



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 BULLETIN #05-62-OPE

REVISION TO APPOINTMENT NOTICE (W-140JJ)

<p>Date: April 20, 2005</p>	<p>Subtopic(s): NYCWAY Forms</p>
<p> This procedure can now be accessed on the FIAweb.</p>	<p>The purpose of this policy bulletin is to inform staff that the Appointment Notice (W-140JJ) template has been revised as a mandatory appointment notice to accommodate Action Code 10SN.</p> <p><u>NYCWAY Action Code 10SN</u></p> <p>This code is used to batch call in sanctioned participants to Job Centers for a mandatory eligibility review in order to determine how they have been managing financially on a reduced budget. This notice will also include variable text that will advise participants to complete an enclosed Child Care Provider Form (W-273B) if they need child care in order to attend the mandatory eligibility review appointment.</p> <p>Text variables for the W-140JJ form include:</p> <ul style="list-style-type: none"> • The action code; • The name of the appointment; • Descriptive information about the appointment; • Time, date, address, travel directions and contact telephone number; and • Enclosure document(s). <p>Failure of participants to keep eligibility appointments without good cause will result in the termination of the public assistance case.</p> <p><i>Effective Immediately</i></p>

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*

Forms can now be accessed through Print on Demand at all Job Centers.

Attachments:

W-140JJ Mandatory Eligibility Notice (Rev. 4/20/05)

W-140JJ(S) Mandatory Eligibility Notice (Spanish) (Rev. 4/20/04)

Snippets for W-140JJ (Rev. 4/20/05)



Date: _____
Case Number: _____
Case Name: _____
Center: _____
Caseload: _____
Action Code: _____

Appointment Notice

The date of your appointment is:

Appointment Date: _____ Time: _____ Telephone: _____

Location Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Travel Directions:

If you are working, you must bring proof of your income such as recent pay stubs or a letter from your employer when you report. Other forms of proof can be accepted if these are not readily available.

This is a mandatory eligibility appointment. Failure to keep this appointment may result in the closing of your public assistance case. If you are receiving child care benefits and fail to keep this appointment, these benefits could be terminated.

Some good cause reasons for not reporting to your case eligibility review appointment:

- A full-time work schedule that conflicts with the review appointment.
- Extraordinary transportation difficulties that make it impossible for you to report to your eligibility review appointment.
- A personal or family emergency that prevents you from reporting to your eligibility review appointment.
- Extraordinary circumstances beyond your control that prevent you from reporting to your eligibility appointment.

If you are unable to report to your eligibility review appointment, you must contact the number listed above so that appropriate arrangements can be made to accommodate you.

CASH ASSISTANCE IS TIME LIMITED. A JOB IS YOUR FUTURE!



Fecha: _____
Número del Caso: _____
Nombre del Caso: _____
Centro: _____
Unidad del Caso: _____
Código de Acción: _____

Aviso de Cita

La fecha de su cita es:

Fecha de la Cita: _____ Hora: _____ Teléfono: _____

Nombre del Local: _____

Dirección: _____

Ciudad: _____ Estado: _____ Código Postal: _____

Indicaciones de Viaje:

Si usted trabaja actualmente, debe traer, al presentarse a la cita, comprobante de su ingreso, como talones de paga recientes o una carta de su empleador. En caso de que dichos documentos no estén disponibles, se aceptarán otros tipos de pruebas.

Esta cita de elegibilidad de su caso de asistencia pública es obligatoria, y el no presentarse a ella puede resultar en el cierre de su caso. Si usted recibe beneficios de ciudadano infantil y no acude a esta cita, dichos beneficios podrían ser discontinuados.

Algunas razones válidas por las cuales no presentarse a su cita de revisión de elegibilidad:

- Un horario de trabajo a tiempo completo que interfiere con la cita de revisión.
- Dificultades fuera de lo común respecto a transporte que le imposibilitan presentarse a su cita de revisión de elegibilidad.
- Una emergencia personal or familiar que le impide presentarse a su cita de revisión de elegibilidad.
- Circunstancias ajenas a su voluntad que le impiden presentarse a su cita de elegibilidad.

Si usted no puede presentarse a su cita de revisión de elegibilidad, debe comunicarse al número que aparece más arriba para que se puedan concertar los arreglos que le convengan.

LA ASISTENCIA EN EFECTIVO TIENE LÍMITE DE TIEMPO, ¡MIENTRAS QUE EL TRABAJO ES SU FUTURO!

Action Code English

10SN

Mandatory Eligibility Review. Our records indicate that your public assistance cash benefits have been reduced because you failed to comply with one or more employment requirements. We have scheduled a case eligibility review appointment to discuss how you have been managing on your reduced budget. If you need child care, please have the enclosed Child Care Provider Form (form **W-273B**) completed by the person who will care for your children.
Enclosures: Child Care Provider Form (form **W-273B**)

Spanish

Revisión Obligatoria de Elegibilidad. Según nuestros archivos, sus beneficios en efectivo de asistencia pública han sido reducidos debido a que usted no cumplió uno o más de los requisitos de trabajo. Hemos programado una cita de revisión de elegibilidad de caso para discutir en qué medida usted ha podido arreglárselas con presupuesto reducido. Si necesita cuidado infantil, por favor asegúrese que la persona que cuidará al niño llene el formulario adjunto de Proveedor de Cuidado Infantil (Form **W-273B (S)**).
Adjunto: Formulario del Proveedor de Cuidado Infantil (Form **W-273B (S)**)