

COLORADO EMPLOYMENT FIRST PROGRAM

STATE FORM MODIFICATION REQUEST INSTRUCTIONS

County modification of Employment First (EF) forms must be approved using the following form.

The EF Form Modification Request is included in the (future) County Plan. If a county requests modifications other than time of County Plan submission, the following steps are to be taken:

1. County completes Form Modification Request form and submits to assign EF State Representative.
2. EF State Representative emails copy with modified form to all State staff for comments with return deadline of 7 days.
3. EF State staff review and decide on modifications at next staff meeting.
4. EF Form Modification Request Form completed by Stephanie and returned to County, CC State Staff.
5. Completed Electronic copy of request with modified form placed in County's and EF Form Modification Requests folders by Stephanie.

How To Add EF Logo & Date

The screenshot displays the Adobe Reader interface for a PDF document titled "Agreement-R2-2010 - LogoExample.pdf". The "Place Signature" dialog box is open, showing options for how to create a signature. The "I Need to Sign" sidebar is visible on the right, with the "Place Signature" button highlighted. A red callout box points to this button with the text "Click Place Signature to add logo". The "Add Text" button in the sidebar is also highlighted, with a green callout box pointing to it and the text "Click Add Text to add date". The background shows a form with fields for "Start Date:", "Address:", and "First Staff Signature:". The footer of the document includes the text "EF-205-A (R 2/2010) Original - Client Copy - Case File" and the "Colorado EMPLOYMENT FIRST" logo with the date "01/2014".

COLORADO EMPLOYMENT FIRST

Form Modification Request

Use this form to request modifications to Employment First forms. Modified forms may not be used without written approval.

Check appropriate box and attach your modified form to the request.

X	Commodity #	Form #	Form Title
	615-82-22-8021	EF-102	Colorado Employment First Enrollment
	615-82-22-1232	EF-123	Notice of Change Form
	615-82-22-1117	EF-111	Follow Up Appointment Letter
	615-82-22-2511	EF-205 A	Participant Activity Contract
	615-82-2115	EF-211	Workfare Participant Agreement and Guidelines
	615-82-22-2446	EF-224	Workfare Program Agreement
	615-82-0000-16-190	EF-213	Workfare Initial Site Contract
	615-82-22-3089	EF-308	Employer Contact Report
	615-82-22-2339	EF-233	Time Sheet and Evaluation Sheet
	615-82-22-9102	EF-910	Colorado Employment First Assessment
	615-82-22-0010	EF-1	Master Application
	N/A	EF	Job Search Plan
	N/A	EF	Job Search Plan (Condensed)
	615-82-0036	EF-3	Interview Analysis
	615-82-18-0495	FS 4J	Notice of Adverse Action
	N/A	EF	EF NOAA ABAWD Regain
	N/A	EF	EF Workfare Quarterly Report
	N/A	EF	Colorado Works/Workfare Sponsor Agreement

Reason(s) for Modification: _____

County:	Date:
Staff:	Signature:

For Employment First Staff Only	
Date Received:	<input type="checkbox"/> In Person <input type="checkbox"/> By Mail <input type="checkbox"/> By Email
Date Reviewed:	<input type="checkbox"/> Approved <input type="checkbox"/> Disapproved
Explanation:	
Employment First Staff (Print):	
Employment First Staff Signature:	