TRIBAL TANF DATA REPORT - SECTION 1 TANF DISAGGREGATED DATA COLLECTION FOR FAMILIES RECEIVING ASSISTANCE UNDER THE TANF PROGRAM

		GENERAL INFORMA	ATION		
1.	State FIPS Code 2. County FIPS Code	Tribal Code (For Tribal Use Only)	4. Reporting Month Year Year Y Y Y Y Y	Month I I M M	5. Stratum
		FAMILY LEVEL D	OATA		
8.	Case Number - TANF		7. ZIP Code 1	12. Type of Family for Participation	Work
	ASS	SISTANCE RECEIVED E	BY THE FAMILY		
13.			ount of Food Stamps 17. Recessance Substance	eives S sidized Child C	Amount of Subsidized Child Care
19.	Amount of Child Support 20. Amount of the Fa	amily's Cash Resources			

ASSISTANCE DECIMEN LINNED STATE (TDIRAL) TANE DECIDAM RV TVDE

	ASSISTANCE PROVIDED UNDER STATE ((IRIDAL) TANF PROGRAM, DI TIPE
	21. Cash and Cash Equivalent	
A	Amount B. Number of Months	
	22. TANF Child Care	23. Transportation
A. [Amount B. Number of C. Number of Children Covered Months	A. Amount B. Number of Months
	24. Transitional Services	25. Other Assistance
A	Amount B. Number of Months	A. Amount B. Number of Months
	REASON FOR AND AMOUNT OF Its deason for and Amount of Reduction In Assistance: A. Sanctions:	REDUCTION IN ASSISTANCE
=	iii. Family Sanction for	vi. Failure to iv. Sanction for v. Non- Teen Parent cooperation Not Attending with Child Responsibility vii. Other School Support Plan Sanctio

_		ecoupment of Prior verpayment	C.	Other:																				
			i.	Total Dol Reduction Reasons					ii.	Fam	ily Ca	p	iii.			Based Assis			of	iv.	Otl	ner, No	on-san	ection
27.	Waiver	Evaluation Research Group			28.				mily E visions		t from	ı Feder	ral			29.	Is th Fam		NF Fai	mily a	New	Child-	-Only	
		ADULT									ATA SEH) CI	HAR	AC T	ΓER	ISTI	CS						
Adu	30 lt	3	n-Custo rent Ind		32. Y	Date o	of Bir Y	th (Aş	ge) M	M	D	D		33.	Socia	al Secı	urity N	Numbe	er					
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5	5						1										-			-			1	
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34. Race/Ethnicity

	Ethnicity	Race				
Adult	A. Hispanic or Lat	ino B. American Ind Alaska Native		D. Black or African American	E. Native Hawaiian or Pacific Islander	F. White
1						
2						
3						
4						
5 6					 	
		36. Receives Disability Benef	[itc			
Adult 1 2 3 4 5 6	35. Gender	A. Receives Federal B. Disability Insurance Benefits - OASDI	Receives Benefits	C. Receives Aid Under D. Title XIV-APDT	E. Receives Aid Under Title XVI-AABD	Receives Aid Under Title XVI-SSI
Adult 1	37. Marital Status	38. Relationship to Head of Household	Minor Child in	Needs of a Pregnant Woman 41. Education	al Level 42. Citizenshi	p / Alienage

				39.	Pare	ent with 40.	Needs of a					
		38.	Rela	ntionship to Head	Min	or Child in	Pregnant					
Adult	37.	Marital Status		lousehold	the I	Family	Woman	41.	Educational Level	42.	Citizenship /	Alienage
2]						
3												
4]						
5				i					i			
6												
			44.	Number of Months	45.	Number of Cou Months Remain	ing 46.		ent Month		48.	
۸ ماریاد	43.	Cooperation in Child		Countable Toward		Under State's (T	ribe's)		t From State's 47.	Employm	nent	Participat
Adult		Support		Federal Time Limit		Time Limit		(1ribe	s) Time Limit	Status		ion Status
1												
2												
3						l i						
4												
5												
6												
				ADULT WORK	PAI	RTICIPATIO)N ACTIVI	TIES				

