

**Consumer/Caregiver Directed Personal Assistant Service**  
**Consumer/Caregiver ~ Assistant Contract**

This contract must be signed and dated by both parties before an assistant can be enrolled on the AIM ILC payroll.

Position: Personal Assistant

Supervisor (Caregiver): \_\_\_\_\_

Care Receiver's name: \_\_\_\_\_

Duties: Provide personal Assistance to the above named individual within his/her home, and as needs, in the community, within the authorized hours approved by the Department of Social Services.

Personal Assistants may work a total of forty hours per week. They may have more than one Caregiver, therefore, please ask the assistant if they have other Caregivers they are working for. The total may not be more than forty (40) hours per week.

Total hours Personal Assistant will work weekly: \_\_\_\_\_

Caregiver Directed Personal Assistant Service is designed to maximize the authority of people with disabilities to manage their own lives and to facilitate their inclusion in the community. As a Personal Assistant, you are a key element in making this goal a reality. By accepting this position, you are agreeing to work within the unique framework of the Caregiver Directed Personal Assistance Program.

I attest to not being a direct, immediate relative to the above named Caregiver, i.e. I am not the father, mother, brother, sister, so, son-in-law, daughter or daughter-in-law of the above named caregiver.

I, the below named assistant, also understand that I may not work more than forty (40) hours for all Caregivers of CDPAS.

**Signatures**

Consumer/Caregiver Signature: \_\_\_\_\_

Personal Assistant: \_\_\_\_\_

Date: \_\_\_\_\_