

## Agreement for Telephone Hearing

Complete this form before your Intentional Program Violation (IPV) hearing and return it to your local Department of Human Services (DHS) office.

If you have questions about this form, call the DHS Appeals Section at (515) 281-8774.

### Your Section

Read, sign, and date the statement below:

I understand that I have the right to:

- Have an in-person hearing, but I agree to a telephone hearing instead
- Present my case
- Bring a lawyer
- Look at the evidence
- Ask questions to anyone at the hearing
- Turn in evidence

Signature

Date

### Witness's Section

I witnessed the person above read, sign, and date this statement.

Witness's signature

Date

### Worker's Section

Please fill in the boxes below and return this form to the Department of Inspections and Appeals Division of Administrative Hearings.

IPV Number

Case Number