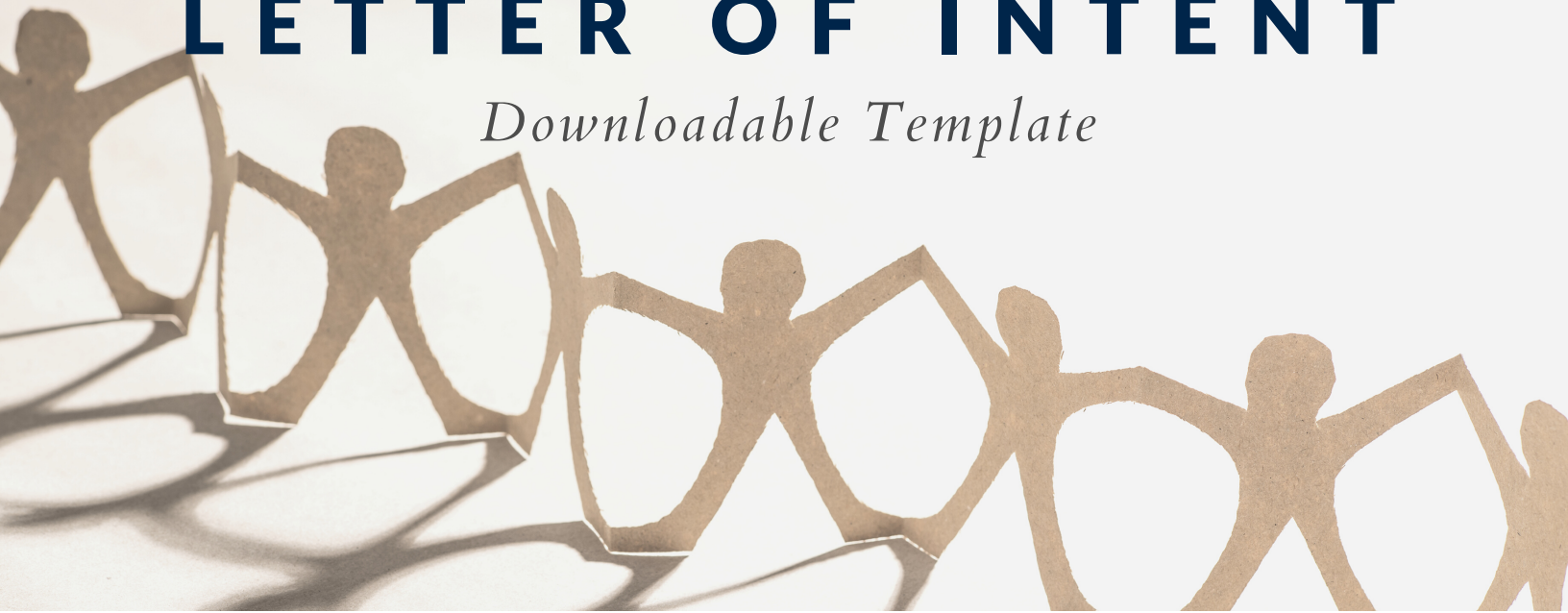


LETTER OF INTENT

Downloadable Template



A Letter of Intent document is intended to be used in addition to legal documents, such as estate plans, special needs trusts, or a Will, to help caregivers or the courts better understand your child or family member's unique needs, as well as your personal care wishes when you are no longer here.

How To Use This Document

1. Print out a few blank copies - you'll likely want to revise this information in the future.
2. Complete this when you have a quiet space and plenty of time available; you won't want to feel rushed or overwhelmed.
3. To the extent the person whom this document represents can participate, include his/her input in key quality of life areas.
4. Include family members and/or close friends who may be involved in the person's care in the future.
5. Take a breath. This can be an emotional process and you may need some time to get comfortable with it.

