

Participant's Name _____

Notification of Family Violence Option

Family violence is defined a verbal, sexual, emotional, psychological and/or physical abuse between or among family members or intimate partners. You may be a victim of abuse if someone is:

- Keeping you isolated
- Making you feel like a prisoner
- Threatening or scaring you
- Taking control over your life
- Shaming or belittling you
- Forcing you into sexual acts
- Hitting, slapping, kicking, choking or in any way hurting you physically

Any disclosure of family abuse is voluntary.

The purpose of this notice is to inform you about possible abuse and let you know there is community support to help you with this situation. If you decide not to tell me today, you can change your mind at any time, and tell me or someone else.

Disclosure of family abuse is confidential.

However, as required by law, if there is evidence of children being abused, a report will be made to a child protective services agency.

Work First Participants

Work First provides participants with employment assistance, child care, transportation and, if necessary cash assistance. In order to receive cash assistance Work First Program participants subject to the work requirement are required, among other things, to go to work or participate in work activities.

If working, looking for a job, or going to school or job training may put you or your family in danger of physical, emotional, or sexual abuse, you may be eligible for a temporary waiver of one or more Work First requirements after further assessment and development of a safety plan.

I have read and understand the above _____ Date _____
Work First Participant

I have explained the above information _____ Date _____
Worker

Would you like to speak to someone further about abuse in the family? __Yes __No

Distribution:
Original in case file
Copy to participant