



FAMILY INDEPENDENCE ADMINISTRATION

Seth W. Diamond, Executive Deputy Commissioner



James K. Whelan, Deputy Commissioner
Policy, Procedures and Training

Lisa C. Fitzpatrick, Assistant Deputy Commissioner
Office of Procedures

POLICY DIRECTIVE #06-13-OPE

(This Policy Directive Replaces PD #05-40-OPE)

REVISIONS TO SERVICING HEARING-IMPAIRED APPLICANTS AND PARTICIPANTS

Date: May 2, 2006	Subtopic(s): Interpreter Services
AUDIENCE	These instructions are for staff at all Job Centers, Non-Public Assistance Food Stamp (NPA FS) Offices and offices of the Special Needs Region.
REVISIONS TO ORIGINAL DIRECTIVE	<p>This policy directive has been revised to:</p> <ul style="list-style-type: none"> reiterate the appropriate procedures for accessing interpreter services for hearing-impaired applicants/participants requesting services from the Family Independence Administration (FIA); instruct staff to protect the application/filing date when an appointment is rescheduled because a sign language interpreter is not available the same day a hearing-impaired applicant files his/her Public Assistance (PA) or FS application; and emphasize that information describing an individual's limitations should be included in the employability assessment and considered when developing the employability plan.
POLICY	Communication assistance must be provided for applicants/participants who are deaf or hearing impaired.
BACKGROUND See PB #06-57-ELI for more information on authorized representatives.	FIA's applicant/participant population includes people who are hearing impaired. Staff should make every effort to communicate with them. Applicants/participants who are hearing impaired are entitled to bring a sign language interpreter <u>who is at least 18 years of age</u> to the Center/Office if they choose to do so.

HAVE QUESTIONS ABOUT THIS PROCEDURE?
Call 718-557-1313 then press 2 at the prompt followed by 765 or
send an e-mail to *FIA Call Center*

Hearing-impaired applicants/participants are not required to bring an interpreter and must **never** be asked to do so.

Applicants/participants must **never** be asked to bring a sign language interpreter.

Under no circumstances is a minor allowed to act as an interpreter. If an applicant/participant brings a minor as a sign language interpreter, the Worker must explain that the applicant/participant can use his/her own adult interpreter, if s/he chooses, but that HRA has its own contract with professional sign language interpreters who will assist in the interview. The Worker will then proceed with the steps outlined in the Required Action section of this policy directive. Should the applicant/participant wish to return with his/her own adult interpreter, the Worker must reschedule the appointment. A person can never be denied service due to his/her inability to communicate orally with staff.

Revision: Workers must protect the file date even if an interpreter is not available when the application is filed.

If an appointment is rescheduled because a sign language interpreter is needed but not available the same day the hearing-impaired applicant files his/her PA or FS application, the application filing date and any other dates relevant to the processing of the application do not change.

Hearing Impaired Services and Benefits

HRA’s Office of Equal Employment Opportunity (EEO) provides access to sign language interpretation and Teletypewriter (TTY) services to assist individuals who are hearing impaired and want to apply for or participate in FIA’s services and benefits.

EEO provides sign language interpreter services to the hearing impaired.

To ensure that the hearing impaired population has access to FIA services and benefits, EEO has contracted with a professional interpreter services vendor that provides interpreter services for the hearing impaired at Job Centers, NPA FS Offices and Special Needs programs. In addition, EEO has assigned an EEO language liaison to each program area. Each EEO liaison has been specially trained to handle language assistance needs for the hearing impaired and to access the professional interpreter service vendor (see **Attachment B**).

Language Card

HRA’s Office of Refugee and Immigrant Affairs (ORIA) distributes the Language Card (**W-194**), a multilingual palm card that includes a statement for the hearing impaired, advising them that if a sign language interpreter is needed, they can point to a particular area of the Language Card to alert staff of their need.

REQUIRED ACTION

When a hearing-impaired applicant/participant visits the Center/Office in person, staff first encountering the person must:

In-person applicants/participants

- Confirm the applicant/participant’s hearing impairment by having him/her point to the hearing impaired statement on the ORIA Language Card. This card (see attached) is available to all staff members. The Center Director/NPA FS Office Site Manager must ensure that a supply of Language Cards is always available in the reception area. Call ORIA at (212) 331-5423 for additional Language Cards.