SHEEHAN PHINNEY

Boston • Concord • Manchester • Portsmouth • Upper Valley

LETTER OF INTENT

Family Members

Date: _____

Your Name(s): _____

Prepared For* (Name): _____

**Name of child, grandchild, adult sibling or spouse represented in this document.*

If modified from Previous version (include last date): _____

PARENT / GUARDIAN

Full Name

Address

Phone

Email

Immediate Family Details:

Health & Background Info
(pertinent info including
previous marriages)

PARENT / GUARDIAN

Full Name

Address

Phone

Email

Immediate Family Details:

Health & Background Info
(pertinent info including
previous marriages)

LETTER OF INTENT

Family Members

Date: _____

Your Name(s): _____

Prepared For (Name): _____

If modified from Previous version (include last date): _____

SIBLING

Full Name

Address

Phone

Email

Immediate Family Details:

Health & Background Info
(pertinent info including
previous marriages)

SIBLING

Full Name

Address

Phone

Email

Immediate Family Details:

Health & Background Info
(pertinent info including
previous marriages)

LETTER OF INTENT

Family Members

Date: _____

Your Name(s): _____

Prepared For (Name): _____

If modified from Previous version (include last date): _____

FAMILY MEMBER

Full Name

Address

Phone

Email

Immediate Family Details:

Health & Background Info
(pertinent info including
previous marriages)

FAMILY MEMBER

Full Name

Address

Phone

Email

Immediate Family Details:

Health & Background Info
(pertinent info including
previous marriages)

LETTER OF INTENT

Physicians / Caregivers / Healthcare

Date: _____

Your Name(s): _____

Prepared For (Name): _____

If modified from Previous version (include last date): _____

PHYSICIAN

Full Name

Address

Phone

Hospital Affiliation

Notes

OTHER (HEALTH/SUPPORT)

Full Name

Address

Phone

Hospital Affiliation

Notes

LETTER OF INTENT

Key Caregivers / Contacts

Date: _____

Your Name(s): _____

Prepared For (Name): _____

If modified from Previous version (include last date): _____

KEY CAREGIVER/CONTACT

Full Name

Role / Relationship

Phone

Email

Address

Notes

KEY CAREGIVER/CONTACT

Full Name

Role / Relationship

Phone

Email

Address

Notes

LETTER OF INTENT

Friends

Date: _____

Your Name(s): _____

Prepared For (Name): _____

If modified from Previous version (include last date): _____

FRIEND

Full Name

Role / Relationship

Phone

Email

Address

Notes

FRIEND

Full Name

Role / Relationship

Phone

Email

Address

Notes

LETTER OF INTENT

Medical History

Date: _____

Your Name(s): _____

Prepared For (Name): _____

If modified from Previous version (include last date): _____

KEY INFORMATION

Blood Type

Surgeries / Treatment History

ALLERGIES & IMMUNIZATIONS

Allergies

Immunizations

LETTER OF INTENT

Educational History

Date: _____

Your Name(s): _____

Prepared For (Name): _____

If modified from Previous version (include last date): _____

EDUCATIONAL HISTORY

School(s) Attended (include dates)

Learnings / Skills

Vocational Training (if applicable)

Attach related documentation, including IEP (if applicable)

LETTER OF INTENT

Work History

Date: _____

Your Name(s): _____

Prepared For (Name): _____

If modified from Previous version (include last date): _____

WORK HISTORY

Work or Volunteer positions my child has held (if applicable):

Work or Volunteer Aspirations for the Future:

LETTER OF INTENT

Daily Life

Date: _____

Your Name(s): _____

Prepared For (Name): _____

If modified from Previous version (include last date): _____

WHAT DOES A TYPICAL DAY LOOK LIKE?

Routines

Diet

LETTER OF INTENT

Daily Life

Date: _____

Your Name(s): _____

Prepared For (Name): _____

If modified from Previous version (include last date): _____

WHAT DOES A TYPICAL DAY LOOK LIKE?

Behavior

Social & Recreational Activities

Other

LETTER OF INTENT

Supports & Financial Information

Include any insurance, financial support, including private assets and income. If there is required reporting or recertification, include that history and key dates.

INSURANCE / FINANCIAL INFORMATION / SUPPORTS

List all private insurance including description, contact information, coverage received (attach related documentation)

List all assets or income (including company and contact information) / list any trusts benefiting the individual (attach trusts)
