

Submitting an Assistance Request Form



ONE FORM – ENDLESS CONNECTIONS

The Central Virginia Health District's Community Health Workers monitor this referral form daily. All submissions will receive a response within 2 business days.

By completing the Assistance Request Form, individuals can be connected to a wide range of services, including:



Maternal & Child Health Services

- BabyCare Program
- Car Seat Safety Program
- Safe Infant Sleep Program
- WIC (Women, Infants, Children)

Clinic Services

- Immunizations
- STI Screening & Treatment

Additional Services

- Individual & Family Support (Connection to Community Resources)
- Peer Recovery & Support
- Vital Records Assistance

Two ways to get to fill out the Assistance Request form:

1) Scan the assistance request form QR CODE & submit.

OR

2) Visit CVHD.org under assistance request form & fill out online.

Primary Contacts (Effective April 1, 2026):

For inquiries regarding Car Seat Safety, Safe Infant Sleep, or the BabyCare Program, please contact:

Raven Sullivan

(434) 948-0995

raven.sullivan@vdh.virginia.gov

Please forward calls only if there are specific questions related to these programs, for general application/eligibility information please utilize the assistance request form.

For inquiries regarding how to utilize and complete the assistance request form please contact:

Alex Kaminsky

(434) 473-2037

alexis.kaminsky@vdh.virginia.gov