
◆ Brain Waves ◆

Once More with Feeling... What's Important

Thoughts and feelings about dealing with life, seeking to overcome cognitive impairments imposed by trauma to the brain or by some problem during the brain's development, were shared by three members of the Vocational Adjustment Group that meets every Tuesday in Philadelphia, PA. Each person was asked to first identify what is most important in his or her effort to gain control of his or her life. Jennifer said her family members were most important to her healing. She explained, "They gave me full support, helping me in many ways. They were always there after my coma. I couldn't even feed myself, but a family member was always there to do it for me."

"What's important to me," Stewart said, "is doing everything as best as I possibly can. I'm doing my job to the best of my ability, and also I'm looking out for myself. I'm doing good things for myself, like doing yoga every night. It helps me, especially when I'm nervous and feel uptight." He described a particular exercise and in doing so his enthusiasm was sparked—so much so that he demonstrated it. Positioned on the floor, his figure looked very much like that taken by an infant lying in a crib. He said the exercise is called "a child's force." Stewart remarked, "I think doing my exercises every night helps me to be a nicer person."

"I think what is important," Howard said, "are things you cherish, like your job, and family of course, and doing things on your own. I also like seeing sports and traveling with my father to

different cities to see the home team play. Those are among the things important to me."

Stewart described his passion for learning things. He uses his computer to explore a variety of interests. Recently he said, "I learned about different eagles of the world—African, Asian and Arctic—when watching a program on television. Work is important and a job is important. You can say that but, in addition, I need something different, variety, to stimulate my mind." Howard found agreement with Stewart, commenting, "I learn things when I travel, going to different places with my dad."

Aside from his passion to learn, Stewart also talked enthusiastically about diet and, as he phrased it, health and cooking. "I think health and cooking go side by side, like avoiding fatty foods and eating vegetables like cucumbers and zucchini, and eating fish, with just a little bit of red meat from time to time. Then you're better off, health-wise. French fries, milk

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Update

- Welcome to our new clients—Andrew, Ari, Brian G., Brian M., Bruce, Dustin, Howard, Jasmeet, Jay, Kim, Nathan, and Orville—and to our new neurorehabilitation specialists—Karen Hawkey, M.Ed., Jeremy Shutts, B.A. and Brittney Wood, M.Ed.

Our clients and staff continue to be involved in many interesting, varied activities. Some of them follow; more will be mentioned in the next issue of *BrainWaves*.

- Kara took a beading class in September and is reviewing options for additional classes to expand her leisure skills.
- Mark G. and his neurorehabilitation specialist went to the Hackensack Environmental Center in Lyndhurst, NJ. They toured the facility and gathered informational brochures about its educational offerings (mostly for children) and its affiliated centers in other towns.
- Matt G. has participated in a philosophy discussion group held at a local café on Thursday evenings. He is also exploring options for adult education classes, and works part-time.
- Robert W. has changed jobs at his place of employment (a tire and automotive services shop) and is now working part-time as a parts clerk.
- Elizabeth is enjoying her two evening classes at Rutgers University and has also resumed her therapeutic horseback riding program.

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Once More with Feeling... continued (from page 1)

shakes or Big Macs—when you eat them, you're going to look like a Big Mac."

Jennifer, who is very thin, responded, by saying, "Hey! You can splurge every now and then." Stewart said, "Yes, but vegetables are good for your intestines. You don't want to need a roto-rooter to unplug your intestines." Howard said coffee is important, and both Stewart and Jennifer responded with a very positive, "Yes!" Howard added, "When you're just a little bit hyper from coffee, you get the job done."

Howard reminisced, bringing to mind thoughts about his teenage years and what meaning they have for him now. Those were the years just after his brain injury, which happened while riding his bicycle when he was almost 12 years old. "Collecting baseball cards and wrestling were important then," he said, "but now I realize I can't get to the spot I should be at because of my brain injury. I'm lacking a lot of things because of the injury I had. My social life is not like my peers when it comes to family life—being married and having children. But I'm not complaining, because you have to take what you have. I have to let go, look at life differently. That's just the way it is. Of course, I wish the whole thing didn't happen, but it did and I have to deal with it. I've been dealing with it fine. I just have to hope there are people out there who understand me. The awards I won (Employee of the Month, twice, and Employee of the Year, once) are important, because awards show that other people appreciate you."