Providing interpreter services

Providing Interpreter Assistance

1. If the applicant/participant indicates s/he wants a sign language interpreter, the Receptionist or Worker points to the bottom sentence on the Language Card, which states that staff will call an interpreter. The Receptionist or Worker should immediately notify the Director/Site Manager’s Designee that a hearing-impaired applicant/participant needs an interpreter.
2. The Worker should face the applicant/participant, look directly at him/her while speaking, speak slowly and enunciate clearly. Many people with a hearing impairment are able to read lips. If the Worker determines the applicant/participant can read lips, the Worker should continue the interview without an interpreter if s/he clearly understands the applicant/participant’s responses.
3. If the Worker determines that a sign language interpreter is needed, the EEO sign language liaison should be contacted. The sign language liaison is authorized to schedule an appointment with the contracted vendor. The Worker must enter a case comment in POS, annotating the need for a sign language liaison, and whether the applicant/participant accepted or refused to accept the sign language accommodation made for him/her by HRA.

Refer to **Attachment B** for list of EEO liaisons

Document any accommodation made and the applicant/participant’s acceptance or refusal of said accommodation.

Any emergency and/or immediate need must be addressed prior to scheduling a return appointment.

Note: In instances of immediate need or emergency, a professional interpreter can be available within two hours. If a second in-person interview with an interpreter is needed, be sure that the applicant/participant understands the date, time and location of the new appointment. If a Worker’s liaison is absent, EEO can help book appointments; call (212) 331-5114.

Document each attempt to contact an interpreter in the case record.

4. If the applicant/participant does not have an emergency situation, the Worker can schedule a return appointment for a date and time convenient for both. The Worker writes the information about the appointment, including a checklist of all the necessary documents, and gives this to the applicant/participant, since writing can be considered an acceptable form of communication for most hearing-impaired individuals. The Worker must provide the applicant/participant with a copy of HRA's TTY listing and point out that the applicant/participant can contact HRA through INFOLINE at (877) 472-8411.

New information

Note: Rescheduling an appointment does not change the application filing date or any other dates relevant to processing the application.

5. On the day of the return appointment, the Worker assures that all documentation relevant to the case is available and that the Worker and the applicant/participant will be ready to use the interpreter services. This preparation prevents unnecessary wait time.
6. When the vendor's sign language interpreter arrives for the scheduled appointment, the Worker and the interpreter conduct the interview with the applicant/participant.

New information

Note: Information describing an individual's limitations should be included in the employability assessment and considered when developing the employability plan.

7. When all information is obtained, the Worker ends the interview. If additional appointments or actions are needed, the Worker and interpreter convey this information to the applicant/participant. The Worker documents in the case record and on the Language Questionnaire (**W-680FF**) that the individual is hearing impaired so that an interpreter can be scheduled for future appointments. Please refer to PB #05-54-OPE for further instructions pertaining to the **W-680FF** and appropriate use of coding.

See PB #05-54-OPE

TAD entries

For Turn-Around Document (TAD) entries, the Worker must ensure that code **9** has been entered in Element **255** (Lang) and the correct language indicator has been entered in **281** (Lang Read). Refer to the Worker's Guide to Codes manual and/or PB #05-54-OPE for the appropriate language code.

See Worker's Guide to Codes manual

Directors/Site Managers must be sure to display the following poster in all applicant/participant waiting areas:

Mandated poster

- If You Need an Interpreter (**Pub #4842**)

**PROGRAM
IMPLICATIONS**

Model Center
Implications

The instructions in this policy directive are applicable to Customer Service and Information Center (CSIC) and Front Door Reception (FDR) staff. As FDR is the first point of contact for applicants/ participants, it must be prepared to carry out step 1 on page 3, then refer the hearing-impaired applicant/participant to a CSIC Worker.

Paperless Office
System (POS)
Implications

The Receptionist must ask the applicant/participant which language s/he prefers to be interviewed in and record the preference in the “Do you need an interpreter?” field on the **Site Determination** screen.

