

## ASSEMBLY STANDING COMMITTEE ON VETERANS' AFFAIRS

## NOTICE OF PUBLIC HEARING

- <u>SUBJECT</u>: Budget and programs for veterans related to monies in support of veteran-toveteran programs.
- <u>PURPOSE</u>: To review the budget and programs for veterans under the jurisdiction of the Assembly Standing Committee on Veterans' Affairs

## ALBANY, NEW YORK

WEDNESDAY December 6, 2017 11:00 AM Roosevelt Hearing Room C Legislative Office Building

In the SFY 2017-18 enacted budget, the Division of Veterans' Affairs was allocated \$1 million for services and expenses for veteran-to-veteran support services. Peer-to-peer support services provide peer-to-peer counseling between veterans who personally suffer from mental health conditions to share their knowledge and experiences with other veterans in achieving recovery goals. Veteran-to-veteran support services provide assistance to veterans through programs maintained by veterans service organizations, and connect veteran defendants to treatment and support services directed by the criminal justice system. This hearing will review these programs.

Persons wishing to present pertinent testimony to the Committee at the above hearing should complete and return the enclosed reply form as soon as possible. It is important that the reply form be fully completed and returned so that persons may be notified in the event of emergency postponement or cancellation.

Oral testimony will be limited to 10 minutes' duration. In preparing the order of witnesses, the Committee will attempt to accommodate individual requests to speak at particular times in view of special circumstances. These requests should be made on the attached reply form or communicated to Committee staff as early as possible.

Ten copies of any prepared testimony should be submitted at the hearing registration desk. The Committee would appreciate advance receipt of prepared statements.

In order to further publicize these hearings, please inform interested parties and organizations of the Committee's interest in hearing testimony from all sources.

In order to meet the needs of those who may have a disability, the Assembly, in accordance with its policy of non-discrimination on the basis of disability, as well as the 1990 Americans with Disabilities Act (ADA), has made its facilities and services available to all individuals with disabilities. For individuals with disabilities, accommodations will be provided, upon reasonable request, to afford such individuals access and admission to Assembly facilities and activities.

Michael G. DenDekker

Member of Assembly Chairman Committee on Veterans' Affairs

|       | PUBLIC HEARING REPLY FORM  |
|-------|--|
|       | ns wishing to present testimony at the public hearing on veteran-to-veteran programs are sted to complete this reply form as soon as possible and mail, email or fax it to:  |
|       | Teneesha Young<br>Committee Assistant<br>Assembly Committee on Veterans' Affairs<br>Room 513 - State Capitol<br>Albany, New York 12248<br>Email: youngt@nyassembly.gov<br>Phone: (518) 455-4355<br>Fax: (518) 455-7250 |
|       | I plan to attend the following public hearing on veteran-to-veteran programs to be conducted by the Assembly Committee on Veterans' Affairs on Wednesday, December 6, 2017.  |
|       | I plan to make a public statement at the hearing. My statement will be limited to 10 of minutes, and I will answer any questions which may arise. I will provide 10 copies of my prepared statement.                   |
|       | I will address my remarks to the following subjects:   |
|       |  |
|       | I do not plan to attend the above hearing.   |
|       | I would like to be added to the Committee mailing list for notices and reports.  |
|       | I would like to be removed from the Committee mailing list.  |
|       | I will require assistance and/or handicapped accessibility information. <b>Please specify</b> the type of assistance required:   |
| NAME  | E:   |
| TITLE | ::   |
| ORG   | ANIZATION:   |
| ADDR  | RESS:  |
|       | IL:  |
|       | PHONE:   |
|       | TELEPHONE:   |