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COMMONWEALTH OF KENTUCKY
Cabinet for Health and Family Services
<Department for Community Based Services>
<Division of Family Support>

Date:<Date>
Case Number:<Case No.>

<Client First Name, MI, Last Name>
<Care of (c/o)>
<To Street Address Line1>
<To Street Address Line 2>
<To City, State, Zip>

Able-bodied Adults Without Dependents (ABAWDs) between 18 and 49 years old must meet work requirements to remain eligible for Supplemental Nutrition Assistance Program (SNAP) benefits.

Beginning <Month Day, Year>, your county becomes subject to the ABAWD time limits. As a SNAP recipient that may be subject to the work requirements, you can choose to:

- Participate in the E&T Program to meet work requirements. The E&T Program is a work program that includes work experience, skills training, job search and education to help you prepare for and obtain paid employment or a better job. **(Contact a Career Coach to discuss this exciting opportunity by calling <Kentucky Career Center Number> or visiting your local Kentucky Career Center office at : <Career Center Address>);**
- Work at least 20 hours a week on average, either paid or unpaid, to meet work requirements on your own **(Report any job or activity to DCBS);** or
- Not meet work requirements. **(You will only be able to receive SNAP for 3 months during a 36-month period without meeting work requirements, unless you become exempt from work requirements.)**

In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, sex, religious creed, disability, age, political beliefs, or reprisal or retaliation for prior civil rights activity in any program or activity conducted or funded by USDA.

Persons with disabilities who require alternative means of communication for program information (e.g. Braille, large print, audiotape, American Sign Language, etc.), should contact the Agency (State or local) where they applied for benefits. Individuals who are deaf, hard of hearing or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English.

To file a program complaint of discrimination, complete the USDA Program Discrimination Complaint Form, (AD-3027) found online at: http://www.ascr.usda.gov/complaint_filing_cust.html, and at any USDA office, or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by:

- (1) Mail: U.S. Department of Agriculture
Office of the Assistant Secretary for Civil Rights
1400 Independence Avenue, SW
Washington, D.C. 20250-9410;
- (2) Fax: (202) 690-7442; or
- (3) Email: program.intake@usda.gov.

This institution is an equal opportunity provider.

You may also file your complaint with the Cabinet for Health and Family Services, Office of Human Resource Management, EEO Compliance Branch, 275 East Main Street, 5C-D, Frankfort, Kentucky 40621 or call (502) 564-7770 EXT 4107.

If you have other complaints about your SNAP case, you can call the Ombudsman's Office at 1-800-372-2973 or (TTY) 1-800-627-4702.