

**Notice of Termination**

\_\_\_\_\_  
Client Name

\_\_\_\_\_  
Date Notice Issued

You are being terminated from your shelter or supportive housing stay at:

\_\_\_\_\_  
Shelter or Housing Name and Address

Your termination will be effective at 5:00 p.m. on \_\_\_\_\_  
(This date must be *at least* 15 calendar days from the date of this notice.)

This action is being taken pursuant to **Section 22(2) of the Homeless Services Reform Act of 2005** (D.C. Law 16-0035, effective October 22, 2005), **for the following reason(s):**

- \_\_\_\_\_ Possessing a weapon on provider's premises. D.C. Code 4-754.36(a)(2)(A)
- \_\_\_\_\_ Possessing or selling illegal drugs on provider's premises. D.C. Code 4-754.36 (a)(2)(B)
- \_\_\_\_\_ Assaulting or battering any person on the provider's premises. D.C. Code 4-754.36(a)(2)(C)
- \_\_\_\_\_ Endangering your own safety or the safety of others on the provider's premises. D.C. Code 4-754.36 (a)(2)(D)
- \_\_\_\_\_ Intentionally or maliciously vandalizing, destroying, or stealing the property of any person on provider's premises. D.C. Code 4-754.36 (a)(2)(E)
- \_\_\_\_\_ Failing to accept offer of appropriate permanent housing or supportive housing after two offers. D.C. Code 4-754.36 (a)(2)(F)
- \_\_\_\_\_ Knowingly engaging in repeated violations of the following provider Program Rule(s). D.C. Code 4-754.36 (a)(2)(G):  
\_\_\_\_\_  
\_\_\_\_\_

Specifically, the factual basis for this action (including dates) is:  
\_\_\_\_\_  
\_\_\_\_\_

(If you need additional space please attach a separate sheet)

**You Have the Right to Appeal Our Termination Decision**

*If you disagree with this decision, you have the right to appeal it through an Administrative Review and a Fair Hearing. This process is described on the back or is attached. This termination decision and your appeal rights will be explained to you by the person listed below.*

**A Copy of This Notice of Termination was provided to the client, by:**

\_\_\_ Hand delivery or \_\_\_ First Class Mail to \_\_\_\_\_  
Date

\_\_\_\_\_  
Provider's Program Director Signature and Title Date

**By signing this, I am admitting only that I received a copy of this Notice.**

\_\_\_\_\_  
Client Signature Date

\_\_\_\_\_  
Witness Name (printed) and Signature (If Client Refused to Sign) Date

## **Your Right to Appeal Your Shelter or Supportive Housing Termination**

If you disagree with our decision to terminate your shelter or supportive housing, you can appeal through a Fair Hearing. Before the Fair Hearing, you have a right to an Administrative Review. The Administrative Review is optional and less formal than a Fair Hearing. If you want, you can choose to have both.

### **To Request a “Fair Hearing”, you need to:**

- Call the Office of Administrative Hearings, at 202-442-9094 *or* send in your request in writing to the Office of Administrative Hearings, 441 4<sup>th</sup> Street, N.W., Suite 450 North, Washington, D.C. 20001; **OR**
- Tell a staff member where you reside that you want a Fair Hearing. By law, he or she must help you make your request; **OR**
- Call the Family Services Administration, at 202-698-4170, or send in your request in writing to the Family Services Administration, 64 New York Avenue, N.E., Washington, D.C. 20002.

### **To Receive an “Administrative Review”:**

- You do not need to file a separate request for an Administrative Review. Once you request a Fair Hearing, you will automatically be offered an opportunity for an Administrative Review by the Family Services Administration.
- A notice will be sent to you notifying you of the time, date, and place for the Administrative Review.
- If you do not appear at the Administrative Review, you will still have a Fair Hearing. The Office of Administrative Hearings will send you a notice telling you the time, date and place for the Fair Hearing.

### **In Some Cases, you have the right to stay in shelter while you appeal:**

- To keep your shelter while you appeal, you must ask for an appeal before the date your shelter will terminate. (By law, you must be given 15 days notice before termination.)
- If you have already left shelter, you have the right to appeal within 90 days from the date of the written notice of the termination. If you win, we will place you back into the program you were in or a similar one.

### **At Your Fair Hearing or Administrative Review:**

- You have the right to be represented by a lawyer (see below), relative, or any other person of your choice who is not an employee of the D.C. Government and to bring witnesses or evidence that helps your case.

### **Free legal representation may be available from:**

- *The Washington Legal Clinic for the Homeless at (202) 328-5500*
- *Legal Aid Society of the District of Columbia at (202) 628-1161*
- *Bread for the City at (202) 265-2400 OR (202) 561-8587*

### **Discrimination claims:**

- If you think you have been discriminated against because of your race, religion, color, sex, national origin, disability, personal appearance, age, marital status, sexual orientation or another basis, you may call the D.C. Office of Human Rights at 727-4557 within 365 days of the act.

**DO NOT MODIFY THIS NOTICE**

Official document developed in accordance with the Homeless Services Reform Act of 2005 (2/27/15)