

Wichita DCF Office  
2601 S OLIVER ST  
WICHITA, KS 67210-1205



**Notice Date:** 11/17/2022  
**Case Name:** JERALD W IVY Jr.  
**Case Number:** 02103275  
**Program:** Food Assistance

JERALD W IVY Jr.  
1526 E EL MONTE ST  
WICHITA, KS 67216-1552

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### **EXCITING OPPORTUNITY AVAILABLE**

Finally, there's a job program that offers you more than a job!

Rewarding employment is hard to find. It takes the right set of skills, the right attitude and the right opportunities. If you are receiving food assistance only, there is a program that may provide you with the training and support you need to get a job with a company that cares about your success.

This program is a new approach to employment and training that may help you achieve your goals and write your own success story.

Begin working with a Career Navigator to get started toward a career that matches your skills and interests. Your benefits won't be affected if you don't participate--the choice is yours.

Find out more and see if you are eligible. Please call the Office listed below and talk with a Career Navigator:

Wichita DCF Office  
(888) 369-4777

DCF.WichitaHWGoals@ks.gov

## CIVIL RIGHTS PROVISION

### **Do Not Send Applications Here.**

In accordance with federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, this institution is prohibited from discriminating on the basis of race, color, national origin, sex (including gender identity and sexual orientation), religious creed, disability, age, political beliefs, or reprisal or retaliation for prior civil rights activity.

Program information may be made available in languages other than English. Persons with disabilities who require alternative means of communication to obtain program information (e.g., Braille, large print, audiotape, American Sign Language), 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.

To file a program discrimination complaint, a Complainant should complete a Form AD-3027, USDA Program Discrimination Complaint Form which can be obtained online at: <https://www.usda.gov/sites/default/files/documents/USDA-OASCR%20P-Complaint-Form-0508-0002-508-11-28-17Fax2Mail.pdf>, from any USDA office, by calling (833) 620-1071, or by writing a letter addressed to USDA. The letter must contain the complainant's name, address, telephone number, and a written description of the alleged discriminatory action in sufficient detail to inform the Assistant Secretary for Civil Rights (ASCR) about the nature and date of an alleged civil rights violation. The completed AD-3027 form or letter must be submitted to:

**(1) mail:**

Food and Nutrition Service, USDA  
1320 Braddock Place, Room 334  
Alexandria, VA 22314; or

**(2) fax:**

(833) 256-1665 or (202) 690-7442; or

**(3) email:**

[FNSCIVILRIGHTSCOMPLAINTS@usda.gov](mailto:FNSCIVILRIGHTSCOMPLAINTS@usda.gov)

This institution is an equal opportunity provider.

### **Do Not Send Applications Here.**

**RIGHT TO REQUEST A FAIR HEARING** You have the right to ask for a fair hearing if you do not agree with a decision made on your case. **For cash and child care**, you must request an appeal in writing within 33 days of the date of this notice. If your written request is received prior to the effective date of the adverse action, you may continue receiving benefits at the current level if you request to do so. **For food assistance**, you may ask for a fair hearing in writing, in person, or by calling your DCF Service Center anytime within 90 days of the date of this notice. If your request is received within 10 days of the date of this notice, your benefits may continue at the current level while waiting for the fair hearing. In addition, you may request a pre-hearing conference to discuss your fair hearing request. This pre-hearing shall in no way delay or replace the fair hearing process. **For LIEAP**, you must request an appeal in writing within 30 days of the date of this notice. **For any program**, if you request to continue receiving benefits at the current level while awaiting the fair hearing, you may have to pay back any benefits you receive if the fair hearing decision is not in your favor.

You may be able to get free legal help from Kansas Legal Services by calling 1-800-723-6953 or visiting [www.kansaslegalservices.org](http://www.kansaslegalservices.org) for more information.

**PENALTY FOR FRAUD** Persons found guilty of intentionally obtaining benefits for which they are not entitled will be barred from receiving assistance in accordance with program guidelines and may also be subject to a fine or imprisonment or both.

**REPORTING CHANGES** You are required to report changes to DCF. We will tell you which changes you are required to report. If you have questions about your reporting requirements, please contact your local DCF office.

**CASH ASSISTANCE** You may not use your cash benefits to purchase alcohol, tobacco products, lottery tickets, concert tickets, professional or collegiate sporting event tickets, or tickets for other entertainment events intended for the general public or sexually oriented adult materials.

Toll Free Number: DCF Customer Service 1-888-369-4777