NORTH CAROLINA

My Rights and Responsibilities

I understand that:

1. Standards for eligibility and participation in the WIC Program are the same for everyone, regardless of race, color, national origin, sex (including gender identity and sexual orientation), disability, age, or reprisal or retaliation for prior civil rights activity.
2. I have applied to receive WIC benefits from the Federal Government. Program officials may check the truth of the information I have provided. I certify that the information I have provided to decide my eligibility is correct.
3. The local agency will decide whether I may receive WIC benefits. To appeal the decision, I must ask for a fair hearing no more than 60 days after the local agency tells me the decision.
4. The local agency will offer me health services and nutrition education and will encourage me to participate in these services.
5. Lying and hiding or withholding facts may mean that I will have to repay, in cash, the State Agency for the value of foods that I should not have received. I may be charged with breaking state and federal law. I certify that I do not receive benefits from another WIC clinic.
6. The WIC program may give information to other public organizations designated by the state health officer to enhance the health, education, or well-being of WIC applicants and participants. I understand that the organizations may contact me, but they may not give my information to anyone else without asking my permission.
7. Exchanging the NC eWIC card, WIC foods and/or formula, for cash, credit, non-food items, or non-WIC food, is a violation subject to federal and state sanctions.
8. The local agency may routinely ask me about my plans to move out of state. I am aware that I may obtain free of charge the Out of State Transfer lnformation Sheet that serves as Verification of Certification. This document contains key family information in an effort to minimize disruption in my WIC services when transferring out of state.

Nondiscrimination 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/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

This institution is an equal opportunity provider.

North Carolina Department of Health and Human Services
Division of Child and Family Well-Being • Community Nutrition Services Section
https://www.ncdhhs.gov/ncwic
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