



**Commonwealth of Massachusetts**  
*Executive Office of Health and Human Services*  
**Department of Transitional Assistance**  
 600 Washington Street • Boston, MA 02111

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 Governor

RONALD PRESTON  
 Secretary

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JOHN A. WAGNER  
 Commissioner

**Field Operations Memo 2004-42**  
**October 29, 2004**

**To:** Transitional Assistance Office Staff  
**From:** *cd* Cescia Derderian, Assistant Commissioner for Field Operations  
**Re:** TAFDC – Change to the ESP Referral and Response Form

**Overview**

ESP vendors need to know the number of hours a recipient is required to meet the Work Program requirement.

The ESP Referral and Response form is used to refer recipients to an ESP component. The number of hours must be added to the form *by the AU Manager* until a change is made in BEACON to include the hourly requirement. It is expected the change to this form will be in the next BEACON increment.

**AU Manager Responsibilities**

*Effective immediately*, for all ESP Referral and Response forms used to refer **Work Program required** recipients to an ESP Component, the AU Manager must print the number of hours the recipient is Work Program required at the bottom of the first page. For example:  
 “Required Hours: 30.”

This information **must** be added to the form **before** it is given to the recipient to bring to the ESP vendor.

**Questions**

If you have any questions, please have your Hotline designee call the Policy Hotline.