

State Of Connecticut Department Of Developmental Services

REQUEST FOR PROGRAMMATIC ADMINISTRATIVE REVIEW

If you disagree with any decision made by the Department of Developmental Services, you may request a **PROGRAMMATIC ADMINSTRATIVE REVIEW** by completing this form and sending it to the Regional or Training School Director. Upon receipt, he or she will review all pertinent records and information, and render a written decision within ten (10) working days. During this time, you can request a meeting with the Regional or Training School Director to further discuss your concerns. If the Regional or Training School Director needs more time render his or her decision, you will be notified in writing. The entire process shall not take any longer than twenty working days.

TO:	Director	DATE:
I,		
	(DDS Region or Training School)	
	(Address)	
	(Town, State, Zip)	
		, hereby request a Programmatic
Admi	nistrative Review on behalf of	
		(Individual's Name)
for th	e following reasons:	
	Signed	:
	Relationship to Individual	:
	Address	:
	Telephone):

IMPORTANT NOTE: While the Programmatic Administrative Review is pending, no changes will occur in the individual's program except in the even of an emergency.