

**Notice of Action Taken on Your Application For the Prevention, Retention, and Contingency (PRC) Program**

Name
Street Address
City, State, and Zip Code

Assistance Group Name	
Assistance Group Number	Program
County <b>MONTGOMERY</b>	Mailing Date

This notice is to tell you that your application for the **Prevention, Retention, and Contingency Program (PRC)** dated \_\_\_\_\_

**G** has been denied because: \_\_\_\_\_  
\_\_\_\_\_

**G** has been approved for the period beginning \_\_\_\_\_ and ending \_\_\_\_\_ in the amount of \$ \_\_\_\_\_ for:  
\_\_\_\_\_  
\_\_\_\_\_

The regulations supporting this decision are: \_\_\_\_\_  
\_\_\_\_\_

If you do not understand this notice or want to talk to someone about it, you may call:

Caseworker	District/ID	Telephone Number
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**Your Right to a State Hearing**

This notice is to tell you about action we are taking on your case. If you do not understand this action, you should contact your caseworker. After discussing the reasons for the action with your caseworker, it is possible that we will change our decision or that you will agree with the action.

**If you do not agree with this action, you have a right to a state hearing.** A state hearing lets you or your representative (lawyer, welfare rights worker, friend, or relative) give your reasons against the action. We will also attend or be represented at the hearing to present our reasons. A hearing officer from the Ohio Department of Job and Family Services will decide who is right.

If you want a hearing, we must receive your hearing request within 90 days of the mailing date of this notice. You do not need to return this form if you agree with the action.

If someone else makes a written hearing request for you, it must include a written statement, signed by you, telling us that person is your representative. Only you can make a request by telephone.

If you want information on free legal services but do not know the number of your local legal aid office, you can call the Ohio State Legal Services Association, toll free, at 1-800-589-5888, for the local number.

If you want a state hearing, check one of the boxes below, sign and date this form, and send it to the Ohio Department of Job and Family Services, State Hearings, P.O. Box 182825, Columbus, Ohio 43218-2825.

- I want a county conference and a state hearing on this action.
- I want a state hearing only.

**I want a hearing.**

Signature	Date	Telephone Number
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**If you have been approved for Prevention, Retention, and Contingency (PRC) services, you may be eligible for Food Stamp benefits. Please contact your County Department of Job and Family Services (CDJFS) if you wish to apply for Food Stamps. Keep this letter to verify that you have been authorized for PRC services. It will make a difference in the way your Food Stamp eligibility is determined. In addition, the CDJFS may need to request additional verification to determine eligibility for the Food Stamp program.**