

REQUEST FOR PROVIDER LISTING ON THE AGING AND DISABILITY RESOURCE LINK (ADRL)

DEPARTMENT OF HEALTH AND HUMAN SERVICES AGING SERVICES SFN 332 (11-2023)

Name of Organization				
Address	City		State	ZIP Code
Main Telephone Number	Toll-Free Telephone N	umber	Fax Number	
Website	Email Address			
Service Area (list all cities/counties)				
Description of Services (Information provided here describing your services will appear on the ADRL website for the public to see. Please be specific. Also include the demographics of those you serve.)				
Name of Individual Completing Form		Telephone Nu	mber of Ir	ndividual Completing Form
Email Address of Individual Completing Form				

Aging Services follows the inclusion/exclusion criteria policy found in Service Chapter 650-50-85-40 link below: http://www.nd.gov/dhs/policymanuals/65050/Content/650-50-85-40.htm

Or Send Completed Form To:
Aging Services
1237 West Divide Ave Ste 6
Bismarck ND 58501

Aging and Disability Resources Link 1-855-462-5465