TO: ALL COUNTY WELFARE DIRECTORS ALL FOOD STAMP COORDINATORS

# DEPARTMENT OF SOCIAL SERVICES 744 P Street, Sacramento, CA 95814



May 23, 2003	REASON FOR THIS TRANSMITTAL
ALL-COUNTY INFORMATION NOTICE NO. I- 33-03	<ul> <li>State Law Change</li> <li>Federal Law or Regulation         <ul> <li>Change</li> </ul> </li> <li>Court Order or Settlement         <ul> <li>Agreement</li> </ul> </li> </ul>
	[ ] Clarification Requested by One or More Counties
TO. ALL COUNTY WELFARE DIRECTORS	[X] Initiated by CDSS

SUBJECT: FOOD STAMP BENEFITS YOUR RIGHTS AND RESPONSIBILITIES DFA 285-A3

The purpose of this notice is to transmit the streamlined Food Stamp Benefits Your Rights and Responsibilities (DFA 285-A3) informing notice. The DFA 285-A3 has been reduced from a four page notice to a two page notice. As a result, it contains one copy of the Rights and Responsibilities and one perforated page containing two certifications for the client's original signatures. The signed certifications are to verify that the client has received all the informing notices (DFA 285-A3, FS 22, FS 23).

The one copy of the Rights and Responsibilities is given to the client. No case file copy is required. One half of the certification sheet with an original signature is given to the client. The remaining half of the certification sheet with an original signature certificate is filed in the client's case file.

If you have any questions please call Sandra Pierce at 916 653-5208 or e-mail to Sandra. Pierce@dss.ca.gov.

Sincerely, **Original document signed by** 

RICHTON YEE, Chief Food Stamp Branch

Attachment

### YOUR RIGHTS AND RESPONSIBILITIES

When you apply for food stamp benefits, you have rights and responsibilities. Your most important right is to be treated fairly without regard to race, color, national origin, political beliefs, religion, gender, age or disability. If you think you have been discriminated against, you may file a complaint by:

- 1. Contacting your county's civil rights coordinator; or
- 2. Calling 916-654-2107 or 1-866-741-6241 (toll free) or, for the hearing or speech-impaired, 1-916-654-2098 (TDD); or,
- 3. Writing to:
- California Department of Social Services Civil Rights Bureau, MS 15-70, P.O. Box 944243 Sacramento, CA 94244-2430
- <u>or</u> if you get Food Stamps only, write to:
   U.S. Department of Agriculture,
   Food and Consumer Service, Civil Rights Office,
   550 Kearny Street, San Francisco, CA 94108-2518

#### YOUR RIGHTS

As a food stamp applicant or recipient, you have the right:

- To get help to filling out your application or any other food stamp form.
- To ask for translated forms and notices if you don't read English.
- To be treated with courtesy, consideration and respect.
- To ask for oral interpretation of forms and notices if translated forms and notices are unavailable.
- To be interviewed promptly by the county when you apply and to have your eligibility determined within thirty (30) days
- To have the face-to-face interview waived if you are unable to appoint an Authorized Representative and no household member is able to go into the Food Stamp office because everyone is 65 years old and over or physically disabled and no one has earned income.
- To have the face-to-face interview waived if you have a hardship and cannot get to the Food Stamp office.
- To discuss your case with the county and to review your case yourself when you request to do so.
- To be told the rules for getting emergency food stamp benefits. If the county thinks you might be eligible, you will get an interview immediately and food stamp benefits within three (3) days.
- To ask to have your Food Stamp I.D., authorization document, or issuance card, or food stamps replaced if lost in the mail, damaged, stolen or destroyed.

- To get written notice when your application is approved, denied, or when your benefits change or stop.
- To have your records kept confidential by the county and state, unless there is an outstanding felony arrest warrant issued for you, or as otherwise provided by law.
- To file a complaint or to ask for a state hearing within ninety (90) days of any action if you think the action was wrong. You can write to your County Welfare Department or call toll free 1-800-952-5253 or for the hearing or speech impaired (TDD) 1-800-952-8349.
- To be represented at a state hearing by yourself or by a household member, friend, attorney, or other person of your choice. You may get free legal help at your local legal aid office or welfare rights group.

#### YOUR RESPONSIBILITIES

As a food stamp applicant or recipient, you are responsible for meeting the following requirements:

Fingerprint and photo imaging. California has a rule that says that everyone who is required to be fingerprinted and photo imaged must have their photo and fingerprint image taken in order for your household to receive food stamp benefits. If someone in your household who is required to be photographed or finger imaged refuses to do so, your household will not be able to get food stamp benefits. These images are confidential and can only be used to prevent or prosecute welfare fraud.

