

City of Paducah COVID-19 Wellness Check Program Application

Please complete the following application for the City of Paducah COVID-19 Wellness Check Program. You may e-mail, drop off or mail the application to:

Paducah City Hall
300 South 5th Street,
Paducah, KY 42002-2267
Attention: Customer Experience Dept.
customerexp@paducahky.gov

For questions and assistance, please contact us at:
Customer Experience Dept. 270-444-8800

SECTION 1

Who is filling out this form?

I am filling out this form for myself.

I am filling out this form on behalf of a friend or loved one with their permission and consent. Your Name: _____ Your Phone Number: _____

SECTION 2

Information on the Person to be Called

First Name: _____ Last Name: _____ Middle Initial: _____

Birth Date: _____ Gender: Male Female Non-Binary Prefer not to disclose

Address: _____ Apt # _____

City: _____ State: _____ Zip Code: _____

Phone Number: _____ Cell #: _____ Email: _____

Emergency Contact/Family: _____ Work#: _____ Cell# _____

Emergency Contact/Alternate: _____ Work#: _____ Cell# _____

How often would you like to receive a call? (Select One)

_____ Daily (Monday-Friday)

_____ Weekly (Each Monday)

What time do you want to be called each day/week?

Please Select One:

8:00 - 9:00 a.m.

9:00-10:00 a.m.

2:00 - 3:00 p.m.

3:00 – 4:00 p.m.

Do you require a TTY (A device for the deaf and hard of hearing)? **Yes** **No**

Why are you requesting the Wellness Check Call for yourself or a loved one?

SECTION 3

- I understand that the person listed in Section 2 is being scheduled to receive a call approximately at the designated time selected above. If the person listed does not answer the telephone after 2 calls, their designated emergency contacts will be called. I understand that if the individual in Section 2 and the designated emergency contacts fail to answer the phone on 6 occasions, the City of Paducah will discontinue this service and no more wellness check calls will be made to the individual listed in Section 2.
- I understand I am responsible for notifying The City of Paducah, CX Dept. of any changes, whether temporary or permanent, by calling 270-444-8800, Monday thru Friday 8:00 AM - 4:30 PM.
- I acknowledge that the City of Paducah is providing this program as a convenience, and as such is not receiving any compensation.
- I recognize that the City of Paducah is offering this service during the COVID-19 pandemic and may, in its sole discretion, terminate this service at any time; but I will be given adequate notice of the City's decision to terminate the service.
- I hereby release and hold harmless the City of Paducah, its agents, servants, employees, and/or officers from and against all losses, claims, damages or other costs of any nature or kind whatsoever including claims for monetary damages relating to any actions or inactions of any employee arising directly or indirectly out of or related to the provision of this Program. I further understand that this is not a contract and nothing contained herein places a duty on the City of Paducah and/or its employees to perform the duties as set forth herein. This Program should not be perceived as a replacement for in-person checks that should be made on the person listed in Section 2. This Program should only be perceived as an additional check on said individual.
- I certify that the person listed in Section 2 is a resident of the City of Paducah.
- I certify that the person listed in Section 2 has a working telephone number (land line or cell)
- I certify that the emergency contacts listed in Section 2 are aware of this service and willing to receive calls from the City of Paducah.

Signature of Person Completing this Form

Date

Signature of Person Identified in Section 2 (if different)

Date



Frequently Asked Questions:

1. Does this program cost anything? No, this is a FREE service provided by the City of Paducah.
2. Who can sign up for the program? Any City of Paducah resident who has a telephone may sign up for this program.
3. When will I receive the call? You will receive the first call within 3 business days of submitting the application. The program will provide a daily (Monday – Friday) or weekly (Each Monday) call within the window of time you select. Options to choose from are: 8-9 AM, 9-10 AM, 2-3 PM, 3-4 PM.
4. Who is a good alternate person? This person must be a reliable emergency contact, such as an adult responsible neighbor, or close relative.
5. How long does it take to be approved for the program? Once registered with all paperwork approved, you will receive a call within 3 business days.
6. How can I make changes to my enrollment information? To make changes to your enrollment information such as your phone number, the time of the call, alternate contact's information, or to request a vacation or sick leave hold call 270-444-8800 and inform the Customer Experience Representative. Please allow at least three business days for new information to be updated.
7. What if I am on the phone during my daily call? Please stay off the phone during your scheduled hour. If you are on the phone during the time of your daily call check, a representative will call you back. Please be available to answer the call at the designated day/time.
8. What happens if I don't pick up the phone when the daily call comes in? We will call you back up to 2 additional times. If there is still no answer, we will then call your emergency contacts.
9. Can I put the calls on hold if I am away or sick? Yes, you must place a temporary hold on calls by calling Customer Experience Dept. 270-444-8800. Please allow at least three business days for new information to update. You may not request hold of more than 30 consecutive days or you will be automatically dis-enrolled.
10. How do I dis-enroll from the program? You may dis-enroll from the program at any given time. You can dis-enroll by calling the Customer Experience Department at 270-444-8800. Or e-mail us at customerexp@paducahky.gov