Mailing Date: $MM\!/DD/YYYY$



State of Wisconsin

PIN #: XXXXXXXXX

Consortium Name>
Phone Number: X-XXX-XXX-XXXX
Fax Number: X-XXX-XXX-XXXX



The State of Wisconsin is an equal opportunity service provider. This letter contains information that affects your benefits. If you need this material in a different format because of a disability or if you need this letter translated or explained in your own language, please call X-XXX-XXXX. These services are free.

FoodShare Notice of Sanction

This letter is to notify you that you have <VQT reason> without good cause. As a result, you will not be eligible for FoodShare from <date> to <date>. This sanction results in the total number of sanctions we have on file for you as: <numeral>.

If you do not agree with this decision, you have the right to a fair hearing. You may be able to continue to get FoodShare benefits until your fair hearing decision is made. If the fair hearing officer decides that the agency was right, you may need to return the extra benefits that you got after your benefits were supposed to change. You may also be able to get free legal help. To learn more about free legal help, call <phone number>. Please see your benefits letter for more details about filing a fair hearing.

Your sanction may end if any of the following occurs:

- You become exempt from the FoodShare work requirement.
- You obtain a new job with pay or hours similar to the job you quit.
- You work 30 or more hours per week.
- You regain eligibility for W-2 by meeting the W-2 work requirements.
- You regain eligibility for the unemployment benefit by meeting the unemployment benefit work requirements.
- Your sanction period ends.

You will need to reapply for FoodShare if you want to get benefits after your sanction period ends. You can reapply for benefits any time on or after <date> or any time you become exempt from the work requirement. If you are part of a FoodShare group, you should contact your agency to update your case instead of reapplying.

Work Registration

All members of your FoodShare group must be registered for work unless they are exempt. You may be considered exempt and may not need to meet the FoodShare work requirement if any of the following applies to you:

- You are younger than age 16 or older than age 59.
- You are already working at least 30 hours per week (or getting weekly earnings that equal 30 times the federal minimum hourly wage).
- You are the parent or are responsible for the care of a dependent child younger than age 6 (in or out of the home).
- You are the parent or are responsible for the care of a person of any age who cannot care for himself or herself (in or out of the home).
- You are age 16 or 17 and are not the primary person for the case.
- You are taking part in an alcohol or other drug abuse (AODA) treatment program.
- You are getting or have applied for unemployment insurance.
- You are enrolled at least half-time in a recognized school, training program, or institution of higher learning.
- You are physically or mentally unable to work.
- You are taking part in certain work programs.

If you meet one of the exemptions listed above, you should contact your agency at the number listed at the top of page 1 of this letter to report the exemption and find out what kind of proof may be needed.

If you have a good cause reason for the loss of job or hours, there may be no loss of FoodShare benefits.

Questions

If you have questions about this letter, contact your agency at the number listed at the top of page 1 of this letter.