

OHIO	CHILD CA	ARE CHANGE REC	QUEST FOR	RM	
	Receiving Ohio Wo	orks First (OWF)	Yes No		
	Currently receiving	g child care benefits?	Yes No		
Customer Name:			Case/SS#:		
Customer Email:					
	Complete the section f	for the change you wo	ould like to re	port.	
Change in Assignr	nent: Check all that app	oly. OWF Activ	rity	SNAP Activity	
	OWF Sanction	SNAP San		Benefit Closed	
Begin Date of Chan	ge:				
Address Change:	Home	Mailing			
New Address:					
Child(ren) on Child	d Care Case (enter child	l's information below)	: Add	Remove	
Name:		Name:			
DOB:	SS#:	DOB:	SS#:		
Begin Date:		Begin Date:			
Child Care Provider Change: New Provider Change in Co-Pay					
	New Provider: Provider ID#:   Begin Date: Co-pay Amount:				
	en) changing provider:				
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Change of Hours:	Check all that apply.				
Employment School Hours Increase Hours Decrease					
Begin Date of New I	Employment/School Sche	edule:	_		
New Schedule:					
Please allow	10 days for processing.				
• Your co-pay termination.	must be paid in full with y	your current provider or	your benefits	may be subject to	
	Customer	CJFS Staff			
			Date:		
Ways to Submit This Form:					
Mail: 1641 Payne Avenue, Cleveland, OH 44114   Fax: (216) 987-7700   Online: ssp.benefits.ohio.gov					
Staff Use Only: Case Closure Date: County Transfer Effective Date:					

This institution is an equal opportunity provider. Visit https://www.fns.usda.gov/cr/fns-nondiscrimination-statement. Cuyahoga Job and Family Services provides access to an interpreter at no charge to customers who are limited – English proficient and individuals with impaired vision and/or hearing.