

Case Manager Name:  
Address:  
Address:  
Phone Number:

Date:

Applicant's Name:  
Address:  
Address:

### **Homemaker Services Waiting List Notice**

Dear

You have recently submitted an application for the Choices for Care, Moderate Needs program. **Due to a lack of funding at this time for homemaker services, your name is being placed on a waiting list. You will be contacted when funding is available.**

Please contact me if you have any questions.

Sincerely,

Case Manager