

Ticket to Work Interest Form

Name (required): _____

Address (required): _____

Phone (required): _____

Type of Benefit currently received: SSI, SSDI, both, other _____

Best time/day to contact: _____

Please mail this completed form to:

Employment Program Manager
Easterseals Rehabilitation Center
3701 Bellemeade Ave.
Evansville, IN 47714

To contact our office directly:

Call Dr. Jared Wilson at 812-479-1411 ext 290 or email jwilson@evansvillerehab.com