



**Community Living Assistance and Support Services (CLASS)
Selection Determination**

Lubbock

Catchment Area

I, _____,
(Print Applicant's Name) (Area Code and Telephone No.)

choose the following as my CLASS provider agencies:

1. Choose one Case Management Services Agency (CMA)
2. Choose one Direct Services Agency (DSA)

CMA

Agency	Telephone	Contract Number
Advocating for C.L.A.S.S., LLC	855-356-2273	1020359
Perrylee Home Health Care Services, Inc.	806-747-9042	1015825

DSA

Agency	Telephone	Contract Number
Caprock Home Health Services, Inc.	806-793-3615 ext. 1561	1016898
Educare Community Living Corporation-Texas	806-701-5488	1021304

(Signature of Participant or Legally Authorized Representative)

(Date)