

EXP-84JJ LLF
6/24/09

Human Resources Administration/FIA
Special Needs Region-HBRP
180 Water Street, Room 2121
New York, NY 10038-4923

Richard



Human Resources
Administration
Department of
Social Services

Family Independence
Administration

Date: _____

Case Number: _____

Case Name: _____

Homebound Review Project Outreach Return Form (Return within 30 days)

Check one of the boxes below and return this form or call within (insert date—[30 days] from date of notice).

I want the Human Resources Administration (HRA) to review my case for any back benefits I may have lost because I could not come in for an appointment, bring in a document or do enough hours of an activity such as work, training, or WeCARE, and:

1. I intend to file an application for ongoing benefits at my local Job Center.
2. I have a serious health problem. I want HRA to come to my home to take my application for ongoing benefits.
3. I do not wish to apply for ongoing benefits at this time.

You may also request a review by calling (212)-835-7357.

After our review, if we find that you did lose benefits because you could not come in for an appointment, bring in a document or do enough hours of an activity such as work, training, or WeCARE, HRA will contact you and tell you what to do next.

Your Name: _____ Your Telephone Number: _____

Your Signature: _____ Date: _____

How to Request a Reasonable Accommodation

If you have a physical, mental health or learning problem that makes it difficult for you to

- come in for appointments,
- fill out an application, or
- meet other HRA requirements,

you have a right to ask for help from HRA. This help is called a reasonable accommodation. If you need help, call (212) 835-7357 or write to the Homebound Review Project at Human Resources Administration/FIA Special Needs Region-HBRP 180 Water Street, Room 2121 New York, NY 10038-4923.

If you asked for help and you think you did not get the help you needed, you can file a complaint. To file a complaint, you can write to: ADA Compliance Officer, Office of Legal Affairs, 180 Water Street, 16th Floor, New York, NY 10038, or fax your complaint to (212) 331-5023. If it is difficult for you to submit a complaint in writing, you may call (212) 331-4640 for assistance.

For office use only:

Worker's Name: _____ Date request received: _____