



8200 Georgia Street  
Merrillville, IN 46410  
(219) 791-1400 Office  
(219) 791-1422 Fax

### Day Services Confirmation of Services

#### Client Information

New Client  Existing Day Services Client Date of Intake: \_\_\_\_\_  
 Change of Information 4-Digit Code: \_\_\_\_\_

Annual Update (no changes)  Existing Client Change of Information (Other Services) Date Budget Submitted: \_\_\_\_\_

Client Name: \_\_\_\_\_

Anticipated Start Date: \_\_\_\_\_

Room Assignment/Schedule: \_\_\_\_\_

#### Services Requested:

Facility Habilitation Ratio: \_\_\_\_\_  Community Habilitation Ratio: \_\_\_\_\_  Innovations Transportation  
Ratio: \_\_\_\_\_  SLCCS Transportation

Employee Signature \_\_\_\_\_ Date \_\_\_\_\_

#### Innovations in Learning Billing Department Use Only

Requested Services Approved

Notice of Action Decision Date: \_\_\_\_\_

#### Date of Service:

Facility Hab From: \_\_\_\_\_ To: \_\_\_\_\_ Ratio: \_\_\_\_\_  
From: \_\_\_\_\_ To: \_\_\_\_\_ Ratio: \_\_\_\_\_

Community Hab From: \_\_\_\_\_ To: \_\_\_\_\_ Ratio: \_\_\_\_\_

Transportation From: \_\_\_\_\_ To: \_\_\_\_\_

Notes:

Manager or Billing Specialist Signature \_\_\_\_\_ Date \_\_\_\_\_

**TRANSPORTATION SERVICES**  
**With Innovations in Learning**

Today's Date: \_\_\_\_\_

<input type="checkbox"/> New Client	<input type="checkbox"/> Change of Services	<input type="checkbox"/> Termination of Services
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Client Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Guardian/Caregiver Name: \_\_\_\_\_

High Risk Concerns: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Emergency Contact:**

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Phone: \_\_\_\_\_

**Days of Service:** \_\_\_\_\_ **Start Date:** \_\_\_\_\_

Days	Monday	Tuesday	Wednesday	Thursday	Friday
Drop-Off time					
Pick-up time					

Morning Pick-Up Location: \_\_\_\_\_

Afternoon Drop-off Location: \_\_\_\_\_

Additional Notes: \_\_\_\_\_

\_\_\_\_\_

**Please send invoice to Innovations in Learning. Thank you!**

Stacey Shrewsbury  
Program Supervisor