

DDD Eligibility Checklist
What is a complete packet?

| What do I need? | What is it? | Why do I need it? | Do I have it? |
|---|---|--|----------------------|
| Hand signed Application for Eligibility Determination (DDD-1972A) | Four-page document that asks for information about you and your child or the person you are applying for. It allows us to work with other people or agencies to help you. | DDD needs information about you or your child in order to decide if you or your child is eligible. | Yes No |
| Copy of birth certificate (or citizenship / immigration document) | Documentation demonstrating citizenship or lawful presence in the United States. | The State of Arizona requires that DDD help people who are born in the United States or have legal residency in the United States. There are other documents you can show us to meet this requirement. Ask your eligibility specialist if you need another option. | Yes No |

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| Proof of Arizona residency (lease, utility bill, State ID/Driver License) | Documentation showing the applicant's name and current residential address. | The state of Arizona requires all recipients to be residents of Arizona at the time of the application. | Yes No |
| Health Coverage, copy of front / back (if applicable) | A card or document given to you when you have health insurance coverage by the state or a private insurance company. | Your insurance company may have the responsibility to pay for medical costs before DDD pays for some or all the cost. | Yes No |
| Records showing a qualifying disability | Documents by a school and / or doctor that show you or your child has a disability. (See DDD-0640A "How DDD Eligibility is Determined" flyer for information based on age and disability). | <p>DDD needs to know if your child or the person you are applying for has a qualifying disability.</p> <ul style="list-style-type: none"> • Cerebral Palsy • Epilepsy • Intellectual (Cognitive) Disability • Autism Spectrum Disorder • Down Syndrome <p>At Risk for one of the above (under age 6 only).</p> | Yes No |

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| School Evaluation Documents (if applicable) | A report showing observations and tests that helps decide if your child needs help at school. A document that shows how the school will meet your child's needs. (Individual Education Plan (IEP) and Multidisciplinary Evaluation Team (MET) or Psychoeducational report). | It helps us determine if your child meets DDD eligibility requirements. | Yes No |
| Documents Showing Legal Responsibility / Guardianship (if applicable) | Court-issued or legal document showing who has the right to make legal decisions. | DDD needs to know who has the right to make legal decisions about your child or the person applying. | Yes No |

If you have any questions, please call our DDD Customer Service Center at 1-844-770-9500 or email your question to DDDApply@azdes.gov.

Equal Opportunity Employer / Program • Auxiliary aids and services are available upon request to individuals with disabilities • To request this document in alternative format or for further information about this policy, contact the Division of Developmental Disabilities Customer Service Center at 1-844-770-9500; TTY/TDD Services: 7-1-1 • Disponible en español en línea o en la oficina local