## Employee Compliance Emergency Full Access (FA)\* Post Review Worksheet

Agency/Site:	CPA:	Reviewer:
Number of Infant (non-BF) Certifications:	100% Reviewed? □ Yes □ No	Date(s) of Emergency FA:
Number of other Certifications:	<b>20% Reviewed?</b> □ Yes □ No (# completed: )	Date of post review:

	Participant ID # and DOB Catego		y Proofs Documented in I-WIC:		Copy of	WIC Risk Factors Assigned	Comments:	
			Income	Residency	Identity	Proof(s) on file?	(List)	
1						Y N		
2						Y N		
3						Y N		
4						Y N		
5						Y N		
6						Y N		
7						Y N		
8						Y N		

R- 02.21 WIC Full Access Record Review Tool

<sup>\*</sup> Refer to IL WIC PPM, Administration, Section 14.3 for details on requirements.