

Senior Farmers Market Nutrition Program Participant Rights & Responsibilities

The Senior Farmers Market Nutrition Program (SFMNP) provides fresh fruit and vegetables to lower-income seniors with the goal of improving their health and nutritional status. It also supports local farming by increasing the use of farmers markets and roadside stands. It is funded in part by USDA federal funding.

Your Rights

As an applicant/participant of SFMNP you have the right:

- to be treated with dignity, respect and without discrimination;
- to be notified in writing within 15 days of application if you are not determined eligible;
- to appeal an ineligibility decision if you feel that determination was made in error;
- to have information you provided kept private unless you request for it to be shared;
- to make a complaint if you feel you have not been treated fairly;
- to have clear directions of how and where to use the benefits you receive;
- to learn about other services that may be available to you. You may contact Senior Information & Assistance if you wish to find out about other services for seniors in your area.

Your Responsibilities

As an applicant/participant of SFMNP you have the responsibility:

- to give correct information to the best of your knowledge to determine eligibility;
- to understand that giving false information and/or intentionally concealing facts could result in your paying back benefits or legal action;
- to understand that attempting to collect benefits more than once or at multiple distribution sites during a season will result in termination from the program;
- to consume the fresh produce obtained through this program yourself;
- to safeguard the benefits you receive. Please report if they are lost or stolen to the agency who issued your benefits; lost or stolen benefit cards may be replaced by the issuing agency;
- to redeem your benefits with an Authorized Farmer between June 1 and October 31;
- to understand that funding is limited for this program and it is served on a first come, first served basis until funding runs out.

I have been advised of my rights and obligations under the SFMNP. I certify that the information I have provided for my eligibility determination is correct, to the best of my knowledge. This certification form is being submitted in connection with the receipt of Federal assistance. Program officials may verify information on this form. I understand that intentionally making a false or misleading statement or intentionally misrepresenting, concealing, or withholding facts may result in paying the State agency, in cash, the value of the food benefits improperly issued to me and may subject me to civil or criminal prosecution under State and Federal law.

Standards for eligibility and participation in the SFMNP are the same for everyone, regardless of race, color, national origin, age, disability, or sex

I understand that I may appeal any decision made by the local agency regarding my eligibility for the SFMNP.

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, audiotope, 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/ad-3027.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.

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