

Individual Request for Exception or Funding Review

Date: _____

Individual's name: _____ Date of birth: _____

Individual's address: _____

Representative's name (optional): _____

Contact phone number: _____

Contact email address (optional): _____

Community developmental disabilities program (CDDP) or brokerage:

Service coordinator or personal agent's name: _____

Describe your request (attach additional pages and documents if needed):

Email your completed form to odds.fundingreview@odhsoha.oregon.gov or mail to:

ODHS-ODDS
Attn: Exceptions Coordinator
500 Summer St. NE #E09
Salem, OR 97301.

You can get this document in other languages, large print, braille or a format you prefer free of charge. Contact Office of Developmental Disabilities Services (ODDS) at odds.questions@odhsoha.oregon.gov or 503-945-5811 (voice). We accept all relay calls.