



Oxford Respite Network
RESPITE APPLICATION FORM

Respite is a flexible, periodic, short-term break from caregiving, for the purpose of rest and renewal for the family.

In Oxford County, self-directed respite funding is available to qualified families caring for a child/youth with a Mental Health Disorder, a Developmental Disability, or Autism Spectrum Disorder.

In order to qualify, the child/youth must reside in Oxford County and must be under the age of 18.

Respite funding is provided to Wellkin and all funding allocations are determined through the Oxford Respite Network.

The level and length of respite services will be determined based on the child/youth and family needs, as well as available resources.

Please note, respite is not for the purpose of childcare while working, or treatment and is not to be used as a substitute for another necessary service or support, including crisis services.

To apply for Respite Funding in Oxford County, please complete this application form and send it to Penny Sim, Respite Coordinator, via mail, email or fax.

Address: Wellkin Child and Youth Mental Wellness
912 Dundas Street, Woodstock
ON, N4S 1H1

Email: PSim@wellkin.ca

Fax: 519-539-7058

If you have any questions about the application or eligibility, please contact the Respite Coordinator at 1-877-539-0463 at extension 230 or via email at PSim@wellkin.ca

Referral Information

Referring Agency:	Date:
Case Manager:	Telephone:
Email:	

Note: Please include a signed Consent to Exchange Information form along with this application.



Oxford Respite Network
RESPITE APPLICATION FORM

Child/Youth's Information

Name:	DOB:	Age:
Diagnosis:		
Please check the Respite Fund you are applying to:		
<input type="checkbox"/> Autism Spectrum Disorder <input type="checkbox"/> Developmental Disability <input type="checkbox"/> Mental Health Disorder		

Parent/Guardian Information

Name(s):	Address:
Relationship(s) to the Child:	
Telephone:	
Cell Phone:	

Respite Plan

Please describe in detail why the parent(s)/guardian(s) are in need of respite as well as the benefits they will experience when respite is in place:
Please specify the type of respite requested? (E.g. one to one support, seasonal or specialized camp fees, etc...)