

OPPORTUNITIES AND OBLIGATIONS

Supplemental Nutrition Assistance Program (SNAP)

Employment and Training (E&T)

YOUR OPPORTUNITIES

- ◆ Based on your assigned activity, the number of hours you participate in the activity, and the availability of funding, you will receive a standard reimbursement for monthly transportation expenses. **NOTE:** You can claim the actual expenses up to the maximum amount for the activity if you provide documentation (receipt, etc.) that the expense was legitimately incurred.
- ◆ You have the opportunity to have decisions about your case reviewed by a program supervisor. You may request a hearing if you disagree with a decision made by the supervisor.
- ◆ You have the opportunity to receive information regarding services available from certified domestic violence centers or organizations that provide counseling and supportive services to victims of domestic violence.

In order to receive a reimbursement each month, you must:

- Participate in Work Experience or Self-Initiated Work Experience based on the amount of food assistance benefits received and/or;
- Attend school or other approved training and/or;
- Participate in other activities if assigned.

YOUR OBLIGATIONS

- ◆ You are required to participate in and complete all assigned program activities. You must respond to all contacts from the Department of Children and Families (Food Assistance) Office, and Supplemental Nutrition Assistance Program (SNAP) Employment and Training (E&T) Service Provider.
- ◆ Inform the Supplemental Nutrition Assistance Program (SNAP) Employment and Training (E&T) Service Provider and Department of Children and Families Office of changes that affect your participation, such as employment, family problems that prevent you from completing activities, changes of address and telephone number, health, etc.
- ◆ Apply for and seek employment as required.
- ◆ Accept any reasonable offer of suitable employment.
- ◆ Remain employed without reducing your hours or quitting unless there is a good reason you can document.

CONSEQUENCES FOR FAILURE TO PARTICIPATE

- 1st Penalty:** Loss of food assistance for a minimum of one month or until compliance, whichever is longer.
2nd Penalty: Loss of food assistance for a minimum of three months or until compliance, whichever is longer.
3rd Penalty: Loss of food assistance for a minimum of six months or until compliance, whichever is longer.

You must comply with the Supplemental Nutrition Assistance Program after the sanction/penalty period ends before your benefits can be restored unless you meet an exemption.

Participant's Signature

Date

Printed Name

Case Number

**You have not been asked to provide your social security number on this form. For your information however, the Social Security Act (42 U.S.C. 1137) provides that your social security number may be used to administer the program, including determination of eligibility, attributing the receipt of services, correspondence and participation, as well as for reporting purposes.*

Employment and Training Questions

Department of Economic Opportunity (DEO)

Email: OSSTClientSupport@deo.myflorida.com

Toll Free Number: 855-212-0880

Benefit Eligibility and Referral Questions

Department of Children and Families (DCF)

Website: www.myflfamilies.com

ACCESS: www.myflorida.com/accessflorida/