



No DRIVING CONFIRMATION

Print Employee's Name

Print Member's Name

Instructions: Complete this form ONLY if the employee will NOT be providing driving-related services. If driving-related services will be provided by the employee, complete the Driving Confirmation form and provide the required attachments. Please only submit one of these two forms, depending on your situation.

Driving-related services include the following:

- Community Integration
- Medical Escort
- Socialization
- Shopping

Acknowledgement

The member and employee hereby agree that the employee will not provide driving-related services at any time while providing program services. The member and employee also agree to contact Consumer Direct Care Network if there is any change in driving status.

Employee Signature

Date

Member/PR Signature

Date

