



COMMUNITY ACTION PARTNERSHIP  
OF SCOTT, CARVER & DAKOTA COUNTIES

*The mission of the CAP Agency is to promote and sustain social and economic self-reliance for residents of Scott, Carver and Dakota Counties.*

*It is the policy of the Scott-Carver-Dakota CAP Agency, Inc. to provide services to all persons without regard to race, gender, color, national origin, sexual preference, religion, disability, or age.*

What you can expect from CAP

- to be treated with respect, courtesy and professional competence
- to receive services that are appropriate for your language preference
- to be comfortable in asking questions at any time, and to expect direct, honest answers
- to understand and assist in setting goals, methods, and expected time limits of the services you are receiving
- to request to review your records
- to have information about you treated as strictly confidential
- to have staff support and serve as a resource to you
- to provide information and/or referrals to other resources or agencies as needed
- to have phone messages returned within two business days

What CAP expects from you

- to treat CAP staff with respect and courtesy
- to schedule appointments rather than dropping in
- to be on time for appointments
- to notify CAP as soon as possible if you are unable to keep the appointment
- to be an active participant, contributing your ideas in striving to reach your goals
- to let appropriate CAP staff know if the services and resources provided are not meeting your needs
- to arrive at CAP for appointments free from the influence of any mood altering chemicals
- to provide accurate information and return paperwork promptly

CAP staff may not always be able to give the help you need and will make a referral to another agency whenever possible. Information and referrals given to other agencies does not imply endorsement by the CAP Agency.

CAP staff are mandated reporters and must report suspected maltreatment of children and vulnerable adults to the appropriate agency.

I have read or my worker has explained to me my rights and responsibilities as a CAP client.

Comments : \_\_\_\_\_

\_\_\_\_\_  
CAP Staff Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Client Signature

\_\_\_\_\_  
Date