2025 Open Request Application

Children's Autism Waiver Program

The Autism Division of the Department of Developmental Services

617-624-7778

PLEASE TYPE INTO FORM OR PRINT CLEARLY IN PEN

Name of Child	
Child's Date of Birth	
Child's Social Security # **REQUIRED**	
Child's MassHealth **# REQUIRED**	
Child's MassHealth Insurance Type: (please circle)	CommonHealth Standard Private Other
Child's Gender: *Please Write - Male or Female*	
Mailing Address	
City, State, Zip Code	
Name of Parent/Guardian	
In What Language Would You Prefer to Speak About Your Child?*	
In What Language Would You Prefer to Receive Written Materials About Your Child's Care?*	
Parent/Guardian Phone Numbers (Mobile & Alternate)	
Parent Email	

**Translation and Interpretation are free of charge to participants.*

Does the child have a verified written diagnosis of an Autism Spectrum Disorder from a doctor or psychologist?

☐ **YES** ☐ **NO** **DO NOT ATTACH MEDICAL RECORDS/ ANY OTHER DOCUMENTS AT THIS TIME.**

Please list other related medical, cognitive, or psychiatric conditions affecting your child:

I (the parent/guardian of child named above) have completed this form accurately and truthfully to the best of my knowledge.

Signature of Parent/Guardian Required: **Date:**

How to Participate in the Request Process:

ONLY ONE APPLICATION PER CHILD—Multiple forms will be discarded. **Send in only this form to apply** – do not send in anything else at this time. We will reach out to you if more information is needed.

Submit the Application Form: By Mail

- **All Applications must have a Postmark/Date Stamp between October 17, 2025 – October 31, 2025**
- Please mail form to*: (The Autism Division is not able to accept hand delivered forms)*

AUTISM DIVISION of DDS, Att. Children's Autism Waiver Program Open Request
40 Broad St, 4th Floor, Boston, MA 02109

Submit the Application Form: By Email

- All Applications must be emailed to **AutismDivision@mass.gov** between **October 17, 2025 – October 31, 2025**
- **All Applications must be sent directly from the Parent/Guardian Only**
- Form can be completed electronically or printed, filled out clearly in pen and scanned into an email
- Form may be sent in the following formats: PDF (preferred), JPG if clearly visible
  - If completing on a smart phone/tablet-download a free scanner app and send via a PDF file