#### YOUR RESPONSIBILITIES (Continued)

• Citizenship/Immigration Status. You must sign under penalty of perjury that each member applying for food stamp benefits is a U.S. citizen or U.S. national. If someone in your household is not a citizen you will need to provide verification of his or her immigration status. Information you give us on immigration status will be checked with the U.S. Immigration and Naturalization Service (INS), but it will only be used to determine food stamp eligibility. Information about immigration is private and confidential.

You can apply for and get food stamp benefits for eligible family members, even if your family includes other members who are not eligible because of immigration status. For example, immigrant parents may apply for food stamp benefits for their U.S. citizen or qualified immigrant children, even though the parents may not be eligible for benefits. You do not have to provide immigration information or documents for any family members who are not eligible for food stamp benefits and who are not asking for food stamp benefits. Getting food stamp benefits will not affect your immigration status or the immigration status of your family.

 Social Security Number. You must provide the Social Security Number (SSN) for everyone in your household who is applying. Anyone who does not give an SSN or proof of application for a SSN or proof of application for an SSN will not be able to get food stamp benefits.

The SSN(s) will be used in a computer match to check your income and resources with records from tax, welfare, employment, the Social Security Administration and other agencies. SSN(s) will also be matched with law enforcement agencies. Differences may be checked out with employers, banks or others.

- Verification. If your worker asks for proof of a fact you give, you must provide it or give us the name of some other person or agency we may contact to get it. When you can't get the proof you need, we may be able to help you get it.
- Reporting. Every food stamp household must report on their income and household situation. Most households have to report every month, but your worker will tell you whether you are a monthly or non-monthly reporting household.
- Cooperation. You must cooperate with county, state and federal staff. You may not get benefits or your benefits may be stopped if you don't cooperate.

#### PENALTIES AND DISQUALIFICATION

Failing to follow the rules listed in this document can result in an Intentional Program Violation (IPV). The penalties for an IPV are disqualification as listed below, AND you can be fined up to \$250,000 and/or put in jail/prison for up to 20 years. Disqualification means not being able to get food stamp benefits for a period of time. When you are disqualified, the penalties stop your food stamp benefits for:

- 12 months for the first violation
- 24 months for the second violation, and
- forever for the third violation.

These penalties start after a state hearing or court of law finds that an individual committed an IPV. In addition, there are separate penalties for other things you should not do. They are:

- If you are found guilty in any court of law of trading food coupons for controlled substances, food stamp benefits can be stopped for 24 months for the first violation and forever for the second violation.
- If you are found guilty in any court of law of trading food stamp coupons for firearms, ammunition or explosives, food stamps can be stopped forever for the first violation.
- If you sell or trade food stamps worth \$500 or more, food stamp benefits can be stopped forever.
- If you file more than one application at the same time and give false identification or residence information, food stamp benefits can be stopped for ten (10) years.

Also, anyone who is accused of committing an IPV may agree to be disqualified by signing either a Disqualification Consent Agreement or an Administrative Disqualification Hearing Waiver. Anyone who signs one of these documents accepts responsibility to repay any overissuance.

In addition, if you don't report all the facts or give wrong facts to get or keep getting benefits, you can be legally prosecuted with penalties of a fine and/or imprisonment. You may be found to have committed a felony if more than \$400 is wrongly paid out in food stamp benefits because you didn't report all of your facts or changes in income, property or family status.

If your household receives food stamp benefits, you must follow these rules:

- Don't give wrong or incomplete facts to get or keep getting food stamp benefits.
- Don't trade or sell food stamps, Food Stamp Authorization Documents (ADs), or issuance cards.
- Don't alter ADs or issuance cards to get food stamp benefits you are not entitled to get.
- Don't use food stamps to buy ineligible items such as alcoholic drinks or tobacco, paper or cleaning products.
- Don't use someone else's food stamps, ADs or issuance cards for your household.

## **CERTIFICATION**

- I certify that I have received copies of "Your Rights and Responsibilities" (DFA 285-A3) and "How to Report" (FS 23). I understand my rights and responsibilities. I agree to comply with my responsibilities. I also understand the penalties for giving wrong or incomplete facts and failing to report facts or situations that may affect my eligibility or benefit level for food stamp benefits.
- I also certify that I have received a copy of "Applying for Food Stamp Benefits" (FS 22).

SIGNATURE (ADULT HOUSEHOLD MEMBER OR AUTHORIZED REPRESENTATIVE):	DATE:	
CIONATURE OF WITNESS OR INTERPRETER	D.175	
SIGNATURE OF WITNESS OR INTERPRETER	DATE:	
I certify that I have informed the applicant/recipient of the above respons for intentionally making false statements or failing to report information when		
SIGNATURE OF INTERVIEWING WORKER		
DATE APPLICATION REVIEWED WITH CLIENT OR AUTHORIZED REPRESENTATIVE:		
DFA 285-A3 (1/02) IMPORTANT INFORMATION-REQUIRED FORM — NO SUBSTITUTES PERMITTED	Page 3 of 3	
- TEAR HERE -		
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