



Bock Associates PASRR Evaluation Extension Request

Contractor: _____

Due Date: _____

Assessment: _____
(First Name, Last Initial)

Requested Extension Date: _____

Location: _____

Database Upload Date: _____

Rationale:

- Facility and/or family requested later appointment.
- Client not found (unable to locate, not at facility at scheduled appointment time, etc.).
- Client moved to different facility. Appointment had to be rescheduled.
- Awaiting assessment data (records, family/guardian to return call, etc).
- Difficulty scheduling appointment (unable to reach contact person, etc).
- Assessor illness
- Inclement weather
- Other (specify):