The Worker must review the **Language** field (255) and **Reading Language** field (281) of the POS TAD to ensure the correct language has been entered.

The Worker must follow all steps in the Required Action section of this procedure.

Medicaid
Implications

There are no Medicaid implications.

**FAIR HEARING
IMPLICATIONS**

Avoidance

Ensure that all case actions are processed in accordance with current procedures and that electronic case files are kept up to date. Remember that applicants/participants must receive either adequate, timely or adequate and timely notice of all actions taken on their case.

Conferences in a
Job Center

If a hearing-impaired applicant/participant comes to the Job Center requesting a conference, the Receptionist must alert the Fair Hearing and Conference (FH&C) Unit that a hearing-impaired individual is waiting to be seen.

Note: In Model Offices, FDR will only issue a FH&C ticket. FDR does not need to verbally alert the Fair Hearing Unit.

The FH&C AJOS/Supervisor I will follow the steps outlined on page 3 for obtaining a sign language interpreter. S/he then will listen to and evaluate the individual’s complaint with the assistance of the interpreter and discuss the issue with the Case Management Unit Team Supervisor. The FH&C AJOS/Supervisor I will notify the appropriate Supervisor of his/her decision regarding the applicant/participant’s complaint, in accordance with current procedure.

The FH&C AJOS/Supervisor I is responsible for ensuring that further appeal by the applicant/participant through a Fair Hearing request is properly controlled and that appropriate follow-up is taken in all phases of the Fair Hearing process.

Conferences in an NPA Food Stamp Office

If a hearing-impaired applicant/participant comes to the NPA FS Office and requests a conference, the NPA Receptionist must alert the Site Manager that a hearing-impaired applicant/participant is to be seen.

Note: In Model Offices, FDR will only issue a FS Conf/Appt/Problem ticket. FDR does not need to verbally alert the Site Manager.

If a sign language interpreter is required, the Site Manager will follow the steps outlined on page 3 for obtaining a sign language interpreter.

The Site Manager will listen to and evaluate the applicant/participant's complaint with the assistance of a sign language interpreter. The Site Manager will then make a decision regarding the complaint.

The Site Manager is responsible for ensuring that further appeal by the applicant/participant through a Fair Hearing request is properly controlled and that appropriate follow-up action is taken in all phases of the Fair Hearing process.

Evidence Packets

All Evidence Packets must contain a detailed history, copies of relevant WMS screen printouts, other documentation relevant to the action taken and copies of NYCWAY **Case Notes** screens.


RELATED ITEMS

PB #05-54-OPE Revised Language Questionnaire (**W-680FF**)
 PB #06-57-ELI Authorized Representatives and In-Office Interviews

REFERENCES

06-ADM-05 Providing Access to Temporary Assistance Programs
 Americans with Disabilities Act

ATTACHMENTS

 Please use Print on Demand to obtain copies of forms.

- Attachment A** Definitions
- Attachment B** HRA/Office of Equal Opportunity Sign Language Interpreter Liaisons (Rev. 04/28/06)
- Attachment C** Human Resources Administration TTY Listing (Rev. 04/06)
- PUB #4842** If You Need an Interpreter (Rev. 6/04)
- W-194** Language Card (Rev. 1/5/05)
- W-680FF** Language Questionnaire (Rev. 3/22/05)
- W-680FF (S)** Language Questionnaire (Spanish) (Rev. 3/22/05)
- Page 1.2-2 of the Worker's Guide to Codes manual (3/20/2006)

Definitions

Teletypewriter (TTY):

TTY connects a hearing-impaired individual with a service provider via a specific telephone typewriting intermediary.

Interpretation:

The word "interpretation" is commonly used when referring to oral communication.

Translation:

The word "translation" is commonly used when referring to written communication.

Office of Refugee and Immigrant Affairs (ORIA):

A Human Resources Administration (HRA) office whose primary function is to ensure equal access and services to individuals with Limited English Speaking Ability (LESA).

Language Card (W-194):

A multilingual card distributed by ORIA to all Center/Office employees. It enables the applicant/participant to communicate his/her preferred language and need for interpreter assistance. Centers/Offices can order additional Language Cards from ORIA by calling (212) 331-5423.

