Pine
Habilitation
And
Supported
Employment, Inc.

Admissions Letter

PHASE
PO Box 126
Sandstone, MN 55072

Date:_____

Dear _____,

The purpose of this letter is to inform you of the information required in our Admissions Policy to initiate services at PHASE for your referral, _____. Please ensure that all requested information is mailed to the PO Box 126, Sandstone, MN 55072 address or faxed to 320-245-0431. The following information is required:

- Current Coordinated Services and Support Plan stating the need for the expected outcomes of the specific training and habilitation services to be provided
- Current medical physical (within 30-days prior to admission) The PHASE form is enclosed.
- Current Individual Abuse Prevention Plan, if available.
- Copy of individual's current immunization record
- Copy of psychological reports

The above information is needed prior to conducting an admissions meeting. If you have any questions or need any assistance, please contact me at (320) 245-2246 ext. 1230 or by email at lkoski@pinehab.org.

Sincerely,

Lori Koski
Employment Services Director