

PARTIAL REDETERMINATION APPOINTMENT NOTICE

READ CAREFULLY
Important Information About Your Cash Benefits

Dear _____

You are scheduled for a very important interview. At the interview, we will conduct a partial redetermination to go over your eligibility for cash assistance and your participation in employment and training activities.

We will update your existing Agreement of Mutual Responsibility (AMR) or complete a new AMR. The new or revised AMR will include action steps that you must take to comply with employment and training participation requirements. **You will not be eligible for cash assistance if the AMR is not returned within 30 days. If you or another adult already received 60 months of TANF, you and your family are ineligible for cash assistance.**

If you do not participate in this interview and do not have good cause you may lose cash benefits for your entire family.

You are scheduled for a partial redetermination interview at the County Assistance Office on

_____ at _____ with _____.

Please let me know if you need to change the date and time of this interview or if you would rather discuss this over the telephone. You may reach me between the hours of _____ and _____.

My telephone number is (_____) _____.

Supervisor _____ telephone number is (_____) _____.

This interview is designed to outline action steps to help you achieve self-sufficiency. I look forward to meeting with you.

Sincerely,

Caseworker