

# KW

**Person's Age:** 13

**City of Residence:** Coshocton

**Funding Source:**

Level 1 Waiver

**Type of Services requested:**

Homemaker/Personal Care

**Projected schedule for services:** during the school year 1 weekday/week 3:30pm-6pm. During summer TBD.

**Is this schedule flexible:**  Yes  No  Somewhat- explain: Scheduling can be arranged with family.

**The best way to communicate with me is:** Talking.

**Things I like to do:** Go-karts, Putt-putt golf, Legos, x-box, basketball, bowling, swimming.

**Things I need help with:** Trying new things. Getting out of the house more to interact with others.

**Any other important information to know:** [Click here to enter text.](#)

**SSA's contact information:**

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