Sign Interpreter Services:

EEO has contracted with a private professional vendor that specializes in sign language interpretation services to provide interpreters on-site at HRA locations. Sign language liaisons in Centers/Offices are trained in the procedures to access these contracted services.

Attachment B

**HRA/OFFICE OF EQUAL EMPLOYMENT OPPORTUNITY
SIGN LANGUAGE INTERPRETER LIAISONS**

All requests for sign language assistance should be forwarded to your program area Liaison listed below. If you are unable to contact your Liaison, please call Milagros Cordero at (212) 331-5114/5 for further assistance.

<u>AGENCY/PROGRAM AREA</u>	<u>LIAISON</u>	<u>TELEPHONE</u>
HIV, AIDS Services/Procedure Trng. & Community Affairs	Sabrina Smith-Sweeny	212) 620-5095
Domestic Violence/Office of Emergency Intervention Services	Vivian Williams	212) 331-4587
Family Independence Administration		
Job Centers	Joanne Kent	212) 331-5568
Food Stamps	Dalia Butcher	212) 331-5569
Constituents & Community Affairs		212) 331-4637
Medical Insurance & Community Services Administration		
Medicaid	Marie Jean-Charles	212) 630-1994
Home Care	Donna Jones	212) 360-5464
Protective Services for Adults	Dan Devlin	212) 630-1923
HASA Staten Island, Center #99	Lenn Robinson	718) 390-8529
Office of Staff Resources	Felicia O'Malley	212) 331-3237
Legal Affairs		
Office of Revenue Investigation	Mischa Edwards	212) 274-5189
Bureau of Eligibility Verification	Ulecia Ramdehal, Bklyn	718) 923-2346

HUMAN RESOURCES ADMINISTRATION TTY LISTING

04/06

Any questions or changes regarding this list should be directed to the Office of Equal Employment Opportunity, at (212) 331-5114. If at any time the TTY lines are inaccessible, please call the Relay Operator (800) 662-1220

Office and Contact Person

Telephone #s Voice/TTY

HRA's Infoline

(877) 472-8411 (Automated system)
(718) 557-1399
(800) 662-1220 TTY Relay Operator

Constituent & Community Affairs

180 Water Street, NYC

(212) 331-4640 (Voice)
(212) 331-4699 TTY

Division of AIDS Services/Service Line

400 8th Avenue, 2nd Floor, NYC

(212) 971-0626/0822 (Voice)

Domestic Violence & Emergency Intervention Services

180 Water Street, NYC
Vivian Williams

(212) 331-4587 (Voice)
(800) 662-1220 TTY Relay Operator

Equal Employment Opportunity

180 Water Street, NYC
Milagros Cordero

(212) 331-5114 (Voice)
(212) 331-5112 TTY

HRA Infoline

92-31 Union Hall Street – Jamaica, Queens
Regina Young

(877) 472-8411 (Voice)
(800) 662-1220 TTY Relay Operator

Family Independence Administration

Foods Stamps

Job Centers

180 Water Street – 21st Floor, NYC
Joanne Kent
Dalia Butcher

(212) 331-5568/5569 (Voice)
(212) 331-4103 TTY
(212) 331-4875 TTY

Medical Insurance & Community Services Admin.

Medicaid Eligibility Information Services

330 West 34th Street, NYC
Tisha Brown

(212) 273-0047/8 (Voice)
(800) 662-1220 TTY Relay Operator

Revenue & Investigation

Eligibility Verification Review

330 Jay Street, Brooklyn
Delores Jones

(718) 254-0400 (Voice)
(800) 662-1220 TTY Relay Operator

Revenue & Investigation

Medicaid Unit

33-28 Northern Boulevard, NYC

(718) 752-4077 (Voice)
(800) 662-1220 TTY Relay Operator

**HUMAN RESOURCES ADMINISTRATION
TTY LISTING**

04/06

Linden Model Office JC

210 Livingston Street, 7th floor
Brooklyn, NY 11201
Eva Andrews

(718) 237-7248 (Voice)
(800) 662-1220 TTY Relay Operator

East End Model Office JC

165 E. 126th Street (AKA) 2322 3rd Ave, 5th Fl
New York, NY 10035
Yesenia Pagan Jarvis


(212) 860-6802 (Voice)
(800) 662-1220 TTY Relay Operator

SAMPLE

If you need an interpreter

We provide free interpreter services on request. Please go to the reception desk now and we will call someone to interpret for you.



