

Texas Workforce Commission

A Member of Texas Workforce Solutions

Joe Esparza, Chairman
Commissioner Representing
Employers

Alberto Treviño III
Commissioner Representing
Labor

Brent Connett
Commissioner Representing
the Public

Randy Townsend
Interim Executive Director

Date: _____

Addressee: _____

Street: _____

City, State, ZIP Code: _____

Dear _____

This is to confirm the following appointment:

Appointment for: _____

Purpose of the appointment: _____

Appointment date: _____

Appointment time: _____

Appointment street address: _____

City, State, ZIP Code: _____

Contact person or office: _____

Additional comments: _____

If the following items are available, please bring them to your appointment:

- photo identification (for example, driver's license, state-issued ID, school ID, passport, or military ID) and Social Security card;
- names and addresses of any doctors you have seen recently;
- names and addresses of any schools you have attended;
- information about any medical insurance you have, including Medicaid and Medicare;
- a list of places you have worked - including type of job, dates, reason for leaving and salary;
- proof of income information for you and your spouse or your parents (if they claim you as a dependent on their federal income tax), for example, a copy of last pay stub, SSI/SSDI or VA award letter, workers' compensation Notice of Payment, etc.
- proof of expenses related to monthly mortgage/rental payments, prescribed diets and medicines, debts imposed by court order, medical costs and disability-related expenses;
- names, addresses, and phone numbers of two people who will know how to contact you;
- any reports of recent medical exams, school records, or other information which you feel may help the counselor understand your disability; and

101 E. 15th Street • Austin, Texas 78778-0001 • (512) 463-2222 • twc.texas.gov
Equal Opportunity Employer/Program. Auxiliary aids and services are available upon request to individuals with disabilities.
Relay Texas: 800-735-2989 (TTY) and 711 (Voice).



- your Ticket to Work, if you are a Social Security disability benefits recipient and one has been issued to you.

If you need any special accommodations for this meeting, please make these arrangements with the contact person mentioned above.

Sincerely,

Senders first and last name

Sender's title:
