

Community Action Wayne/Medina

Administrative Offices: 905 Pittsburgh Avenue, Wooster Ohio 44691 330.264.8677 FAX 330.264.5170

Medina Office: 232 Northland Drive (lower level), Medina Ohio 44256 330.723.2229 FAX 330.723.5418

Lodi Office: 110 Highland Drive, Lodi Ohio 44254 330.661.1027 FAX 330.264.0391

SUMMER CRISIS PROGRAM (SCP) MEDICAL ELIGIBILITY FORM

Due to an illness, (p	eatient's name), ervice and/or air cond	ditioning and/or fa	wo	ould benefit from	
PRINT					
NAME:	M	ledical Professional			
SIGN					
NAME:	Medical Professional			DATE:	
	. PRACTICE:				
by a licensed medica	nio Department of Deve I professional who is que te than one year prior t	ualified under Ohio	State law to write		
	FOR CH	IRONIC ILLNE	SS		
Clients whose illnessis qualified under Conce every three years	Signature (if applicable (Required ss has been determine thio State law to write ears to the Home Ene Clients with a chronic	ned chronic by a l e prescriptions sh rgy Assistance P	licensed medical nall submit medic rogram (HEAP) to	professional who al documentation receive Summer	
	form to your local E		Provider at the fo	ollowing address/	
(OOCTED OFFICE		FFICE LOCATIONS	LODIOFFICE	WEST ON THE SERVE	
OOSTER OFFICE S Pittsburgh Ave.	MEDINA OFFICE Lower Level- MCDJFS	RITTMAN OFFICE & FOOD PANTRY	110 Highland Dr.	WEST SALEM OFFICE 8 FOOD PANTRY	
ooster, OH 44691	232 Northland Dr.	88 N. Main St.	Lodi, OH 44254	99 E. Buckeye St.	
OURS: Monday- Thursday	Medina, OH 44256	Rittman, OH 44270	HOURS: Thursday	West Salem, OH 44287	
	HOURS: Mon Wed.	HOURS: Thursday	8:00 AM - 4:30 PM	HOURS: Monday	
			1		
	8:00 AM - 5:00 PM	8:00 AM - 5:00 PM		8:00 AM - 4:30 PM	
00 AM - 5:00 PM	8:00 AM - 5:00 PM Thursday by appointment	8:00 AM - 5:00 PM		8:00 AM - 4:30 PM	
00 AM - 5:00 PM				8:00 AM - 4:30 PM (NUMBER -264-4573	

The form can also be emailed to: