parents/guardians to participate in counseling. While there is no statutory requirement that the parents/guardians participate in counseling, parents/guardians should be informed that participation is expected. Scheduling of counseling sessions should be done so as not to jeopardize the employment, workfare assignment or child care arrangements of the parent/guardian, although the counseling should not be unreasonably delayed to accommodate the needs of the parent/guardian. Parents/guardians who refuse to participate should be asked to explain the reasons for not participating. In situations where parents/guardians refuse to participate they should be kept informed of the progress of the counseling.

4. Grant Reductions

Any household with a child enrolled in grades one through six, who has accumulated, without good cause, five or more unexcused absences during an academic quarter will have an amount equal to the regular recurring needs for each additional person, or up to $60 (18 NYCRR 352.1 (a)) removed from the family's grant for a period of three consecutive months. For example, if a family has two children, both with five or more unexcused absences, a total of up to $120 a month will be removed from the family's total grant for three months. If the reduction is greater than the total amount of the grant, the case is left open with a zero grant.

The grant reduction will not occur until the month following the month the academic quarter ends. An academic quarter is defined by each institution, but generally corresponds to the end of a grade reporting period. SED regulations establish a minimum of 180 days of instruction, but fail to define academic quarters.

The SSD will calculate the benefit reduction and prepare the timely notice. The notice must cite the authority to take this action under SSL 131-y. Participants in Learnfare retain all case conference and fair hearing rights.

If the child has no unexcused absences in the academic quarter immediately following the academic quarter which led to the grant reduction, the total benefits withheld will be returned to the household. The reinstated benefits are invisible for PA and FS eligibility calculations in the month they are received and the following month. In situations where the grant reduction is the result of attendance failures incurred in the last academic quarter of the regular school year, benefits may be restored if the child attends a summer
education program approved by the child's school, and has no unexcused absences.

People residing in domestic violence shelters, family shelters and drug treatment shelters will receive a reduction in the amount of their non-shelter related expenses. However, when a child or the parent or legal guardian of the child indicates the presence of domestic violence as the cause of absences from school (because the family is in a domestic violence shelter, for example), and although the Learnfare Administrator may make a determination that the child's absence is unexcused, the SSD should not impose a Learnfare grant reduction in these cases. In these situations, the SSD must work with the domestic violence program or other appropriate parties to make alternate educational arrangements for the child. In this case, the Learnfare Administrator will still make the excused/unexcused or good cause determination, however, the SSD must choose to not enforce the grant reduction.

During this period when the grant is reduced, the child remains active in the case. Case category would not change. Any income of the child who caused the grant reduction would remain countable in full. The reduction is not mirrored in Food Stamps or Medical Assistance.

5. Notice Requirements

An informal notice (Attachment IV) must be provided to all participating households advising them of Learnfare requirements and the consequences of failing to comply prior to enrolling in Learnfare.

The following language is to be used on a reduction notice:

"Part of the public assistance that you receive for (Child's Name) is being removed from your public assistance limit. This is because that child has had five or more unexcused absences from school in the last academic quarter. The full public assistance needs of that child cannot be counted for three months from the effective date of this notice."

This decision is based on Department Regulation 18 NYCRR 351.12.

The following is the language to use on a closing or denial notice:

"Your child(ren) are enrolled in grades one through six and you have refused to sign a Learnfare consent form. You are not eligible to receive public assistance until you sign this form, or provide good cause for not doing so."

This decision is based on Department Regulations 18 NYCRR 351.12.
6. Reporting Requirements

SSDs must provide basic statistics to this Office using the Quarterly Learnfare Report form (Attachment V). SSDs must submit this form until otherwise notified.

7. Claiming

SSDs may claim reimbursement, for example, for expenditures made for the printing and mailing of the notices to PA recipients informing them of the requirements of Learnfare. SSDs may enter into a memorandum of understanding with local school districts in which they would provide partial funding for costs solely attributable to Learnfare.

These costs should be reported as "F17" function code expenditures and claimed on the Schedule D-17, "Distribution of Allocated Costs to Other Reimbursable Program" (DSS-3274). The costs from the Schedule D-17 are to be brought forward to a DSS-3922 form entitled "Financial Summary For Special Projects" labelled "Learnfare" and reported on the appropriate lines.

Costs up to the level of the approved start-up allocations are to be claimed at 100% federal share, while the costs of administering the on-going program will be subject to the 50/25/25 reimbursement of SSL Section 153(e). All costs within an approved allocation will be outside the local district administrative cost cap, pursuant to SSL Section 131-y.

