

Appendix C

AHIP Participant Agreement Form

While participating in the AHIP Program, the client agrees to adhere to the following standards.

1. Be available to all healthcare workers according to an agreed upon DOT schedule
2. Refrain from using alcohol or illegal controlled substances
3. Abstain from being verbally or physically abusive to any healthcare worker
4. Submit sputa and other laboratory specimens, as requested
5. Attend scheduled clinic appointments

While receiving food assistance, the client also agrees to:

1. Spend funds on nutritious food items only
2. Submit all food receipts to the Nurse Case Manager

While receiving motel housing assistance, the client also agrees to:

1. Not have roommates or personal visitors, unless authorized by the NCM or designee.
2. Keep the room clean
3. Abide by the rules and regulations of facility management
4. Refrain from making noise or any behavior that results in complaints to management
5. Refrain from using alcohol or illegal drugs while in AHIP housing

I understand the above expectations and understand that failure to follow them will revoke my participation in AHIP.

Client's Signature

Date

VDH Representative Signature

Date