COMMONWEALTH OF VIRGINIA DEPARTMENT OF SOCIAL SERVICES TEMPORARY ASSISTANCE FOR NEEDY FAMILIES (TANF) Case Name: <u>Deeba Junaid</u>
Client's Name: \_\_\_\_
Case Number: <u>118947431</u>

## Do you have a disability?

If you have a disability that makes it harder for you to do the things we ask you to do, **please tell us**. A disability is a physical or mental condition that limits one or more life activities.

These conditions may include:

- Diseases (i.e. diabetes, epilepsy, heart)
- Learning disabilities (i.e., a problem reading, writing, or doing math)
- Mental retardation
- Depression or other mental health problems
- · Limited ability to walk or stand
- Hearing or vision loss
- · History of drug or alcohol addiction

## Help is available

If you tell us you have a disability, we can help you by:

- · Calling or visiting if you are not able to come to the office
- Telling you what the letters we send to you mean
- Helping you complete a form
- Referring you to services to help you
- Helping to verify information or gather forms
- Helping you appeal if you disagree with a decision we make
- Changing program requirements

## Federal law protects people with disabilities

The Americans with Disabilities Act (ADA) is a federal law that says people with disabilities have the same rights to benefits or services from the Department of Social Services as other people. You will not be denied benefits and services because of your disability. If you have a condition that makes it hard for you to do what we ask, we will help you find a way to get the benefits and services available to you. If you need help, tell us.

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Please indicate below if you have a known disability:		
YES NO		
List the known conditions and disabilities:	_	
	-	
Receipt of "Do you have a disability form?"		
I received a copy of the form "Do you have a disability?" and it was explained to me	). 	
Client's Signature: Date:	_	SIGN HERE
This form was explained to the client on, who refused to sign it.		
Worker's Signature Date		

## Your right to complain

If you feel your benefits or services are denied or changed because of your disability, you may call the Virginia Department of Social Services toll free at 1-800-552-3431 or you may call your worker. If you have a hearing or speech impairment, you may call the Virginia Department of Social Services toll free at 1-800-828-1120 (Text/TTY). Requests for an appeal may also be made in writing to:

Hearing and Legal Services Manager Virginia Department of Social Services 801 E. Main Street Richmond, Virginia 23219-2901

You may file a discrimination complaint by contacting:

U.S. Department of Health and Human Services Office of Civil Rights - Region III Suite 372 Public Ledger Building 150 S. Independence Mall West Philadelphia, Pennsylvania 19106-3499 Hotline: 1-800-368-1019

TDD: (215) 861-4440 Fax: (215) 861-4431

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