Albanian Shqip	Nëse keni nevojë për përkthyes... Ne sigurojmë shërbime përkthimi falas sipas kërkesës. Ju lutem shkoni tek banaku i regjistrimit dhe ne do të thërrasim dikë që të përkthejë për ju.
Arabic عربي	إذا كنتم بحاجة إلى مترجم فإننا نوفر لكم خدمة الترجمة حسب الطلب. الرجاء الذهاب إلى مكتب الإستقبال الآن وسنقوم بالاتصال بمترجم لخدمتكم.
Bengali বাংলা	যদি আপনার দোভাষীর প্রয়োজন হয়... আমরা অনুরোধসাপেক্ষে বিনামূল্যে দোভাষী পরিষেবা দিয়ে থাকি। অনুগ্রহ করে এখন অভ্যর্থনা ডেস্কে যান এবং আমরা আপনার হয়ে দোভাষীর কাজ করার জন্য কারও সঙ্গে যোগাযোগ করব।
Bosnian Bosanski	Ako vam treba prevodioc... Mi omoguđujemo besplatne prevodilačke usluge prema vašoj želji. Molimo uputite se do recepcije, a mi ćemo pozvati službenu osobu da prevodi za vas.
Chinese 中文	如您提出要求，我們可為您提供免費翻譯服務。請去前臺接待處，我們會打電話為您尋找翻譯人員。 如您提出要求，我们可为您提供免费翻译服务。请去前台接待处，我们会打电话为您寻找翻译人员。
Farsi فارسی	اگر شما در نیاز مترجم هستید... ما خدمات مجانی مترجم بر درخواست فراهم می کنیم. لطفاً اکنون به میز پذیرائی بروید و ما برای شما مترجم را احضار خواهیم کرد.
French Français	Si vous avez besoin d'un interprète... Nous fournissons des services d'interprète sur demande. Veuillez aller au bureau de réception, et nous vous appèlerons un interprète.
Haitian Creole Kreyòl	Si w bezwen yon entèprèt... Nou bay sèvis entèprèt gratis si w mande. Tanpri ale nan biwo resepsyon an kounye an epi nou pral rele yon entèprèt pou ou.
Hindi हिन्दी	यदि आपको दुभाषिये (इन्टरप्रेटर) की जरूरत है... हम अनुरोध पर नि:शुल्क दुभाषिये की सेवा उपलब्ध कराते हैं। कृपया अब आप स्वागत डेस्क पर जाइये और हम आपको समझाने के लिए किसी दुभाषिये को कॉल करेंगे।
Italian Italiano	Se ha bisogno di un interprete... Offriamo servizi gratuiti di interpretariato dietro richiesta. Prego si rivolga alla reception desk e attenda mentre Le chiamo un interprete.
Korean 한국어	통역사가 필요하시면... 저희는 요청 시 통역사 서비스를 무료로 제공해 드리고 있습니다. 지금 접수처로 가시면 귀하를 위해 통역해드릴 사람을 불러드리겠습니다.
Polish Polski	Jeśli Pan/Pani potrzebuje tłumacza... Zapewniamy bezpłatnego tłumacza na żądanie. Prosimy zgłosić się do recepcji i zwołamy tłumacza.
Russian Русский	Если вам нужен переводчик, то в случае необходимости мы предоставим вам бесплатные переводческие услуги. Подойдите, пожалуйста, к секретарю, и вам предоставят переводчика.
Spanish Español	Si necesita un intérprete, proporcionamos servicio de interpretación gratis. Para solicitarlo, diríjase a la recepción; llamaremos al intérprete.
Tagalog Tagalog	Kung kailan mo ng tagasalin... Nagbibigay kami ng libreng serbisyo ng tagasalin kung kailangan man. Pumunta ka sa reception desk at tatawag kami ng taong magsasalin para sa iyo.
Ukrainian Український	Якщо Вам потрібний перекладач... Ми надаємо безкоштовні послуги перекладачів за проханням. Будь ласка, зверніться до секретаря приймальної і ми покличемо перекладача для Вас.
Urdu اردو	اگر آپ کو ترجمان (انٹریپرٹر) کی ضرورت ہے... درخواست کرنے پر ہم مفت میں ترجمان کی خدمت فراہم کرتے ہیں۔ برائے مہربانی اب آپ استقبالیہ ڈیسک پر جائیں اور ہم آپ کو سمجھانے کے لیے کسی ترجمان کو کال کریں گے۔
Vietnamese Tiếng Việt	Nếu cần một thông dịch viên... Chúng tôi cung cấp dịch vụ thông dịch miễn phí khi quý vị yêu cầu. Xin đến quầy tiếp tân ngay và chúng tôi sẽ gọi một thông dịch viên cho quý vị.
Yiddish אידיש	אויב איר דארפט א דאלמעטשער... מיר שטעלן צו אומזיסטע דאלמעטשער סערוויסעס אויפ'ן פארלאנג. ביטע גייט יעצט צום אויפנאם טישל און מיר וועלן רופן עמיצן צו דאלמעטשן פאר איך.
Deaf / Hearing Impaired	 If you need an interpreter . . . We provide free sign language interpreter services on request. Please go to the reception desk now and we will call someone to interpret for you.



