SOUTHEAST KANSAS RESPITE SERVICES, INC.
PO Box 936, PARSONS, KS 67357
1-800-362-0390 OR 620-421-6550 EXT. 1642 OR EXT. 1899

Application for Personal Care Services

Information (for person to be served)

____
Name

____
Street/Mailing Address City State Zip

____
Gender Birth Date Age

Family/ Caregiver Information

____
Name

____
Daytime Phone Cell Phone Evening Phone

Case Manager______________________________
Name Phone

Community Service Provider______________________________

Emergency Contact

____
Name Phone Relationship

Special Care Requirements

Disability/Special Needs ______________________________

____

____

Special Physical Considerations ______________________________

____

____

PLAN OF CARE: YES_____ NO______

____

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Release of Information Consent

SUPPORTIVE HOME CARE

I ______________________________________ as an individual, or

I ____ as Parent/Guardian/Spouse (please circle one)

do hereby authorize Southeast Kansas Respite Services, Inc. (SEKRS), and/or the attending SEKRS Provider to share necessary information with and receive necessary information from the following agencies (please check the box next to each relevant agency):

- ☐ Hospice (name): ____
- ☐ DCF (Department for Children and Families)
- ☐ Area Agency on Aging
- ☐ School (list name): ____
- ☐ Community Service Provider (list name): ____________________________
- ☐ Hospital (list name): ____
- ☐ Mental Health Center (name):______________________________________
- ☐ Community Developmental Disability Organization (name): ______________________________

Other (please list): ____

____

Check one box below:

- ☐ I authorize information to be shared indefinitely.
- ☐ I authorize information to be shared between the dates of ______________ and ______________.

______________________________ ______________________
Individual Signature Date

______________________________ ______________________
Parent/Guardian Signature Date

______________________________ ______________________
Witness Signature Date

(Send forms via U.S. Mail. Do not email.)