



Choice. With Confidence.

Consumer Information Form Instructions

Purpose of form: The Consumer Information Form is used to collect the Consumer's personal information.

Instructions

1. Write the Consumer's name.
2. Write the Consumer's home address (street address, city, state and ZIP code).
3. If the Consumer's mailing address is different than their home address, write the Consumer's mailing address (street address, city, state and ZIP code).
4. Write the Consumer's primary phone number. Check if the primary phone number is the Consumer's cell, home or work phone number.
5. Write the Consumer's alternate phone number. Check if the alternate phone number is the Consumer's cell, home or work phone number.
6. Write the Consumer's birth date and Social Security number.
7. Write the Consumer's email. Optional: Check opt in for iLIFE email if you want to receive information from iLIFE by email.
8. Check the Consumer's gender (male or female).
9. Check the Consumer's preferred language. If Other, write which language is preferred.
10. Write the Consumer's local office.
11. Write Consumer's Case Manager name.
12. Write Case Manager email.
13. The Consumer or Guardian signs and writes today's date.



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Sample Consumer Information Form

Consumer Name: John Doe 1. Write Consumer name.

Home Address: 1234 Main Street 2. Write Consumer mailing address.

City: Raleigh State: NC ZIP: XXXXX

Mailing Address (if different): _____ 3. Write Consumer home address. If same as mailing address, can check box instead.

City: _____ State: _____

Primary Phone Number: (XXX) - XXX - XXXX Cell 4. Write Consumer primary phone number.

Alternate Phone Number: (XXX) - XXX - XXXX Cell 5. Write Consumer alternate number.

Birth Date: MM / DD / YYYY Social Security Number: XXX - _____ 6. Write Consumer birth date and SSN.

Email: johndoe@xxxxx.com Opt in for email 7. Write Consumer email. Optional: Check to opt in for iLIFE email.

Male Female 8. Check gender.

Preferred Language: English Spanish Hmong Other: _____ 9. Check Consumer preferred language.

Local Office: Raleigh 10. Write local office.

Case Manager Name: John Smith 11. Write Case Manager name.

Case Manager Email: johnsmith@xxxxx.com 12. Write Case Manager email.

By signing below, you agree the information on this form is accurate and you have all supplied documents in your possession. 13. Consumer signs and dates.

Consumer Signature: John Doe Date: MM/DD/YY