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|  | * **It is essential that this form be submitted to DBHDS when any change occurs** in an individual’s status. Failure to submit changes affects the ability to properly plan for and assign slots to those on the waiting list.
* To be completed when **any change occurs** to include: **address, transfer of CSB, new avatar number, death or when assignment of a private guardian or alternative to public guardianship occurs.**
* This form should be completed by the CSB Agency Representative, Training Center Community Integration Manager or Public Guardianship Representative.
* **Please save in Word Format and forward to:**

Public.Guardianship@DBHDS.virginia.gov* Please send securely.
 |
| **Date of Change** | Click here to enter a date |
| **Referring CSB/Training Center/PGP** | Click here to enter  |
| **Support Coordinator/Case Manager/CIM/PGP Coordinator**  | Click here to enter Support Coordinator/Case Manager/CIM |
| **Phone** | Click here to enter Phone |
| **Email** | Click here to enter Email |
| **Individual** | Click here to enter Individual Name |
| **Date of Birth** | Click here to enter Date of Birth |
| **Gender** | Click here to enter Gender |
| **Race** | Click here to enter Race |
| **Change in Chart/Avatar Number** | Click here to enter old number |
| **New Chart/Avatar Number** | Click here to enter new number |
| **Change in Address** | Click here to enter the old address |
| **New Address** | Click here to enter the new address |
| **Change in CSB**  | Click here to enter the old CSB |
| **New CSB** | Click here to enter the new CSB |
| **Individual Death**  | Click here to enter date of death |
| **Cause of Death** | Click here to enter cause of death |
| **Alternative to Public Guardianship Found** | Click here to enter date of alternative guardian found |
| **Additional Information about the New AR/Guardian or Date Capacity was Restored.** | Click here to provide an explanation/additional information. |
| **Date Alternative to Public Guardianship Found****Other changes:** | Click here to provide an explanation/additional information.Click here to provide an explanation/additional information. |