

NEW YORK STATE
OFFICE OF CHILDREN AND FAMILY SERVICES
REQUEST FOR FORMS AND PUBLICATIONS

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If you are filling this form out by hand, **PLEASE PRINT CLEARLY.**

If you are a **County Worker, Day Care Provider, Adoption Agency, Court, or a private Doctor or Hospital**, PLEASE CHECK THE **INTERNET** site for your needed Forms: <https://ocfs.ny.gov/main/documents/> OR Publications: <https://ocfs.ny.gov/main/documents/docs%20Pubs.asp>

If you are an **OCFS Employee, within the agency, or in a facility**, Please check the **INTRANET** site for needed Forms: <https://ocfs.state.nyenet/admin/Forms/> OR Publications <https://ocfs.ny.gov/main/documents/docs%20Pubs.asp>.

If you **DO NOT** have INTER/INTRANET ACCESS, you can have your Forms order filled by leaving a message on the **FORMS REQUEST LINE: 518-473-0971**

<p style="text-align: center;">OCFS Forms and Publications Unit 52 Washington Street, Room 116 South Building Rensselaer, NY 12144-2834 OR CALL the Forms Request Line 518-473-0971</p>	<p>Deliver to: (Person, address; please include floor#, section, room#, We DO NOT deliver to P.O. Boxes)</p>
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PLEASE FILL IN ALL INFORMATION REQUESTED. INCLUDE A PHONE NUMBER IN CASE ADDITIONAL INFORMATION IS NEEDED.

REQUESTOR OF THE FORM/PUBLICATION? (OFFICE, AGENCY, FACILITY, PRIVATE, ETC.)	DIVISION/BUREAU:	
NAME OF PERSON REQUESTING THE FORM/PUBLICATION: (PLEASE PRINT)	PHONE NUMBER: - -	EXT:

Can you access the <u>Internet Site?</u> https://ocfs.ny.gov/main/	<input type="checkbox"/> Yes <input type="checkbox"/> No	Can you access the <u>Intranet Site?</u> https://ocfs.state.nyenet/	<input type="checkbox"/> Yes <input type="checkbox"/> No	Today's Date: / /
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FORM OR PUBLICATION NUMBER	TITLE OF FORM OR PUBLICATION	QUANTITY REQUESTED	QUANTITY SHIPPED	BACKORDERED AT THIS TIME	FOR OCFS USE ONLY
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ADDITIONAL REMARKS, INFORMATION: