

Self-Hired Staff Information

Self-Directed Participant Name: _____

Self-Hired Staff Name: _____

Department (Circle One): Self-Hired Community Habilitation Respite Both

Wage: _____

How many hours will Self-Hired Staff work per week (Approx.)? _____

Self-Hired Staff Schedule:

Sunday	
Monday	
Tuesday	
Wednesday	
Thursday	
Friday	
Saturday	

Is the above Self-Hired Staff transporting the Self-Directed Participant in their vehicle?
(Circle One) Yes No

Participant/Designee Signature: _____

Date: _____

Self-Hired Staff Liaison Signature: _____

Date: _____