B. Responsibility of local school district

School districts must report at least monthly to SSDs all unexcused absences for Learnfare participating students. Knowledge of who are the Learnfare students/families in the school district is information strictly confidential to the Learnfare administrator. Attendance compiled from teacher reports will be passed either by a paper trail, or if the technology exists, electronically between the local school district and the SSD.

A roster of participating students who have unexcused absences for every calendar month will be submitted by the Learnfare administrator to the SSD liaison no later than the 10th of the following month. This timeframe is necessary if local school districts and SSDs are to make best use of attendance information in conjunction with counseling to provide early intervention.

Local school districts must designate a Learnfare Administrator. Determination of good cause for unexcused absences is the sole responsibility of the Learnfare
administrator in the local school district. The purpose of counseling is not to determine good cause. This is not a hearing or conciliation meeting. It is intended to provide the child and/or parent/guardian with attendance information and to establish reachable goals for the child.

V. Child Assistance Program (CAP)

CAP participants will be subject to all the requirements of the Learnfare Program.

VI. FOOD STAMPS

Learnfare is not an eligibility requirement for food stamps. However, a decrease in PA income due to a Learnfare reduction cannot result in an increase in FS benefits. Benefits returned to the family as a result of no unexcused absence policy are not counted as FS income.

VII. MEDICAID

Learnfare is not an eligibility requirement for Medicaid.

VIII. SYSTEMS

Upstate

ABEL currently supports Learnfare. A field on the ABEL input screen "LF" will produce an appropriate grant reduction. To initiate a grant reduction, the worker must input the number of Learnfare children who have accumulated more than four unexcused absences during an academic quarter in this field.

Case Reason Code "F16-Refusal to Sign Learnfare Consent Form" must be used for closings and denials.

Payment Type "L7-Learnfare Refund" should be used to reinstate the three month grant reduction.

Downstate

Downstate systems changes are currently under development. SSDs will be notified when changes become available.

IX. EFFECTIVE DATE

This directive is effective June 1, 1998, retroactive to September 1, 1997.

__________________________
Patricia A. Stevens
Deputy Commissioner
Division of Temporary Assistance
LEARNFARE PLAN

District: _____________________________________________________
Contact Person: ______________________________________________________
Telephone Number: ______________________________________________________
Date of Plan or Change Submittal: _______________________________________

Assurances

___________ hereby submits this Plan for the operation of the Learnfare Program. We agree to administer the program in accordance with all applicable federal and State Laws and regulations and provisions of this Plan.

1. The District assures that by September, students in grades one through six, in receipt of public assistance and attending the following schools shall be subject to Learnfare requirements and will be subject to school attendance requirements and penalties for failure to comply as determined by SSL 131-y.

The following schools service our public assistance population in grades one through six:

School District (Name) ___________________________
Address: ___________________________
Learnfare Administrator: ___________________________
Phone: ___________________________

School District (Name) ___________________________
Address: ___________________________
Learnfare Administrator: ___________________________
Phone: ___________________________

School District (Name) ___________________________
Address: ___________________________
Learnfare Administrator: ___________________________
Phone: ___________________________

School District (Name) ___________________________
Address: ___________________________
Learnfare Administrator: ___________________________
Phone: ___________________________

School District (Name) ___________________________
Address: ___________________________
Learnfare Administrator: ___________________________
Phone: ___________________________

School District (Name) ___________________________
Address: ___________________________
Learnfare Administrator: ___________________________
Phone: ___________________________
2. The District assures that any household with a child in receipt of public assistance who is in grades one through six who is required to participate in Learnfare and who, without good cause, has accumulated three unexcused absences during an academic quarter will be referred for counseling and parents will be afforded the opportunity for a district conference and to participate in the counseling.

3. The District assures that any household with a child in receipt of public assistance who is in grades one through six who is required to participate in Learnfare and who, without good cause, has accumulated five or more unexcused absences during an academic quarter will have an amount as directed by the Department removed from the household's grant for a period of three consecutive months. If the child has no unexcused absences during the academic quarter immediately following the quarter in which the child had accumulated five or more unexcused absences, the District must pay to the household in which the child resides an amount equal to the amount withheld as a result of the previous five absences.

4. The District assures that as a condition of eligibility, parents/guardians are required to consent to the release of school attendance records, including report cards or other pertinent information.

