1. Please provide your name and the name of your county.

2. Add an “X” to indicate whether your county is or is not volunteering to serve as a pilot county for NC FAST Case Management implementation.

3. Please sign and date this form.

4. Once you have signed this form, either e-mail a scanned copy to mark.barnhart@dhhs.nc.gov, or print and fax it to (919) 715-0744, or mail it to:
   Mark Barnhart, Readiness Coordinator
   NC FAST Program
   2029 Mail Service Center
   Raleigh, NC 27699-2029

   The completed form must be received no later than September 30, 2010.

Director Name: ________________________________

County Department of Social Services: _______________________

_______ IS volunteering to be a pilot county.

_______ is NOT volunteering to be a pilot county.

Signed: ________________________________

Date: ________________________________