

## WIC RIGHTS AND RESPONSIBILITIES

### Sharing Your Personal Information:

Information about you may be given to others who are connected with the WIC Program, as required by law, and other WIC Programs if you transfer. **Your information may also be shared with other public programs that can assist you and to help Wisconsin improve health services. You may ask to see the list of these programs.** You may choose up to two alternate people to attend WIC appointments in your place. Your family's personal information may be shared with the alternates during the appointments.

### You Have the Right to:

- ❖ Ask for a fair hearing if you don't agree with a decision WIC made about you or your child's eligibility.
- ❖ Be treated the same regardless of your race, color, national origin, sex, disability, or age.
- ❖ Receive nutrition education and breastfeeding support. You are encouraged to keep your appointments.
- ❖ Receive information about immunizations, finding a doctor, and other health services your family may need.
- ❖ Receive WIC foods, which are some of the foods needed each day to be healthy. The foods are only for the WIC participant and go with the participant in cases of joint custody, foster care, etc.
- ❖ Receive a transfer document called a Verification of Certification (VOC). If you move out of state, you can take the VOC to a WIC Program outside of Wisconsin, and it will allow you to continue receiving benefits for your current benefit period. Please ask the WIC staff to print a VOC for you if you think you will be moving out of state.

### You are Responsible to:

- ❖ Use the eWIC card correctly. Food benefits will not be replaced if your eWIC card is misused by any person to whom you give your card and/or PIN. Never share your PIN with the cashier at the store.
- ❖ Let WIC staff know:
  - If your family's income changes, including Medicaid, BadgerCare Plus, or FoodShare eligibility.
  - If you move, your telephone number changes, or the number of people living in your house changes.
  - If a child moves into someone else's care (foster care, change in guardianship, etc.).
  - When you have your baby.
  - When you stop breastfeeding.
  - If you or a child is getting too much food or formula.
  - If your eWIC card or WIC breast pump is lost or stolen.
  - If you experience the loss of an infant or child, including a miscarriage, abortion, or stillbirth.
- ❖ Be honest and do not abuse the WIC Program. WIC Program abuse is monitored by the state WIC office. You may be taken off the WIC Program, have to pay money back to WIC, or have charges filed against you under state and federal law if you abuse the program in any of these ways:
  - Receive or try to receive benefits at more than one WIC office at the same time.
  - Give the WIC Program false information.
  - **Sell/trade/give away OR offer to sell/trade/give away the eWIC card, foods purchased with the card, or a WIC breast pump either verbally, in print, or online. Note: You may be required to provide proof of purchase (receipt) if you are found to be selling/trading/giving away OR offering to sell/trade/give away WIC-approved foods that were not purchased with an eWIC card and/or a breast pump that wasn't provided by the WIC Program.**
  - Try to or actually return or exchange WIC foods bought with the eWIC card at the store.
  - Try to or actually buy foods or other items that are not allowed.
  - Redeem WIC benefits at a store that you or an immediate family member owns, or complete your own WIC transaction. If access to another WIC authorized store is a problem, let your WIC office know.
  - Accept credit or cash for WIC foods.
  - Use abusive language, threaten, or be physically violent at the WIC office or while shopping for WIC foods.

By signing my name, I acknowledge that:

- ❖ I have read or WIC staff has read to me the Rights and Responsibilities of a WIC participant.
- ❖ The information I have given is correct, and WIC staff may check the information.
- ❖ I have a copy of the WIC Rights and Responsibilities in my WIC Approved Foods booklet.

If I refuse to sign this form, I understand that I will not receive benefits.

Participant Name(s)	Family ID No.
<b>SIGNATURE</b> – WIC Participant, Parent, Guardian, Foster Parent, or Caregiver	Date Signed
<b>SIGNATURE AND TITLE</b> – Person Determining Income Eligibility	Date Signed
<b>SIGNATURE AND TITLE</b> – Person Determining Final Eligibility – WIC CPA	Date Signed

In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, sex, disability, age, or reprisal or retaliation for prior civil rights activity in any program or activity conducted or funded by USDA.

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

To file a program complaint of discrimination, complete the USDA Program Discrimination Complaint Form, (AD-3027) found online at: [http://www.ascr.usda.gov/complaint\\_filing\\_cust.html](http://www.ascr.usda.gov/complaint_filing_cust.html), and at any USDA office, or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by:

- (1) mail: U.S. Department of Agriculture  
Office of the Assistant Secretary for Civil Rights  
1400 Independence Avenue, SW  
Washington, D.C. 20250-9410;
- (2) fax: (202) 690-7442; or
- (3) email: [program.intake@usda.gov](mailto:program.intake@usda.gov)

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