ADULT WORK PARTICIPATION ACTIVITIES

Adult	49.	Unsubsidized Employment	50.	Subsidized Private Sector Employment	51.	Subsidized Public Sector Employment	52.	Work Experience	53.	On-the-Job Training
1										
2										
3										
4										

	49.	Unsubsidized	50.	Subsidized Private	51.	Subsidized Pu	ıblic					
Adult		Employment		Sector Employment		Sector Employ	yment 5	2. W	Vork Experience	53.	On-the-Job Train	ing
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J			ŀ	<u> </u>				-				
6				i		1 i 1			i			
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										58.	Education Direct	ly Related to
							5		ob Skills Training		Employment for	Individuals with No
	54.		55.	Community Service	56.	Vocational			Directly Related to			loma or Certificate of
Adult		Readiness Assistance		Programs		Educational T	raining	E	Employment		High School Equ	ivalency
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	59.	Satisfactory School		60. Providing Child	Care							
		Attendance for Individ	uals	Services to an I								
		with No High School		Who is Participa			Additional `				63.	
		Diploma or Certificate		Community Ser	vice		Permitted U			ner Wo		Work Under Waiver
Adult		High School Equivaler	ıcy	Program		<u> </u>	Demonstrat	ion	Act	tivities	S	Demonstration
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AMOUNT OF INCOME, BY TYPE

65. Amount of Unearned Income

Adult	64.	Amo Earn Inco	ied	f
1				
2				
3		 		
4				
5				
6				

- A. Earned
 Income Tax
 Credit EITC
- B. Social Security
- C. SSI

Social Security Number

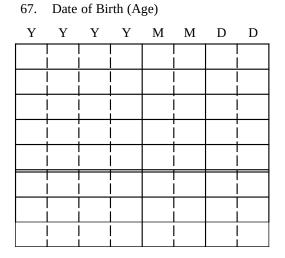
D. Worker's
Compensation

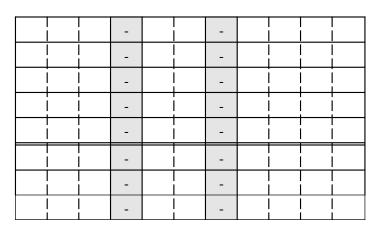
Unearned Income										

E. Other

CHILD CHARACTERISTICS

Child	66.	Family Affiliation
1		
2		
3		
4		
5		
6		
7		
8		





Child	66.	Family Affiliation	67.	Date	of Bir	rth (A	ge)					68.	Socia	al Seci	ırity N	Numb	er									
			Y	Y	Y		M	M	D	D					J											
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																					<u> </u>		_			
	69.	Race/Ethnicity																								_
		Ethnicity			Race	<u> </u>																				
Child	A.	Hispanic or Lat	ino		B.		erican ka Na	India	n of	C.	Asia	n		D.	Blac Ame		Africa	n	E.		tive Ha			F. W	hite	
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			71.	Rece	ives [Disabil	lity Be	enefits	S:			:														
Child	70.	Gender	A.		ives E d on F			B.		eives A er Title			72.	Relat Head		ip to	73.		ent wi or Ch		74.	Edu	cationa	al .		
					oility S				XVI		_				ehold	,			Famil		/ T.	Lev		- -		
1																							 			
2																							<u> </u>			

71. Receives Disability Benefits:

Child 3 4 5 6 7 8 9 10	70. Gender	A. Receives Benefits B. Based on Federal Disability Status	Receives Aid Under Title XVI-SSI	72. Relationship to 73. Head of Household	Parent with Minor Child in 74. Educational the Family Level
Child	75. Citizenship / Alienage	76. Amount of Ur	nearned Income		
		A. SSI	В.	Other Unearned Income	
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					