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Chasity Wright, PhD President/Owner

Request for Information (RFI) Form for Applied Behavioral Analysis (ABA)

<p>Do you have a child with the Autism Spectrum Diagnosis? <i>(ASD diagnosis is required for ABA therapy.)</i></p>	<p>Yes: _____ If yes, do you have a copy of the diagnostic evaluation from that assessment? This evaluation is required to start the approval process for ABA services. You will also need a referral from your child's doctor for ABA therapy services.</p> <p>No: _____</p>
<p><u>Contact Name:</u></p>	
<p><u>Phone Number:</u></p>	
<p><u>Email Address:</u></p>	
<p>Do you currently have ABA services with another company? Or on a waiting list?</p>	<p>Yes: _____</p> <p>No: _____</p>
<p>Please list any and all insurances that your child has; private and/or Medicaid.</p>	

1. Are you looking into full-time ABA services for your child? Currently, our waiting list for part-time is 6 months.
2. Is your child in school? What behaviors are being exhibited? Are there multiple suspensions or expulsions due to behaviors?
3. Provide in detail the behaviors you are seeing at home.
4. Are you interested in our Muncie or Winchester location?