APPOINTMENT LETTER/REQUEST FOR CONTACT

<u>PURPOSE:</u> To provide notification to the applicant of an appointment for a home, telephone, or office visit. To be used for application/reinvestigation/recertification interviews for Income Maintenance and/or food stamp determinations. This form is also used when contact is needed to discuss other topics such as, but not limited to, a fleeing felon, etc.

NUMBER OF COPIES AND DISPOSITION: Make two copies. Mail the original to the applicant one week before the date set for the interview. File a copy in the case record. The copy may be destroyed after the case action is taken.

<u>INSTRUCTIONS FOR COMPLETION:</u> The form can be typed, handwritten in ink, or the electronic version may be used.

MANUAL REFERENCE: TA 0200.000.00 - 0295.025.00 FS 1100.000.00 - 1150.015.05

FROM:

CASEWORKER: Enter the name of the caseworker.

TELEPHONE NUMBER: Enter the telephone number of the county office.

DATE: Enter the date this form is completed and mailed.

COUNTY OFFICE ADDRESS, CITY, STATE, AND ZIP CODE: Enter the county office name and address or use a county label.

TO:

NAME: Enter the applicant's name.

ADDRESS, CITY, STATE, AND ZIP CODE: Enter the applicant's complete mailing address.

RE:

CASE NAME: Enter the case name.

<u>CASE NUMBER:</u> Enter the case Departmental Client Number (DCN) for the individual.

BODY OF THE LETTER:

Enter a check (\checkmark) mark if the applicant is asked to call the county office and enter the phone number, time and date the individual is being asked to make contact.

Enter a check (\checkmark) mark if a request is being made to meet an applicant.

ADDRESS: Enter the address where the applicant is to meet the caseworker/case manager.

<u>DAY OF THE WEEK AND TIME:</u> Enter the day of the week of the planned interview.

MONTH/DAY/YEAR: Enter the month, day and year of the planned interview.

TIME: Enter the time of the planned interview.

Enter a check (\checkmark) mark if the applicant is asked to call the caseworker/case manager within 10 days of the letter. Enter the phone number for the caseworker/case manager.

REASON FOR CONTACT: Enter the reason for the contact with the applicant.

<u>CASEWORKER/CASE MANAGER'S SIGNATURE AND LOAD NUMBER:</u> The caseworker/case manager should sign the form and enter his/her load number.

TELEPHONE NUMBER: The caseworker/case manager should enter his/her phone number and time available.

BACK OF FORM: The reverse side of the form is for the caseworker/case manager to indicate the information the individual should have available for the interview. Place a check (\checkmark) in the box mark preceding the information needed by the caseworker/case manager to complete the investigation.