

THRIVE BY THREE – INFORMING NOTICE AND OPT-IN FORM

Great news! You may be eligible to participate in the CalWORKs Thrive by Three (TbT) Program. This program offers support and wrap-around services for you and your family.

ABOUT THRIVE BY THREE SERVICES

The County of Santa Cruz Human Services Department is committed to providing access to healthcare and child development resources to CalWORKs families with pregnant women and children 0-3. These services are part of the County's TbT and California's Home Visiting Program.

TbT is a voluntary program that pairs you with a trained professional who schedules regular visits with you to provide guidance, coaching, access to prenatal and postnatal care, early learning resources, and other health and social services for you and your child. Visits may take place in your home, in County offices (when available), or in a setting that is comfortable for you.

Your family may be eligible to receive TbT services for up to thirty-six months or until your child's third birthday, whichever is later.

BENEFITS OF THRIVE BY THREE SERVICES

Your family may receive many positive benefits from participating in TbT, including improving your ability to:

- Keep you and your baby healthy
- Be the best parent you can be
- Cope with stress in healthy ways
- Support your child's development
- Obtain employment and training opportunities
- Obtain referrals to benefits and resources available for you and your children
- Enroll in high-quality child care services at no cost to you

A TbT Social Worker will provide you with support, guidance, coaching, and connections to important resources that help improve your families' health education, social, economic, and financial future. You may be referred to a personal nurse that will work with you to have a healthy pregnancy and a thriving family.

THRIVE BY THREE ELIGIBILITY

To be eligible for TbT services, you must meet one of the following criteria:

- A member of a CalWORKs assistance unit.
- The parent or caretaker relative for a child-only case and the child is less than 36 months of age at the time the individual enrolls in the program.
- A pregnant individual who is eligible for CalWORKs.

If you do not meet the criteria listed above, you may still be eligible to participate depending on your location. To volunteer to participate in the program, sign and return this form.

THRIVE BY THREE PARTICIPATION REQUEST

Yes, I would like to volunteer to participate in TbT services. I understand that I may voluntarily terminate services at any time.

I volunteer to receive TbT services for my child(ren) listed below:

Print Name of Child (Age)

Print Name of Child (Age)

Print Name of Child (Age)

I am pregnant. My approximate due date is _____.

No, I do not want to volunteer to participate in TbT services at this time but understand that I may volunteer to participate in the future by informing my CalWORKs worker, who will determine if I am still eligible to participate.

Reason(s) for declining TbT services:

Currently receiving similar services.

Do not feel the program will provide any benefits.

Not interested in receiving TbT services.

Other: _____

By signing this form, I understand the following:

- The information I provided will be shared with the TbT partner agencies so they can contact me and schedule a time for the appointments to begin.
- I certify that I am pregnant or the parent or caretaker relative of the child(ren) listed above,
- This program is 100% voluntary, and I can cancel services at any time by notifying the Santa Cruz County Human Services Department.
- This authorization expires one year from the date of signature unless revoked earlier.
- A copy of this form was offered or provided to me.
- Participation in this program shall not affect my eligibility for any other CalWORKs benefits, supports, or services, including CalWORKs exemptions.

Case Name	Case Number
Name of Parent or Caretaker Relative	Phone
Signature of Parent or Caretaker Relative	Date
County Staff Name	Phone