



Franklin County Board of Commissioners

JOB & FAMILY SERVICES

Case Information		
Case Name	OB Case #	
Address	City	State Zip
Client Phone	WorkerID	Additional Info _____

FCDJFS Good Cause Extension Review Form

**Franklin County Department of Job & Family Services
1721 Northland Park Avenue
Columbus, Ohio 43229**



Part A: Good Cause Request *(completed by customer/participant)*

I have received time limited OWF cash assistance for 36 months and have had at least a 24 month break in receipt of OWF cash assistance (a state hardship extension does not interrupt the 24 month break or waiting period). I understand that a good cause extension may be provided for no more than a total of 24 months. Receipt of OWF under a good cause extension cannot result in receiving more than the federal 60 month time limit. I am requesting a good cause extension to receive OWF benefits for the following reason(s):

Participant Signature

Date

Part B: Good Cause Extension Criteria *(completed by Case Manager or customer/participant)*

Check the box(es) that applies to the reason that a good cause extension is being requested.

(0101) The parent/caretaker has a loss of employment.

The individual must document that he/she has been employed while not receiving OWF benefits. The individual is required to participate in a Job Search and apply for unemployment compensation benefits. If the loss of employment is due to a job quit, the customer must show that the job quit was due to an illness of the customer or family member, lack of supportive services, unreasonable work demands, or unsuitable conditions.

(0201) The parent/caretaker is unable to find full-time employment due to documented barriers.

This includes lack of education, felony conviction, physical or mental impairment, drug or alcohol addiction or domestic violence. The individual is to cooperate in overcoming barriers.

(0301) The household documents a loss of earned or unearned income due to a change in household composition as the result of divorce.

(0501) The household documents a loss of earned or unearned income due to a change in household composition as a result of death or another reason other than divorce.

(0502) The household has unique personal circumstances.

The Center Director must review the circumstances and agree that they create good cause for the family to have to reapply to participate.

(1825) Good cause for any other reason as a result of an intercounty transfer (ICT).

An ICT received in Franklin County is recoded 1825 when the FCDJFS does not have a good cause reason code that corresponds to the reason code of the issuing county.

Good cause criteria has not been met.

Which of the above criteria do you feel that you meet (enter number code): _____

Part C: Case Manager Good Cause Extension Decision

- All Documentation provided Additional verification requested due: _____
 Requested documentation not received Denied Date denial notice sent: _____
 Approved

Comments:

Case Manager Signature

District

Date

Part D: Supervisory Review / Admin Review

Comments:

Supervisor Approved Denied

Signature

Date

Administrator Approved Denied

Signature

Date