

THE WORK NUMBER EXPRESS SERVICE

SECURITY AND USER AGREEMENT FORM

As an employee of the County of Los Angeles, Department of Public Social Services (DPSS), I will have access to confidential information contained in The Work Number Express Service. Therefore, I agree to the following:

- ☐ I will only access The Work Number Express Service as part of my official work duties to verify a participant's employment status or income for purposes of determining eligibility for receipt of public assistance provided by DPSS including but not limited to CalWORKs and CalFresh. I understand that the information accessed is strictly confidential and cannot be reproduced, disclosed or made accessible in whole or in part, in any manner whatsoever, to any third party, unless mandated by law.
- ☐ I will complete the mandatory Learning Link web-based Safeguarding Federal Tax Information (FTI) training prior to accessing The Work Number Express Service information.
- ☐ I will ensure that the following forms are completed and signed by the applicant/participant before I access The Work Number Express Service information:
- **For CalWORKs, including Public Assistance CalFresh cases:** The SAWS 2 PLUS - Application For CalFresh, Cash Aid , And/Or Medi-Cal/Health Care Programs (04/15 or later version is required) **OR** SAWS 1 - Initial Application For CalFresh, Cash Aid, And/Or Medi-Cal/Health Care Programs (8/13 or later version is required).
 - **For Non-Assistance CalFresh cases:** The CF 285 - Application for CalFresh Benefits (11/16 or later version is required), **OR** CF 37 – Recertification of CalFresh Benefits (11/16 or later version is required), **OR** SAWS 1 - Initial Application For CalFresh, Cash Aid, And/Or Medi-Cal/Health Care Programs (8/13 or later version is required), **OR** SAWS 2 PLUS - Application For CalFresh, Cash Aid , And/Or Medi-Cal/Health Care Programs (04/15 or later version is required).
- ☐ I will provide the GEN 1390, Informing Notice – Regarding an Action Taken on Your Case, along with the respective Notice of Action each time income from The Work Number Express Service is used in the computation of benefits. The GEN 1390 includes the below information:

"The action being taken against you is based in part from information obtained from the Consumer Credit Report Agency listed below. This Agency did not make the decision to take this action against you and is not able to explain why the decision was made. You can obtain a free copy of information contained in your file if you make a request to the Agency within 60 days. You may dispute the accuracy or completeness of any information by contacting the Agency."

The Work Number/Equifax
11432 Lackland Road
St. Louis, MO 63146
1-800-367-2884
www.theworknumber.com

I HAVE READ, UNDERSTAND, AND AGREE TO THE TERMS OF THE ABOVE AGREEMENT.

Dillon Welsh

Employee Name (Please Print)

Employee Signature

Date

District/Region

Employee Number

Office Head (Please Print)

Signature

Date