5. The District assures that it will:
   a. provide a list of eligible Learnfare participants to appropriate school officials;
   b. gather school attendance reports on a _________ basis;
   c. apply all program requirements not heretofore mentioned as contained in Section 131-y of State Social Services Law and 18 NYCRR 352.12;
   d. apply all program requirements to students attending school outside their District of residence;
   e. provide school based counseling services in consultation with local school districts;
   f. encourage parental intervention and cooperation with schools to encourage attendance.

6. The District assures that the confidentiality of students subject to these provisions will be protected.

7. The District assures that all notice requirements including timely notice and fair hearing requirements in Social Services Law and Regulation will apply to Learnfare participants.

Signature of Local Social Services Commissioner: __________________________
Date: ________________.
I. Target Population

a. How will the District maintain current enrollment statistics for Learnfare eligible students?

b. Potential Number of Students ________________
c. Number of School Buildings ________________
d. Number of PC's (1 per district+ Schools)_________

II. Local School District Cooperation/Liaison

INFORMATION SHARING:

a. How will the District identify and inform each school district of the eligible Learnfare participants in their school?

b. How will local school districts report the number of unexcused absences accumulated by eligible Learnfare participants in their school? Include local attendance reporting systems and indicate equipment needs.

c. How will local school districts report on the attendance of eligible Learnfare participants attending school outside their district of residence?

COUNSELING:

a. How will you identify those young people who appear to be having difficulty with school attendance in order to offer counseling?

b. Describe criteria for counseling referrals

c. Who will assume the responsibility for the counseling, the school district or the social services district?
d. What existing programs in the school or in the community will be incorporated into the joint cooperative effort?

e. Describe how parent/guardian conferences will be scheduled to encourage parent/guardian involvement in the counseling process. Include hours of availability.

III. Supporting Agreements

a. If your agency has entered into any contracts or memoranda of understanding with a local school district to support Learnfare Program requirements, please specify the local school district and the services being contracted with that local school district. Please attach a copy of all contracts and memoranda of understanding in effect.

b. If your agency has entered into any contracts or memoranda of understanding with other community-based or other government organizations to support Learnfare Program requirements such as counseling, or data transmittal, please specify the organization(s) and the services being contracted with that organization(s). Please attach a copy of all contracts and memoranda of understanding in effect.
IV. Other

Please include any other information that describes your local operation of the Learnfare Program.

Submit completed plans to:

Patricia A. Stevens
Deputy Commissioner
Division of Temporary Assistance
New York State
Office of Temporary and Disability Assistance
40 North Pearl Street
Albany, NY 12243-0001
FAX: (518)-474-9347
Authorization for Release of Information

New York State Law (SSL 131-y) authorized the establishment of the "Learnfare Program".

This program was designed to prevent children from dropping out of school and to improve the attendance of children in school.

Learnfare will evaluate the attendance of all children enrolled in grades one through six who are in receipt of public assistance.

The Law requires as a condition of eligibility for assistance of any child, the parent or guardian to consent to the release of any school attendance records necessary for the Learnfare program.

I, ____________________________, hereby authorize the Department of Education or its representative to release to the local social service district information pertaining to the following child's(ren's) school attendance record for each quarter requested while the child(ren) remain on assistance.

Child's Name: _________________________ Grade Level _____________
School District _________________________________________________
Student ID# ____________________________
(NYC Only)

Child's Name: _________________________ Grade Level _____________
School District _________________________________________________
Student ID# ____________________________
(NYC Only)

Child's Name: _________________________ Grade Level _____________
School District _________________________________________________
Student ID# ____________________________
(NYC Only)

Child's Name: _________________________ Grade Level _____________
School District _________________________________________________
Student ID# ____________________________
(NYC Only)

Child's Name: _________________________ Grade Level _____________
School District _________________________________________________
Student ID# ____________________________
(NYC Only)

Child's Name: _________________________ Grade Level _____________
School District _________________________________________________
Student ID# ____________________________
(NYC Only)

Parent/Guardian Signature _____________________________ Date__/__/__
Autorización para Revelar Información

La Ley del Estado de Nueva York (SSL 131-y) autorizó el establecimiento del "Programa Learnfare".

Este programa fue diseñado para prevenir que los niños abandonen la escuela y para mejorar la asistencia de los niños a la escuela.

Learnfare evaluará la asistencia de todos los niños inscritos en los grados uno a seis quienes reciben asistencia pública.

La Ley requiere, como una condición de elegibilidad para controlar la asistencia de cualquier niño(a), el consentimiento del padre/madre o guardián para la revelación de los récords de asistencia de cualquier escuela necesarios para el programa de Learnfare.

