

SR. WELLNESS VISIT APPLICATION



The “*Sr. Wellness Check*” program is a community service sponsored by the Vacaville Police Department and staffed by Volunteers In Police Service (V.I.P.S.). The volunteers make residential visits/calls Monday-Friday. Information listed on this form is confidential (to the extent permitted under California Gov’t Code § 6255).

One stipulation to being a part of this program is that when the applicant will not be home, a call is left on office voice mail (707) 454-5745, by 9:00 a.m.

PLEASE PRINT CLEARLY AND COMPLETE ALL INFORMATION

Date: _____ Signature of Applicant: _____

Resident Information:

Name: _____	Phone: _____
Additional Residents: _____	
Address: _____	

Check Type of Service Desired:

<input type="checkbox"/> Phone Call Only	<input type="checkbox"/> Level 1 Visit	<input type="checkbox"/> Level 2 Visit
If Level 2, location of key: _____		

Days of week applicant will not be home and does not need visits/calls: _____		

-Over-

REQUIRED EMERGENCY CONTACT INFORMATION

First Local Emergency Contact:

Name: _____ Phone: _____
Address: _____
Relationship: _____ Does this person have a key to your residence? _____

Second Local Emergency Contact:

Name: _____ Phone: _____
Address: _____
Relationship: _____ Does this person have a key to your residence? _____

Family Members Living Nearest You (Not listed above):

Name: _____ Phone: _____
Address: _____
Relationship: _____
Name: _____ Phone: _____
Address: _____
Relationship: _____

Additional Information (Recommended but Optional):

Date of Birth: _____ Known medical conditions: _____

Doctor's Name: _____ Phone: _____
Hospital _____
We request that all applicants participate in the Medical Emergency Data System program, "M.E.D.S.", offered by the Vacaville Fire Department. Volunteers will provide a packet.