

OKLAHOMA CSFP

NOTICE OF CERTIFICATION OR WAITLIST PLACEMENT

DISTRIBUTION SITE	ADDRESS	SITE CONTACT	PHONE NUMBER

CSFP Distribution Schedule: _____

Applicant Name: _____

Date of Notice: _____

CSFP ELIGIBILITY DETERMINATION

_____ **ACTIVE LIST:** You are eligible to receive CSFP benefits for a period of two years. Please contact the agency listed above for additional information, if needed.

Starting month/year: _____

Ending month/year: _____

_____ **WAITLIST:** You are eligible to receive CSFP benefits, however, we are at maximum caseload and are unable to add new participants at this time. You will be placed on our waitlist and notified when an opening becomes available. Please contact the agency listed above for additional information, and to report any phone number changes so they can reach you.

“No-Show” Policy: If you or your proxy does not pick up your food box by the of the end of distribution time listed above, your box will be given to someone on the waiting list for that month. If you or your proxy does not pick up your CSFP box for two consecutive months, you will be removed from the program. Please contact the distribution site if you know you will not be able to pick up your food package.

CSFP Rights and Obligations:

- The local agency will provide written notification of a decision to deny or terminate CSFP benefits, and of an individual's right to appeal this decision by requesting a fair hearing.
- Nutrition education materials will be made available to all participants. The local agency will provide information on other nutrition, health, or assistance programs, and make referrals as appropriate.
- Improper receipt of CSFP benefit as a result of dual participation (receiving more than one CSFP food box per month per individual) or other program violations may lead to a claim against the individual to recover the value of the benefits and may lead to disqualification from CSFP.
- Participants must report changes in household income or composition within 10 days after the change becomes known to the household.
- The applicant understands the food packages provided by CSFP are only intended for the participant's consumption. The applicant understands that selling or exchanging CSFP food items for non-food items could result in discontinuation from the program.
- If a participant fails to pick up/obtain the CSFP food packages for two consecutive months without notifying the distributing agency of the cause of the absence, the participant will be discontinued from the program.
- The applicant consents to the release of information on the intake form and regarding the individual's participation in the program to CSFP staff, to other CSFP agencies if the individual wishes to transfer to a different distribution site in the state, and to officials with USDA, Oklahoma Human Services, and Regional Food Bank of Oklahoma and the Food Bank of Eastern Oklahoma.
- The applicant acknowledges being advised of the rights and obligations of this program.

Non-Discrimination Statement:

In accordance with federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, this institution is prohibited from discriminating on the basis of race, color, national origin, sex (including gender identity and sexual orientation), disability, age, or reprisal or retaliation for prior civil rights activity.

Program information may be made available in languages other than English. Persons with disabilities who require alternative means of communication to obtain program information (e.g., Braille, large print, audiotape, American Sign Language), should contact the responsible state or local agency that administers the program or USDA's TARGET Center at (202) 720-2600 (voice and TTY) or contact USDA through the Federal Relay Service at (800) 877-8339.

To file a program discrimination complaint, a Complainant should complete a Form AD-3027, USDA Program Discrimination Complaint Form which can be obtained online at: <https://www.usda.gov/sites/default/files/documents/USDA-OASCR%20P-Complaint-Form-0508-0002-508-11-28-17Fax2Mail.pdf>, from any USDA office, by calling (866) 632-9992, or by writing a letter addressed to USDA. The letter must contain the complainant's name, address, telephone number, and a written description of the alleged discriminatory action in sufficient detail to inform the Assistant Secretary for Civil Rights (ASCR) about the nature and date of an alleged civil rights violation. The completed AD-3027 form or letter must be submitted 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; or

2. fax:

(833) 256-1665 or (202) 690-7442; or

3. email:

program.intake@usda.gov

This institution is an equal opportunity provider.