 Department of Children & Family Services <i>Building a Stronger Louisiana</i>	Division/Section	Family Support
	Chapter No./Name	04 – Economic Stability (ES)
	Part No./Name	K – Louisiana Combined Application Project (LaCAP)
	Section No./Name	K-400-LaCAP Redetermination
	Document No./Name	K-410-LaCAP Notice of Timely Reapplication
	Effective Date	March 5, 2025

I. STATEMENT OF POLICY

A LaCAP Re-Enrollment Form ([LaCAP 1R](#)) will be mailed to all LaCAP clients during the 34th month of eligibility. A Program Information and Rights and Responsibilities form, [LaCAP 2](#), will be system-generated and enclosed with the re-enrollment form. A nightly batch run on the 3rd to last work day of each month will create the [LaCAP 1R](#) for mail out. All forms will be mailed by the last work day of the month.

The following information will be automatically populated on the re-enrollment form based on the information in the * LITE case file.


- The individual's:
 - Name
 - Address
 - Case ID
 - Date of birth
 - Sex
 - Ethnicity/Race **
 - ***
- The return address of the local parish office based on the individual's zip code.

The re-enrollment form includes space for the individual to:

- Confirm the accuracy of or make corrections to his address, Social Security Number, date of birth, sex, and race,
- State whether he lives alone, or if living with others, whether he purchases and prepares meals separately from others in their shared living situation,
- State the amount of rent or mortgage, property taxes, homeowner's insurance, and other housing expenses incurred,
- State the type of utilities he is responsible to pay each month,
- Sign and date

The applicant or the authorized representative must sign page 2 of [LaCAP 1R](#), and by doing so, attest to understanding his rights and responsibilities under the program.

The re-enrollment form must be accepted if it contains the applicant's name, address, and signature of the applicant or authorized representative.

	Division/Section	Family Support
	Chapter No./Name	04 – Economic Stability (ES)
	Part No./Name	K – Louisiana Combined Application Project (LaCAP)
	Section No./Name	K-400-LaCAP Redetermination
	Document No./Name	K-410-LaCAP Notice of Timely Reapplication
	Effective Date	March 5, 2025

The timely reapplication date is the 15th day of the last month of the certification period. If the 15th falls on a weekend or holiday, the timely reapplication date is the next working day. The client has timely reapplied if the application form is received on or before the timely reapplication date.

II. PROCEDURES

K-411 LACAP – PR NOTICE OF TIMELY REAPPLICATION

The re-enrollment must be accepted if it contains the applicant's name, address, and the signature of the applicant or authorized representative.

The timely reapplication date is the 15th day of the last month of the certification period. If the 15th falls on a weekend or holiday, the timely reapplication date is the next workday. The client has timely reapplied if the re-enrollment is received by the 15th.

III. FORMS AND INSTRUCTIONS

[LaCAP 001R Form/Instructions LaCAP Re-enrollment Form](#)

[LaCAP 002 Form/Instructions LaCAP Program Information and Rights and Responsibilities](#)

IV. REFERENCES

[LAC 67:IIISubpart3. Supplemental Nutrition Assistance Program \(SNAP\) Chapter 21 Louisiana Combined Application Project Subchapter 2105](#)