

National Family Caregiver Support Program, Sauk County

Aging and Disability Resource Center of Sauk County 505 Broadway, Room #234, Baraboo, WI 53913 (608)355-3289 | Fax: 355-4375

Marina Wittmann, Aging Programs Supervisor

National Family Caregiver Support Program Application

Name	Date of Birth
Address	City/Zip
Mailing Address (if different)	
Phone Number	Email
	sgender-Male Transgender-Female Transgender-Unspecified id/Not Exclusively Male or Female Self-Describe:
Do You Live Alone? Yes No	
Race: White American Indian/Alaskan Na Asian	Black/African American Native Hawaiian/Pacific Islander Other
Are you Hispanic or Latino? Yes	_ No
Income Information (income does <u>not</u> de	etermine eligibility, it is used only for data reporting)
If the caregiver is single, widowed, divorcincome below \$1,304.17)? Yes	ced, or separated, is their annual income below \$15,650 (or monthly No
If the caregiver is married, is their combin \$1,762.50)? Yes	ned annual income below \$21,150 (or monthly income below No
What is your relationship to the care re Husband Daughter or Daughter-in-law Brother	Wife Other relative Non-relative
Does the Care Recipient have a diagnos	sis of Alzheimer's or Dementia? Yes No
If the Care Recipient is age 18-59, do th	hey have early onset dementia? Yes No N/A
• •	giver caring for a child under age 18? Yes No er, please complete the Care Recipient/Loved One's Information but (ADL's on the next page)

Care Recipient/Loved One's Information		
Name Date of Birth		
Address (if different from Caregiver) City/Zip	City/Zip	
Phone Number Lives Alone? Yes No		
Gender: Male Female Transgender-Male Transgender-Female Transgender-Non-Conforming Gender Fluid/Not Exclusively Male or Female Self-Describe		pecified
Race: White Black/African American American Indian/Alaskan Native Native Hawaiian/Pacific Islander Asian Other		
Are you Hispanic or Latino? Yes No		
Is the Care Recipient enrolled in a Long Term Care program (i.e. Inclusa, My Choice, IRIS)?	Yes	No
Income Information (income does <u>not</u> determine eligibility, it is used only for data reporting) -If the recipient is single, widowed, divorced, or separated, is their annual income below \$15,000 income below \$1,304.17)? Yes No -If the recipient is married, is their combined annual income below \$21,150 (or monthly income \$1,762.50)? Yes No		onthly
Care Recipient Assessment of ADL's & IADL's		
Check Yes for each ADL/IADL that the care recipient need substantial assistance to complete	(includin	g verbal
reminding, physical cuing or supervision). Check No for each ADL/IADL they can complete	without he	elp.
Assessment of Activities of Daily Living (ADL's)	No Help Needed	Yes, Needs Help
Bathing : Gets in and out of the bath/shower, uses faucets, washes and dries oneself safely.		_
Dressing : Dresses and undresses safely		
Toileting : Uses toilet and cleans oneself		
Transferring: Moves in and out of a bed or chair		
Feeding : Gets food or drink from plate, bowl or cup into mouth and uses utensils		
Continence: Exercises complete self-control		
Assessment of Instrumental Activities of Daily Living (IADL's)		Yes, Needs Help
Meal Preparation: Plans, prepares, and serves adequate meals independently		
Shopping : Takes care of all shopping needs independently		
Responsibility for Own Medications: Takes medication in correct dosages at correct time		
Ability to Manage Finances: Handles financial matters and/or day-to-day purchases		
Housekeeping: Participates in housekeeping tasks		
Laundry: Launders some items independently		
Mode of Transportation: Travels unassisted via personal vehicle, public transportation		
Ability to Use a Telephone: Dials and/or answers the telephone		

Ten Me More:
Caregivers can use the funding in a variety of ways. Respite services for caregivers includes: chore services (lawn mowing, snow shoveling, heavy housework), personal cares (dressing, bathing, toileting), daily homemaking tasks (meal prep, shopping, housecleaning), companionship and general supervision for safety purposes. Items that supplement care are also approved such as: transportation, assistive devices (adaptive aids door locks, grab bars), home repairs (wheelchair ramp installation), supplies (incontinence supplies) and safety equipment. This list is not exhaustive – if you have something in mind, let's talk!
What would re-energize you? A short weekend trip, lunch with a friend, taking a class, having the chores taken care of? Tell me how you would use the money!
How did you learn about the National Family Caregiver Support Program in Sauk County? AddLIFE Newsletter ADRC Staff (please specify whom)
Hospital/Clinic Staff Other
I certify the information reported here is true and correct. Name Date
Name Date
Additional Caregiver Support Services
Powerful Tools for Caregivers: a 6-week evidence-based workshop designed to help caregivers learn how to
take care of themselves while caring for a loved one. Call for workshop details.
Trualta : a free online learning portal that offers educational materials, articles, videos, tip sheets, and music –
something for every caregiver! https://wisconsincaregiver.trualta.com/login or contact Marina at the ADRC.
Support Groups & Education: Call for a complete list of in-person and virtual support groups. For events
around the state, check out wisconsincaregiver.org/virtual-events-for-caregivers.
Caregiver Lending Library: add to your caregiving toolbox and check out items for 6+ months. Items include iPads, Amazon Fire Tablets, Amazon Echo (Alexa), books, activity kits, DVD's and more!
Opt-In: want to stay up-to-date on all things caregiver? Check the box(es) below to sign up!
☐ Monthly email blast with what's happening locally for caregivers and loved ones
☐ Bi-Monthly Caregiver Newsletter
Circle Option: Email Mail/Hard Copy

Email or mail this application to Marina Wittmann marina.wittmann@saukcountywi.gov or Aging & Disability Resource Center 505 Broadway Street Baraboo, WI 53913



The information you are being asked to provide is needed to determine eligibility and to comply with federal reporting requirements. This information will be stored in a secure electronic database and will not be used for any other purpose. Your information will not be shared or sold to another agency without your permission. You have the right to review your electronic record and request changes to assure accuracy. You will not be denied most services if you refuse to provide this information. If you have questions regarding this please call the Sauk County ADRC. Updated 1.16.2025 MW