Language Card

If you do not know the language of the person who wants your help, use this card. The person can point to the language needed and you can arrange for an interpreter.

Language	“Do you speak...”	“Please be seated. I will call an interpreter for you.”
Albanian	Flisni shqip?	Uluni ju lutem. Po shkoj të thërras një përkthyes për ju.
Arabic	هل تتكلم اللغة العربية؟	تفضل بالجلوس. سأتصل بمرجم لك.
Bengali	আপনি কি বাংলা বলতে পারেন?	অনুগ্রহ করে বসুন যখন আমি আপনার হয়ে দোভাষীর কাজ করার জন্য কারও সঙ্গে যোগাযোগ করছি।
Bosnian	Govorite li bosanski?	Molimo, sjednite. Poslaću prevodioca za Vas.
Cantonese	您講廣東話嗎？	請坐。讓我為您叫一位翻譯員。
Mandarin	您講國語嗎？	請坐。讓我為您叫一位翻譯員。
Creole	Èske ou pale Kreyòl?	Tanpri chita. Mwen pral rele yon moun pou tradwi pou ou.
French	Parlez-vous français?	Veillez vous asseoir. Je vais vous appeler un interprète.
Greek	"Μιλάτε Ελληνικά";	"Παρακαλώ καθίστε. Θα καλέσω ένα διερμηνέα για σας".
Hebrew	האם אתה דובר/ת עברית?	נא לשבת. אני אצמן מתרגם/ת.
Hindi	क्या आप हिन्दी बोलते हैं?	कृपया बैठ जाइए। मैं आपके लिए दुभाषिये की व्यवस्था करूंगा/करूंगी।
Italian	Parla italiano?	Prego, si accomodi e attenda mentre Le chiamo un interprete.
Khmer	តើអ្នកនិយាយភាសាខ្មែរឬទេ?	សូមអញ្ជើញអង្គុយ ។ ខ្ញុំនឹងទូរស័ព្ទហៅអ្នកបកប្រែ ដើម្បីបកប្រែឲ្យអ្នក ។
Korean	한국어를 사용하십니까?	앉으십시오. 통역사를 불러드리겠습니다.
Polish	Czy Pan/Pani mówi po polsku?	Proszę siadać, podczas gdy wołam tłumacza.
Russian	Вы говорите по-русски?	Присядьте, пожалуйста. Я сейчас позову переводчика, который вам поможет.
Spanish	¿Habla español?	Tome asiento, por favor. Llamaré a un intérprete para que lo ayude.
Ukrainian	Чи Ви розмовляєте українською мовою?	Будь ласка, посидьте, поки я викликаю перекладача для Вас.
Urdu	کیا آپ اردو بولتے ہیں؟	مہربانی کر کے بیٹھ جائیے۔ میں آپ کے لیے کسی ترجمان کو بلاتا ہوں/بلاتی ہوں۔
Vietnamese	Anh/chị nói tiếng Việt phải không?	Xin mời ngồi chờ. Tôi sẽ gọi người thông dịch cho anh/chị.
Yiddish	איר רעדט אידיש?	ביטע זעצט אייך. איך וועל רופן א דאלמעטשער פאר אייך.

SAMPLE

Hearing Impaired If you need an interpreter in Sign Language, please point here.



Date: _____

Case Number: _____

Language Questionnaire

IMPORTANT: Please read this notice and indicate your speaking and reading language preferences. If you do not speak English well, the Human Resources Administration (HRA) can provide free interpreter services for you at an HRA office. This form must be completed and returned with your application/recertification papers.

Print Name: _____

Name M.I. Last Name

Address: _____

City: _____ State: _____ Zip: _____

What is your preferred spoken language? Please select **ONE** only.

- | | | | | |
|--|---|-----------------------------------|-------------------------------------|-------------------------------------|
| <input type="checkbox"/> Albanian | <input type="checkbox"/> Czech | <input type="checkbox"/> Hindi | <input type="checkbox"/> Laotian | <input type="checkbox"/> Thai |
| <input type="checkbox"/> Arabic | <input type="checkbox"/> German | <input type="checkbox"/> Italian | <input type="checkbox"/> Polish | <input type="checkbox"/> Urdu |
| <input type="checkbox"/> Chinese-Cantonese | <input type="checkbox"/> Greek | <input type="checkbox"/> Japanese | <input type="checkbox"/> Portuguese | <input type="checkbox"/> Vietnamese |
| <input type="checkbox"/> Chinese-Mandarin | <input type="checkbox"/> Haitian-Creole | <input type="checkbox"/> Khmer | <input type="checkbox"/> Russian | <input type="checkbox"/> Yiddish |
| <input type="checkbox"/> Farsi | <input type="checkbox"/> Hebrew | <input type="checkbox"/> Korean | <input type="checkbox"/> Spanish | <input type="checkbox"/> English |
| <input type="checkbox"/> Other: _____ | | | | |

Do you require free interpreter services? Yes No

Written notices can be sent in the languages listed below. Please select **ONE** only. If your preferred language is not listed, please check (☑) English.

- | | | | |
|----------------------------------|---|----------------------------------|----------------------------------|
| <input type="checkbox"/> Arabic | <input type="checkbox"/> Haitian-Creole | <input type="checkbox"/> Russian | <input type="checkbox"/> English |
| <input type="checkbox"/> Chinese | <input type="checkbox"/> Korean | <input type="checkbox"/> Spanish | |

Applicant/Participant's Signature

Date

(Include in the Application/Recertification kit)



Fecha: _____

Número del Caso: _____

Cuestionario Respecto al Idioma

IMPORTANTE: Por favor lea este aviso e indique el idioma que usted prefiere hablar y leer. Si no habla bien el inglés, la Administración de Recursos Humanos (Human Resources Administration - HRA) le puede proveer gratuitamente servicios de intérprete en una de sus oficinas. Este formulario debe devolverse con todos los documentos para la solicitud/recertificación.

Nombre en Letra de Molde: _____

Dirección: _____

Ciudad: _____ Estado: _____ Código Postal: _____

¿Qué idioma prefiere hablar y leer por favor marque **UNO**.