Yo, ______________________________, por la presente autorizo al Departamento de Educación o a su representante a que revele al distrito de servicios sociales la información relativa al récord de asistencia escolar de los siguientes niños para cada trimestre requerido mientras los niños permanezcan en asistencia:

Nombre del Niño(a): _______________________ Nivel de Grado _______________ Distrito Escolar ____________________________________________________________
No. de ID del Estudiante __________________________________________________ (Sólo en la Ciudad de Nueva York)

Nombre del Niño(a): _______________________ Nivel de Grado _______________ Distrito Escolar ____________________________________________________________
No. de ID del Estudiante __________________________________________________ (Sólo en la Ciudad de Nueva York)

Nombre del Niño(a): _______________________ Nivel de Grado _______________ Distrito Escolar ____________________________________________________________
No. de ID del Estudiante __________________________________________________ (Sólo en la Ciudad de Nueva York)

Nombre del Niño(a): _______________________ Nivel de Grado _______________ Distrito Escolar ____________________________________________________________
No. de ID del Estudiante __________________________________________________ (Sólo en la Ciudad de Nueva York)

Nombre del Niño(a): _______________________ Nivel de Grado _______________ Distrito Escolar ____________________________________________________________
No. de ID del Estudiante __________________________________________________ (Sólo en la Ciudad de Nueva York)

Nombre del Niño(a): _______________________ Nivel de Grado _______________ Distrito Escolar ____________________________________________________________
No. de ID del Estudiante __________________________________________________ (Sólo en la Ciudad de Nueva York)

Nombre del Niño(a): _______________________ Nivel de Grado _______________ Distrito Escolar ____________________________________________________________
No. de ID del Estudiante __________________________________________________ (Sólo en la Ciudad de Nueva York)

Nombre del Niño(a): _______________________ Nivel de Grado _______________ Distrito Escolar ____________________________________________________________
No. de ID del Estudiante __________________________________________________ (Sólo en la Ciudad de Nueva York)

Firma del Padre/Madre/Guardián ______________________________ Fecha__/__/__
Counseling Letter
Learnfare

The Learnfare Program was designed to prevent children from dropping out of school and to improve the attendance of children in school.

State Regulation (18 NYCRR 351.12) permits your local social services agency and/or local school district to refer to counseling any child who accumulates three unexcused absences.

State Regulation (18 NYCRR 351.12) also requires the removal of the child's share of the family's public assistance grant if a child accumulates five or more unexcused absences during an academic quarter, without good cause.

We were informed that your child(ren) has accumulated at least three unexcused absences during the school quarter ____/____.

Child's Name: ______________________________
Student ID#: _______________________________
(NYC Only)

Child's Name: ______________________________
Student ID#: _______________________________
(NYC Only)

Child's Name: ______________________________
Student ID#: _______________________________
(NYC Only)

The law allows for a conference to be held between the social service district and the parent or guardian. Please contact the social service district at the following telephone number to schedule a conference: 
(___) ___-____

Learnfare Counseling Referral

Report To: _______________________

_________________________________________________________________

Client Name ______________________________
Appointment Date: ________________________ Time __________________

(Worker Signature)

If you have any questions, please speak to your worker.
Carta de Asesoramiento
Learnfare

El Programa Learnfare fue diseñado para prevenir que los niños abandonen la escuela y para mejorar la asistencia de los niños a la escuela.

La 18 NYCRR 351.12 permite que su agencia local de servicios sociales y/o el distrito escolar local refiera a asesoramiento a cualquier niño(a) que acumule tres ausencias sin excusas.

La 18 NYCRR 351.12 también requiere la eliminación de la porción correspondiente al niño(a) de la asignación de asistencia pública para la familia si un niño(a) acumula cinco o más ausencias sin excusas durante el trimestre académico, sin tener una razones válidas.

Se nos informó que su(s) hijo(s) ha acumulado por lo menos tres ausencias sin excusas durante el trimestre escolar _____/_____.

Nombre del Niño(a): ____________________________________________
No. de ID del Estudiante: _______________________________________
(Ciudad de Nueva York solamente)

Nombre del Niño(a): ____________________________________________
No. de ID del Estudiante: _______________________________________
(Ciudad de Nueva York solamente)

Nombre del Niño(a): ____________________________________________
No. de ID del Estudiante: _______________________________________
(Ciudad de Nueva York solamente)

La ley permite que se lleve a cabo una conferencia entre el distrito de servicios sociales y el padre/madre o guardián. Por favor póngase en contacto con el distrito de servicios sociales al siguiente número de teléfono para coordinar una conferencia:
(___) ___-______.

