

Disability Planning Organization of Kansas, Inc.
119 W. Iron, 4th Floor, P.O. BOX 1067
Salina, Ks 67402-1067
(785) 823-3173 Toll Free 866-886-3765 Fax (785) 823-3299

NOTICE OF CONSUMER STATUS UPDATE

DATE: _____

TO: DPOK, Inc.

FROM: (Name & Organization) _____

CDDO: _____



Current Information

INDIVIDUAL SERVED: _____

ADDRESS: _____

SS#: _____

CASE MANAGER: _____



Changes To Be Made
(PLEASE BE PRECISE)

1. _____

2. _____

3. _____

4. _____

5. _____

6. _____

7. _____

8. _____

Reminders

- Information page: Does address change affect living status, county of residence or guardian address?
- Attach additional documentation if necessary (ie., guardianship papers)

For office use only:

CDDO DIRECTOR	_____
ASSESSMENT SPECIALIST	_____
ASSESSMENT SPECIALIST	_____
ASSESSMENT SPECIALIST	_____
QUALITY ASSURANCE SPECIALIST	_____
ADMIN. SUPPORT SPECIALIST	_____
DATA MANAGEMENT SPECIALIST	_____