## Community Living Assistance and Support Services - Case Management Agency (CLASS - CMA) Required Forms

The following forms should be completed in accordance with HHSC instructions. Please do not send instructions or blank form pages with an application packet.

| Reviewed | Attached | Forms |
| :--- | :---: | :--- | :--- |
| $\square$ | $\square$ | Form 5830, Application Packet Checklist |
| $\square$ | $\square$ | Form 3681, Community Services Contract Application |
| $\square$ | $\square$ | Form 3691, Service Area Designation |
| $\square$ | $\square$ | Form 5871 or Form 5871-S, Disclosure of Ownership and Control Interest Statement |
| $\square$ | $\square$ | Form 2031, Designation Of Authorized Individual(s) - Business Entity |
| $\square$ | $\square$ | Form 2031-G, Designation Of Authorized Individual(s) - Governmental Entity |
| $\square$ | $\square$ | Form 3834, Written Acknowledgement of Completion of Cybersecurity Training Program |
| $\square$ | $\square$ | Data Usage Agreement (DUA) |
| $\square$ | $\square$ | HHS Information Security and Privacy Initial Inquiry |
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