

90-600 APPENDIX D. CW 7/QR 7 COMPLETION GUIDE

CW 7/QR 7	Requirement
What is complete?	<ul style="list-style-type: none"> • All questions must be answered or if a question is not answered, information/verification is provided indicating a “YES” answer. • Appropriate verifications must be attached. • All aided adults, and spouses even if not aided, must sign and date the CW 7/QR 7 on or after the first of the month in which it is due. • Be received on or after the first day in which it is due. • The prior CW 7/QR 7 must be reviewed for comparison.
Whose information is to be reported?	All aided adults or children and unaided adults for whom there is a spouse-for-spouse or parent-for-child responsibility.
Question 1 – Earnings and/or Training Income	<p>“NO” must be checked, or if “YES” is checked, it must contain:</p> <ul style="list-style-type: none"> • Who received the income • Number of hours worked/in training • Amount of income • Date income was received. <p>If the verification submitted is sufficient to determine the income, the CW 7/QR 7 is acceptable.</p>
Question 2 – Dependent Care	There is no deduction allowed for dependent care.
Question 3 – Unearned Income	<p>“NO” must be checked, or if “YES” is checked, it must contain:</p> <ul style="list-style-type: none"> • Who received the income • Source of the income • Amount of the income • Date of income receipt.
Question 4 – Court Ordered Child Support.	There is no deduction allowed for child support.
Question 5 – Fleeing Felon	“NO” must be checked, or if “YES” is checked, it must contain the name or fleeing felon or parole violator.
Question 6 – Drug Felon	“NO” must be checked, or if “YES” is checked, it must contain the name for drug felon and the worker must verify if the individual was denied CalWORKs due to the conviction.
Question 7 – Household Movement	<p>“NO” must be checked, or if “YES” is checked, it must contain:</p> <ul style="list-style-type: none"> • Who moved in/out of the home • Relationship to the person signing the CW 7/QR 7 • Explanation of change • Date of change.
Question 8 – Expected/Future Changes	<p>“NO” must be checked, or if “YES” is checked, it must contain:</p> <ul style="list-style-type: none"> • Type of change expected • For whom the change is expected • Date the change is expected.
Address Change	<p>“NO” must be checked, or if “YES” is checked, it must contain:</p> <ul style="list-style-type: none"> • Date of change • New address, including room/apartment number and city • New phone number, if only reporting a new phone number.
Signature	All aided adults must sign and date. The spouse of an aided adult, even if not aided, must also sign and date.