

PROJECT LIFESAVER
Of
LOUDON COUNTY, TENNESSEE
Program Application
Phone 865-986-4823

Applicant's Name: (Name of individual for whom this application is being made.)

FAMILY/CAREGIVER INFORMATION

NAME: _____

RELATIONSHIP TO APPLICANT: _____

Are you the Parent of, or Guardian of, or do you have durable power of attorney for healthcare that has been activated for the individual you are seeking to enroll in Project Lifesaver? YES / NO

If not, please provide the name, address, and phone number of who is, and their relationship to the Applicant:

HOME ADDRESS: _____

HOME PHONE: _____ CELL PHONE: _____

E-MAIL ADDRESS: _____

EMPLOYER NAME: _____

EMPLOYER ADDRESS: _____

FAX # _____ WORK PHONE _____ WORK E-MAIL _____

ADDITIONAL EMERGENCY INFORMATION

NAME: _____

RELATIONSHIP TO APPLICANT: _____

HOME PHONE: _____ CELL PHONE: _____

E-MAIL ADDRESS: _____

EMPLOYER NAME: _____

EMPLOYER ADDRESS: _____

FAX # _____ WORK PHONE _____ WORK E-MAIL _____

APPLICANT (PATIENT) INFORMATION

FULL LEGAL NAME: _____

NICKNAME: _____

What is Applicant’s specific diagnosis? _____

When was the Applicant diagnosed? _____

Date of Birth _____ Current Age _____

Height _____ Weight _____ Eye Color _____ Hair Color _____

Describe any distinguishing physical characteristics: _____

How long has applicant been living at this address? _____

Is there any prior history of applicant becoming lost or wandering from home? If yes, please describe the event(s) in detail with dates. Attach additional paper if needed/

Name, address and phone of physician diagnosing Applicant:

Describe any other health related problems: _____

Please have the applicant’s physician sign below verifying that the applicant is or may be at risk for wandering as indicated by specific diagnosis on front page.

Physician Name (Printed)

Date

Physician’s Signature

Please mail this application for to the Loudon County Sheriff’s Office, Attention: PROJECT LIFESAVER, 12680 Hwy 11 W, Suite 1, Lenoir City, TN 37771. After receipt of this application, someone will be in contact with you to set up an appointment.