

I. Forms

| <b>Form # (If applicable)</b> | <b>Form Name</b>  | <b>When to use</b>  | <b>Signature Required</b> | <b>Required to be given</b> |
|-------------------------------|---|---|---------------------------|-----------------------------|
| CDPH 4130                     | California WIC Program Self Declaration Statement             | When an individual does not have proof of income, address, or identification at initial certification and recertification only.   | Yes                       | Yes                         |
| CDPH 4146                     | Consent to Release Personal Information                       | When an individual gives permission to personal information being released and/or when permission is given to WIC to contact health care providers.   | Yes                       | Upon request                |
| CDPH 4132                     | Know Your Rights and Responsibilities                         | When eligibility is determined at initial certification and recertification.  | Yes                       | Upon request                |
| CDPH 4148                     | Multi-User Breast Pump Loan Agreement                         | When issuing a breast pump (Coming Soon)  | Yes                       | Yes                         |
| CDPH 4134                     | Notice of Action At Initial Certification and Recertification | When an applicant is determined ineligible at initial certification or recertification or after 30/60 day short certification when the required income, residency, ID, proof of pregnancy or infant presence is not provided. | Yes                       | Yes                         |
| CDPH 4304                     | Notice of Action During WIC Certification Period              | When a participant no longer meets WIC Program requirements during a certification period. 15-day notice is required. <i>Not to be used at recertification.</i>   | Yes                       | Yes                         |
| CDPH 4147                     | Notice of WIC Certification Expiration                        | When the certification period of a participant will end based on their category. Provide the notification at the last WIC contact prior to the certification end date.  | No                        | Yes                         |

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|-------------------------------|--|---|---------------------------|-----------------------------|
| N/A                           | Initial Certification and Recertification Appointment Reminder | When scheduling an appointment for an initial certification or a recertification. | No                        | Upon request                |
| N/A                           | Outbound Verification of Certification                         | When a participant is leaving California WIC and moving to another state.         | No                        | Yes                         |
| N/A                           | WIC Food Balance   | When a participant requests a list of their food benefits.                        | No                        | Upon request                |
| N/A                           | WIC Health Assessment Data                                     | When a participant requests their health data obtained by WIC.                    | No                        | Upon request                |
| N/A                           | WIC Visit Verification   | When a participant requests proof that they attended a WIC appointment.           | No                        | Upon request                |

II. Documents that must be scanned to WIC WISE

| <b>Form Name</b>   | <b>When is it required to scan</b>  | <b>Required to be given</b>     |
|--|---|---------------------------------|
| Custody/Foster Placement Papers  | When the custody of an infant or children is in question.   | N/A                             |
| Downtime forms: Notices of Action (NOA)/Self Declaration Statement (SDS)/Rights & Responsibilities (R&R) | When WIC WISE experiences a power outage or no network connectivity. Once power or network connectivity is restored, forms must be scanned. | Yes                             |
| Notices of Action (NOA)<br>Self Declaration Statement (SDS)<br>Rights & Responsibilities (R&R)           | When there is no functioning signature pad or mouse pen. Signed documents must be scanned.  | Yes<br>(R&R<br>Upon<br>Request) |
| Inbound VOC  | When a participant provides a VOC when transferring into California.  | N/A                             |
| LA Breast Pump Agreement   | When staff issues a LA-developed Breast Pump Agreement. Coming soon.  | Yes                             |
| LA Consent Forms   | When a form created by the LA is used instead of the CDPH/WIC template.   | Upon<br>Request                 |
| Rx from Doctor/HCP   | When a participant provides a Rx for modified diet.   | N/A                             |
| Therapeutic Formula Documents  | When a participant provides the LA with documents regarding their Rx for therapeutic formula and/or WIC-eligible nutritionals.              | N/A                             |
| WIC Medical Referral Form (Pediatric/Pg/PP)  | When a participant provides the LA with a form with information from the Health Care Provider other than anthropometric or bloodwork.       | N/A                             |