Checklist of Clients Rights to Money Follows the Person Services

Read each sentence and initial all that apply

Client Signature	Date
I have initialed each area above in which an expl representative. My signature below is verification provided to me.	*
• I received information regarding my rights to protection from abuse/neglect and/or exploitation.	
I was given the option either to self direct	t my care or have agency directed care.
 The DDS Intake Specialist explained and providers based on the availability of pro 	.
 My Intense Transition Manager explained based on availability, accessibility and af 	d my right to select my choice of housing fordability.