Referencia de Asesoría para Learnfare

Reporte A: ______________________
________________________
________________________

Nombre del Cliente
Fecha de la Cita: ________________________ Hora ______________________
___________________________
(Firma del Trabajador(a)
Si usted tiene alguna pregunta, por favor hable con su trabajador(a).
Dear Sir/Madam:

Social Services Law 131-y, otherwise known as Learnfare, has been implemented in your local social services district. Learnfare is a program designed to encourage your child(ren) to improve school attendance through regular monitoring of unexcused absences. To accomplish this, there are some actions you must take. You must provide us with some basic information regarding your children along with your authorization allowing your local social service district to collect attendance information.

- You must complete, sign and return the attached "Authorization for Release of Information" form within 10 days. This allows social services to get information regarding the attendance of your child(ren). If you do not return the signed form in a timely manner, your case will be closed.

- You must return the attached authorization form, completed and signed regardless of your child's age.

- You must return the attached authorization form, completed and signed regardless of your child's school district of attendance.

Once your child is enrolled in Learnfare, he/she will be required to attend school regularly. If your child accumulates three unexcused absences during a school quarter, he/she will be referred to counseling. You may request a conference with the social service district/school district at this time. If your child accumulates five unexcused absences during a school quarter, your grant will be reduced by $60 per month for three months for each child who accumulates five unexcused absences. The money which was removed may be earned back if your child has no unexcused absences during the following school quarter.

If you have questions regarding this letter or the Learnfare program, you should contact your worker. Remember, the goal of this program is to help your child(ren) secure a better future through education. It is designed to insure that a partnership develops between you, your child, your child's school and your local department of social services.
Estimado Sr./Sra.:

La Ley de Servicios Sociales 131-y, conocida también como Learnfare, ha sido implementada en su distrito local de servicios sociales. Learnfare es un programa diseñado para fomentar que su(s) niño(s) mejoren la asistencia a la escuela a través de un control regular de ausencias sin excusas. Para lograr esto, usted tiene que tomar algunos pasos. Usted debe proveernos alguna información básica con respecto a sus niños al igual que su autorización permitiendo que su distrito local de servicios sociales reúna la información de asistencia.

- Usted debe completar, firmar y devolver el formulario sobre la "Autorización para Revelar Información" dentro de 10 días. Esto permite que servicios sociales obtenga información respecto a la asistencia de su(s) hijo(s). Si usted no devuelve el formulario firmado a tiempo, su caso puede ser cerrado.
- Usted debe devolver el formulario de autorización adjunto, completado y firmado sin tomar en cuenta la edad de su hijo(a).
- Usted debe devolver el formulario de autorización adjunto, completado y firmado sin tomar en cuenta la asistencia de su hijo(a) en su distrito escolar.

Una vez que su hijo(a) se inscriba en Learnfare, a él/ella se le requerirá que asista a la escuela regularmente. Si su hijo(a) acumula tres ausencias sin excusas durante el trimestre escolar, él/ella será referido(a) a asesoramiento. Usted puede solicitar una conferencia con el distrito de servicios sociales/distrito escolar en este momento. Si su hijo(a) acumula cinco ausencias sin excusas durante el trimestre escolar, su asignación será reducida en $60 al mes por tres meses para cada niño(a) que está acumulando cinco o más ausencias sin excusas. El dinero que fue retirado puede volverse a ganar si su hijo(a) no tiene ausencias sin excusas durante el siguiente trimestre escolar.

Si tiene preguntas respecto a esta carta o al programa de Learnfare, usted debe ponerse en contacto con su trabajador(a). Recuerde, la meta de este programa es ayudar a asegurar un futuro mejor para su(s) hijo(s) a través de la educación. El programa está diseñado para asegurar que se desarrolle una asociación entre usted, su hijo(a), la escuela de su hijo(a) y el departamento de servicios sociales de su localidad.

Adjuntos
Quarterly Learnfare Report

District ______________
Quarter ending __/__/____
Contact Person __________

Number of cases Closed for failure to sign Authorization for Release of Information _______

Number of cases Denied for failure to sign Authorization for Release of Information _______

Number of Referrals to Counseling _______

Number of Grant Reductions _______

Number of Grant Reductions Reinstated _______

Please send information quarterly to:

Division of Temporary Assistance
New York State
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