

**Keweenaw Bay Indian Community (KBIC)
Office of Violence against Women (OVW)
Program for Housing Assistance and Safety Emergencies (PHASE)**

Appeal Packet

The process to appeal a PHASE application denial is provided below. The Appeal Form and a Release of Information Form to the Women's Advisory Board are attached.

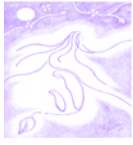
PHASE Appeal Process

If a PHASE applicant believes he or she has been denied a PHASE request without good cause or based on erroneous information, the applicant may appeal the decision. Appeals will be heard by a minimum of three members of the KBIC Women's Advisory Board who are not related to the applicant and/or do not work within the OVW Programs & Services or VOCA. Members of the Women's Advisory Board are also bound by confidentiality and each member has signed the KBIC OVW Confidentiality form.

Participation in the OVW program is confidential, and a participant's information is not disclosed to the Women's Advisory Board without the participant's written consent. To proceed with an appeal to a PHASE denial, the applicant must sign a Release of Information to allow the OVW staff to address the appeal with the Women's Advisory Board.

Steps to the appeal process are presented as follows:

1. Applicant may file an appeal to a PHASE denial within 10 business days from receiving the denial.
2. The applicant can request the Appeal Form from any OVW staff member. The form will have an OVW Release of Information attached. This release will allow OVW administration to release the application to the Board and to discuss only the reasons for the denial of the PHASE application. Other issues or concerns that have arisen during any intervention that are not pertinent to the denial for PHASE services cannot be discussed. The applicant may sign and leave the release with the OVW upon receipt of the appeal form or return the release when returning the appeal form.
3. The applicant may turn in the appeal request to the OVW Team Lead or designee. The appeal can be hand delivered or mailed to: Keweenaw Bay Indian Community Office of Violence against Women, Team Lead or Designee, 16429 Beartown Rd., Baraga, MI. 49908. If the applicant did not previously turn in a Release of Information, he or she can return the Release of Information with the appeal form. Please note: If applicant does not fill out a Release of Information to allow OVW staff to address the appeal, the Advisory Board will be unable to proceed with the appeal.
4. The Team Lead or designee will schedule an appeal meeting within five days and will ensure all pertinent parties are available. The applicant may address the Women's Advisory Board in person at the appeal meeting.
5. The decision of the Women's Advisory Board is final.



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Appeal Form

Name of Applicant: _____ Date Appeal Submitted: ____/____/____

Date of Original Application: ____/____/____ PHASE service requested: _____

Reason given for denial:

- ____ Applicant is not a member of a federally recognized tribe or descendant of KBIC.
- ____ Requested service did not result from domestic or dating violence, sexual assault, or stalking.
- ____ False information was given on application or at interview.
- ____ Applicant is requesting a service for which he/she already received PHASE funding.
- ____ In the case of a housing/vehicle request, applicant will not be able to sustain on current budget.
- ____ In the case of a vehicle request, applicant not able to legally drive and/or maintain the vehicle.

Please state why the above decision was made without "good cause" or was based on erroneous or faulty information: _____

What is the best way to reach you to set up an appeal meeting (note any safety concerns):

Signature: _____ Date: ____/____/____



**Niimigimiwang
OVW Programs and Services**

755 Michigan Ave.

Mailing Address: 16429 Beartown Rd.

Baraga, MI 49908

Phone: 906.353.4598 Fax: 906.353.HELP (4357)



I, _____ hereby authorize the disclosure of information from my record by:

The Keweenaw Bay Indian Community Niimigimiwang Office of Violence against Women

to: **The Keweenaw Bay Indian Community Women's Advisory Board**

The purpose or need for this disclosure is:

to hear the above applicant's appeal to denial for Program for Housing Assistance and Safety Emergencies (PHASE) funding.

The information to be released is:

Only information pertaining to the approval/denial process for the applicant's PHASE application.

I understand that this authorization is valid only for the intents and purposes stated above. I have the right to revoke this authorization, in writing, at any time by sending notice to the KBIC OVW. The KBIC OVW can be contacted 24-hours a day at (906) 353-4599. (Note: Information may have already been released, but will cease by the OVW at the time of notification of revocation).

This authorization is valid until: _____.

(Date to allow enough time for the appeals process to be completed.)

SIGNATURE

DATE

WITNESS

DATE