Update... continued (from page 1)

- Marissa has been hired as a part-time sorter/worker by The Salvation Army Thrift Store, following a successful two-part work trial.
- Kristin began a new volunteer job on Mondays from 10:00 a.m. to 2:00 p.m. in the medical records department of a local medical center. She also cut out some holiday craft ideas from a magazine and then made one of the crafts with her neurorehabilitation specialist.
- Craig S. is doing well on his part-time job at the driver's license center and has been given a permanent alternating schedule; he works one week on Wednesdays, Thursdays and Fridays in the morning and the next week he works in the afternoon.
- Matthew C. returned to work as a dining room attendant at McDonald's, after being on medical leave while he recuperated from a fracture of his left tibia. Feedback from his supervisor is consistently positive.
- Lorine made an oral presentation on the "hydrangea" at her garden club, which meets twice a month. She also registers for educational classes at a local Jewish Community Center, and volunteers at a medical center.
- Cara is taking two graduate courses at NYU and is exercising and taking classes (spinning and yoga) at the New York Sports Club.
- Robyn has a new volunteer job in the laundry services department at a retirement community.
- Ginny participated in a bike-a-thon (a fund raiser for AIDS), and raised over \$2000.
- Monica is working part-time as a nail technician at a hair and nail salon and exercises two or three times a week at Lady of America Fitness Center.
- Valencia is volunteering at a local hospital, working out at a recreation center at least once a week, and taking a ceramics class.
- Kirk has been working on a wooden truck craft project.
- Dan has been taking two college classes—a religion course and a philosophy course. He also volunteers at a rehabilitation center and at a library.
- Pat O. was named "Employee of the Month" at Sam's Club where he has been working as a part-time maintenance associate since May 2006.
- José is volunteering at the information desk of a community hospital. He also participates in aquatic therapy three times a week.
- Lisa S. is performing very well as an admissions recruiter for a technical institute and received a substantial raise in September.
- Tom T. was presented by his employer with gifts and a certificate of service, for his sixth anniversary of continuous employment.
- Laurie Modiano, B.S., OTR/L, one of our neurorehabilitation specialists in northern New Jersey, presented *Development of Compensatory Strategies for Treatment of Individuals with Acquired Brain Injury* at the 23rd Annual Conference ("Celebrating Today's Success; Creating Tomorrow's Future") of the New Jersey Association of Community Providers, Inc. at the Atlantic City Convention Center on November 17, 2006.
- More of our staff members are scheduled in December 2006 to take the exam for certification as a brain injury specialist, offered through the American Academy for the Certification of Brain Injury Specialists (AACBIS). For more information on the certification, go to www.aacbis.net/faq.html. You can also call (703) 761-0750, ext. 636, fax (703) 761-0755 or e-mail aacbis@biausa.org.

Spotlight: Robert (Rob) Finger



Spotlight: Rob Finger

Spotlight: Rob, please tell me about yourself.

Rob: I was born and raised in Lancaster, Pennsylvania. I am 54 years old. I have four children who I love dearly, and three grandchildren. My wife, Denise, has been my best friend and my partner for 35 years. We dated through high school. We were high-school sweethearts who got married. I was 19 when I got married, so being married 35 years, we beat the odds. That's probably my biggest accomplishment in life.

Spotlight: What are your children's names?

Rob: We have two girls and two boys. Our oldest daughter is Jennifer; our oldest son is Rob. Claire is our youngest daughter and Andrew is our youngest son. Jennifer has two children and she lives locally in Millersville. Rob has a daughter and they live in North Carolina near Charlotte. Claire lives in Lancaster and Andrew lives in Kansas City, Missouri.

Spotlight: So, they're all spread out.

Rob: Right. Which makes it tough during the holidays.

Spotlight: Yes, it would. Tell me how your disability started.

