

# **Kentucky Office of Vocational Rehabilitation**

## **Verbal Exchange Release**

### Instructions

#### **Purpose:**

The verbal exchange release form is for verbal conversations between agency staff and contacts for the individual, other agencies, or any other entities that the individual gives the counselor permission to speak to. This release is for verbal exchanges only. The other releases are used for documents.

Name Enter the name of the individual

Social Security Number (SSN) Enter the social security number of the

individual (9 digits)

Address Enter address of the individual

Release of verbal exchanges Enter the verbal exchanges that the

individual gives the agency permission

to release

To whom the information may be Enter the name(s) of the individual(s) to

released

whom the information can be released

Purpose for which the Enter the purpose for the release of the

information is released information

### Signature of Individual

Please use these instructions for DocuSign before sending the form to the consumer

Select Start for quick access to the most common eSignature actions.

- 1. Select Send an Envelope
- 2. Use the template of the OVR-15V.
- 3. Enter the recipient's name(s) and contact information.
  - a. As a sender, you will receive a copy of the completed Document. Place the copy in the consumer file.

Please use these instructions if sending the form by regular mail.

1. After filling out the form, print off the form and mark where the individual needs to sign before sending it to the individual. When the form is received, place it in the case file.