Date

Title Firstname

Lastname

Any Street

City, State Zip

Dear Title Lastname:

We haven’t seen you recently at Workforce Solutions. Our records show that you are currently not looking for work or participating with us as you agreed to do in your Family Employment Plan.

Please come see us or call me by MONTH, DAY, YEAR at the location and telephone number listed below. If there is a reason you were unable to meet the requirements of your Family Employment Plan, you must come see or call me to explain.

We will help you look for and find a job. When you’ve gone to work, we will help you keep working. We urge you to come in and see us now. This is the only notice we will send to you about your participation with us.

If you cannot give us proof that you have met your cooperation requirements, we will notify the Texas Health and Human Services Commission to terminate your cash grant and Medicaid benefits, and you will have to reapply for this assistance. We will stop Workforce Solutions financial aid—including payments for child care expenses. Enclosed is a description of the process.

Should your benefits be stopped, you have the right to appeal. You may contact the nearest HHSC local office and ask how to appeal a suspension of benefits.

Sincerely,

Career Office Staff

Local Office name, address, city, TX

Phone #

**If You Receive Public Assistance**

**Let Workforce Solutions Help You Get A Job!**

At Workforce Solutions, we’re committed to helping you get a job, keep a job, or get a better job. Our placement counselors and personal service representatives want to help you and your family so that you can go to work.

In Texas, to receive public assistance such as Temporary Assistance to Needy Families cash payments and Medicaid benefits, you must agree to specific actions listed in the personal responsibility agreement you sign when you apply. If the state determines that you are eligible to get a job and go to work, you must come and see us at Workforce Solutions.

When you come to see us, we look at your school and work experience and your family circumstances. We help you look for work and make referrals for you to specific jobs suited to your background. We can also help you with our own financial aid for work-related expenses, child care, and, where possible, further education.

Your Family Employment Plan requires that you:

* Look for work
* Participate in the activities we’ve set up for you
* Accept job referrals we make for you
* Accept a reasonable job offer that an employer makes to you
* Keep in touch with us on a regular basis

If you do not follow the requirements of your Family Employment Plan—or cannot show us there is good reason you did not follow your plan—we will notify the state Department of Human Services. HHSC will suspend your cash payments and Medicaid benefits for at least a month.

We do offer you the opportunity to come back and see us. If you come back and begin working with us as we ask, HHSC will reinstate your cash payments and Medicaid benefits.

If you do not come back or contact us, HHSC will terminate your benefits completely. You will have to visit a local HHSC office and reapply for public assistance. After you have reapplied, you will have to come back to Workforce Solutions and demonstrate your commitment to work with us for at least 30 days before HHSC will reinstate your benefits.

Help us to help you and your family! Remember to:

* Keep in touch with us on regular basis
* Work with us to get a job

As always, please call your Workforce Solutions office if you have questions!

