

This form can be used for the Good Cause Recommendation and the Family Violence Exemption.

Client Name	Case Name (if different)	Case Number
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To be completed by the domestic violence specialist

TO: _____, Texas Works Advisor
_____, Texas Works Supervisor

On _____, I interviewed the above named person regarding
(date)

domestic violence as a barrier to cooperating with collecting child support or proving other information. Based on the information provided and my experience in the field of family violence, I

recommend HHSC grant a good cause waiver and the family violence exemption .

do not recommend HHSC grant a good cause waiver or the family violence exemption because

_____.

Signature Printed Name Telephone No.