- | | | | | |
|---|--|-----------------------------------|------------------------------------|------------------------------------|
| <input type="checkbox"/> Albanés | <input type="checkbox"/> Francés | <input type="checkbox"/> Hindi | <input type="checkbox"/> Laosiano | <input type="checkbox"/> Tailandés |
| <input type="checkbox"/> Árabe | <input type="checkbox"/> Alemán | <input type="checkbox"/> Italiano | <input type="checkbox"/> Polaco | <input type="checkbox"/> Urdu |
| <input type="checkbox"/> Chino-cantonés | <input type="checkbox"/> Griego | <input type="checkbox"/> Japonés | <input type="checkbox"/> Portugués | <input type="checkbox"/> Vietnamés |
| <input type="checkbox"/> Chino-mandarin | <input type="checkbox"/> Creole-Haitiano | <input type="checkbox"/> Khmer | <input type="checkbox"/> Ruso | <input type="checkbox"/> Yidish |
| <input type="checkbox"/> Persa | <input type="checkbox"/> Hebreo | <input type="checkbox"/> Coreano | <input type="checkbox"/> Español | <input type="checkbox"/> Inglés |
| <input type="checkbox"/> Otro: _____ | | | | |

¿Necesita servicios de intérprete gratuitos? Sí No

Se pueden enviar avisos por escrito en los idiomas listados a continuación. Por favor elija sólo **UNO**. Si el idioma que prefiere no figura entre los listados más abajo, por favor marque () inglés.

- | | | | |
|--------------------------------|--|----------------------------------|---------------------------------|
| <input type="checkbox"/> Árabe | <input type="checkbox"/> Creole-Haitiano | <input type="checkbox"/> Ruso | <input type="checkbox"/> Inglés |
| <input type="checkbox"/> Chino | <input type="checkbox"/> Coreano | <input type="checkbox"/> Español | |

Firma del Solicitante/Participante

Fecha

(Adjunte al paquete de Solicitud/Recertificación)

WORKER'S GUIDE TO CODES

1.2-2

03/20/2006

SECTION 10: SUFFIX LEVEL CODES

CATEGORY CODES (CAT) - 209

EAA (PA Center)	Emergency Assistance for Adults (No change)
EAF (PA Center)	Emergency Assistance for Families (No change)
FA (PA Center)	Family Assistance (Former ADC, ADCU and HR Families Cases should be in the FA category)
FS (FS Center)	Food Stamps
SNCA (PA Center)	Safety Net Cash Assistance (Former HR, except HR Families, Cases should be in the SNCA category)
SNNC (PA Center)	Safety Net Non-Cash. See page 1 for further details.
SNFP (PA Center)	Safety Net Federally Participating. See page 1 for further details.
MA (MA Center)	Medical Assistance (No change)
MPE (MA Center)	Presumptive Eligibility for Children
MSSI (MA Center)	Medicaid Supplemental Security Income (No change)
ADC (PA Center)	This category is no longer valid. Aid to Dependent Children (Will be re-categorized to FA)
ADCU (PA Center)	This category is no longer valid. Aid to Dependent Children – Unemployed (Will be re categorized to FA)
HR (PA Center)	This category is no longer valid. Home Relief (Will be re categorized to SNCA)
HRPG (PA Center)	This category is no longer valid. Home Relief Pre Investigation (Clients should be evaluated and transferred to one of the new categories)

LANGUAGE SPOKEN CODES (LANG) - 255

A	Arabic	L	Albanian	Z	Portuguese
B	Urdu	M	German	1	African Languages
C	Chinese-Mandarin	N	Hindi	2	Chinese-Cantonese
D	French Creole	P	Polish	3	Chinese-Other
E	English	Q	Farsi	4	Native American
F	French	R	Russian	5	Serbo-Croatian
G	Greek	S	Spanish	6	Swedish
H	Hebrew	T	Thai	7	Tagalog
I	Italian	V	Vietnamese	8	Laotian
J	Japanese	W	Khmer	9	Sign Language
K	Korean	Y	Yiddish		

LANGUAGE READ CODES (LANG READ) – 281

A	Arabic	L	Albanian	Z	Portuguese
B	Urdu	M	German	1	African Languages
C	Chinese-Mandarin	N	Hindi	2	Chinese-Cantonese
D	French Creole	P	Polish	3	Chinese-Other
E	English	Q	Farsi	4	Native American
F	French	R	Russian	5	Serbo-Croatian
G	Greek	S	Spanish	6	Swedish
H	Hebrew	T	Thai	7	Tagalog
I	Italian	V	Vietnamese	8	Laotian
J	Japanese	W	Khmer		
K	Korean	Y	Yiddish		