

Lawrence County Comfort Canines - Facility Request Form

Complete and check all parts of this form that apply to the site or agency where volunteers will visit. This information will assist in recruiting therapy dog teams for your AAI visits.

Contact Name:	Title:
Name of Facility:	Dept:
Address:	City/State/Zip:
Telephone:	Fax:
Website:	Email:

CHECK ALL CATEGORIES THAT MOST ACCURATELY DESCRIBE YOUR FACILITY:

TYPE OF FACILITY:

<input type="radio"/> ASSISTED-LIVING/ INTERMEDIATE CARE	<input type="radio"/> PSYCHIATRIC FACILITY
<input type="radio"/> CORRECTIONS	<input type="radio"/> REHABILITATION
<input type="radio"/> DAY TREATMENT	<input type="radio"/> RESIDENTIAL CARE
<input type="radio"/> GROUP RESIDENCE	<input type="radio"/> SCHOOL
<input type="radio"/> HOSPICE	<input type="radio"/> SHELTER
<input type="radio"/> HOSPITAL	<input type="radio"/> OTHER: _____

DESCRIPTION OF POPULATION:

<input type="radio"/> ABUSE SURVIVOR	<input type="radio"/> MEMORY IMPAIRMENTS
<input type="radio"/> DEVELOPMENTAL DISABILITIES	<input type="radio"/> COMA
<input type="radio"/> EMOTIONAL DISABILITIES	<input type="radio"/> HOMELESS
<input type="radio"/> MULTIPLE DISABILITIES	<input type="radio"/> MENTAL ILLNESS
<input type="radio"/> PHYSICAL DISABILITIES	<input type="radio"/> NEUROLOGICAL DISORDERS
<input type="radio"/> TERMINAL ILLNESS	<input type="radio"/> OTHER: _____

<p>AGES SERVED:</p> <input type="radio"/> INFANTS & NURSERY AGE <input type="radio"/> SCHOOL AGE <input type="radio"/> ADOLESCENTS <input type="radio"/> YOUNG ADULTS <input type="radio"/> ADULTS <input type="radio"/> SENIORS	<p>GROUP SIZE FOR INTERVENTIONS:</p> <input type="radio"/> ONE-ON-ONE <input type="radio"/> SMALL GROUP (1-5 PEOPLE) <input type="radio"/> MEDIUM GROUP (5-15 PEOPLE) <input type="radio"/> LARGE GROUP (15+ PEOPLE)	<p>SUPERVISION-FACILITY STAFF WILL:</p> <input type="radio"/> PARTICIPATE <input type="radio"/> DIRECT <input type="radio"/> DOCUMENT <input type="radio"/> OBSERVE	<p>FACILITY DYNAMICS:</p> <input type="radio"/> QUIET – low activity, few distractions, routinely predictable interactions <input type="radio"/> AVERAGE – moderate activity, moderate distractions, occasionally unpredictable interactions <input type="radio"/> ACTIVE – high activity. Many distractions, routinely unpredictable interactions
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PARTICIPATION

a) Who will receive visits?

b) Who will not receive visits?

c) How will clients be identified?

d) Where will visits be conducted?

e) Will animals be allowed on beds or furniture?

Any other information you would like us to consider:

Please email completed form to Tammi Gibson at lccc@humanservicescenter.net