

ABAWD ELIGIBILITY TRACKING FORM

CASE NAME: _____ **CASE NUMBER:** _____

NAME OF ABAWD (If different) _____

JANUARY 2009 – DECEMBER 2011					
MONTH	STATUS	MONTH	STATUS	MONTH	STATUS
1/09		1/10		1/11	
2/09		2/10		2/11	
3/09		3/10		3/11	
4/09		4/10		4/11	
5/09		5/10		5/11	
6/09		6/10		6/11	
7/09		7/10		7/11	
8/09		8/10		8/11	
9/09		9/10		9/11	
10/09		10/10		10/11	
11/09		11/10		11/11	
12/09		12/10		12/11	

Form Coding:

A = Non-Prorated 3 Month ABAWD **E** = Fixed 3 Month Extension Period **U** = Month Meeting Work/JTPA
X = Month residing in labor surplus county

ABAWD: An individual who is age 18-49, able-bodied, and living in a home with no persons under the age of 18 (or 18 and receiving TAF). *(always coded as exempt "AB" on JOPR)*

Non-ABAWD: Anyone who is under age 18 (or 18 and still receiving TAF) or age 50 and older; or is physically or mentally unfit for employment; or lives in a home with a person under the age of 18 (or 18 and still receiving TAF); or is pregnant; or is the father of an unborn child; or is responsible for care of an incapacitated HH member; or gets UC; or is in alcohol/drug treatment; or is a student enrolled at least half-time, including GED classes. *(may or may not be exempt from meeting work-related requirements)*

Exempt ABAWD: An ABAWD living in a labor surplus county who is exempt from ABAWD criteria. See 2520 for current list of labor surplus counties.

ABAWD Work Requirement: To be employed an average of 20 hrs/wk, earning at least minimum wage, OR participating in JTPA/TAAA 20 hrs/wk or more.

Time Limit of 3 Non-prorated Months Plus Possible Extension: Applies to an ABAWD who regains eligibility but then loses employment. The one-time extension of three months eligibility is available if the individual worked at least 80 hours in a 30 day period or participated in JTPA/TAAA. The extension is a 3 consecutive months fixed period, even if the case is closed or the individual becomes a non-ABAWD before the 3 months expire.

Unlimited Eligibility: A non-ABAWD or an ABAWD meeting the work requirement have no limitation on months of eligibility.

Disqualified ABAWD: This individual is coded "DI" for SEPA participation. *(A pro-rata share of income and all resources continue to count for the rest of the household)*

Certification Period: A 12 month review is used, even when the ABAWD individual is disqualified. Use an alert to monitor for the three months of limited eligibility.

Changes: ABAWD to Non-ABAWD _____ effective the month the change is reported.
 ABAWD to ABAWD meeting the work requirement _____ effective the month the change is reported.
 Non-ABAWD to ABAWD _____ effective the month after the month the change is reported.
 ABAWD meeting the work requirement to ABAWD _____ effective the month after the month the change is reported.