Rob: Something very simple happened. I was getting in my vehicle and I just simply bumped my head. Actually, it was more like tripping in a parking lot—you're more embarrassed than hurt. I didn't think that much about it. I just rubbed my head a little bit and then the next couple of weeks I wasn't feeling well. I just thought that I was traveling too much because I traveled a lot in my job. And then one day, Denise saw that I was having problems. I walked into a door. She thought I was having a stroke and she called the ambulance to take me to the hospital. They sent me home and said, "There's nothing here." And then the same thing happened two nights later and I was taken back into the hospital and then they found that I did have a subdural hematoma. They did surgery to relieve that and then I was fine. That was 1997. I was fine for awhile and then, at a convention with work in Harrisburg, I slipped on the ice in February 2001 and I hit my head at that time. And, from that point on, I was starting to get extreme migraine headaches—debilitating headaches that would literally knock me to the ground. I never thought that stuff happened. When people said about a headache knocking them to the ground, I just thought, "Nah, that doesn't happen." But it did, and I was getting four or five of those a day. I saw an acupuncturist for quite a while and that relieved it some, and then I was placed on Depakote, which normally is for epilepsy, but they said it also is good for migraine headaches.

Spotlight: You were diagnosed with dementia at one point.

Rob: Yes, that was later. The one doctor thought I had a drug and alcohol problem because I was always looking so woozy and exhibiting some inappropriate behavior, like getting speeding tickets. I was still driving. I don't know how I didn't kill myself or somebody else.

One of the things I do regret is that I quit a job I really, really liked. I was traveling. Of course, it was stressful. It was probably killing me, but I liked it. I got to the point where things were just going screwy and I quit and burned some bridges there. Then, I was working at a couple of other places. At one point, I was working in Connecticut, staying up there during the week and coming home on the weekends. I would drive to an appointment, drive back to my hotel room, and try to blacken the room until my next appointment. I was running back and forth that way. So, that was my life for a while. I don't remember a lot of that. I don't know how I was functioning. The final straw was when I got lost coming home. Luckily, I had a cellphone. I talked with my wife and she and my son drove towards me as I was driving towards Lancaster. We found each other, only by the grace of God, somewhere in Allentown.

My wife brought me home and my son drove the other car home and that's when she said, "That's it. I'm taking your car keys." I haven't driven in over three years and that's frustrating, but that's a whole different story. The thing about my disability that bothers me the most is there is a two and one-half-year period that I don't remember. I don't recall a lot of what I was doing, a lot of what my behavior was. Some of it is funny when Denise or some of my friends tell me what I was doing. Some of it is pretty embarrassing, but it is mostly upsetting that I didn't know that.

Spotlight: You were diagnosed with dementia but then you got better. What do the doctors think may have been the cause of it?

Rob: They don't know. We even went back to the original doctors who did the surgery. But that was during the time when malpractice insurance was a political issue and doctors were

Spotlight... continued (from page 3)

stopping their practices and leaving the state. We had a very difficult time trying to find someone who was capable of treating me. We ended up in Philadelphia at the University of Pennsylvania with Dr. Grossman and he arranged the CT scan, the MRIs and the PET scan. I think it was 2003.

It was a wonderful Christmas present when he called and told Denise that he had diagnosed me with dementia. I was really going downhill and what made matters more alarming for Denise is that she is a nurse; she works at Conestoga View Nursing Home and she was practicing on the dementia unit. On one hand, that was good because she knew all the signs; she knew how to be a caregiver. The bad part is that she knew all the signs and she knew what the end result was and I was a classic, headed toward the end result, which was a pretty bad issue for her I'm sure.

Spotlight: And, to sit here and talk to you today, you would not even know that any of that occurred.

Rob: Most people wouldn't. I needed to go through an evaluation for Social Security. When Dr. Frazer did the evaluation, I could hardly speak. I couldn't write my name. I couldn't put a block into a square hole. I couldn't do any of the cognitive tests or anything that he was giving me. I was put on Social Security Disability and, when I went for the "Ticket to Work" program and went through OVR, they had to evaluate me to see if I was able to participate in the program. Dr. Frazer gave me tests and kept shaking his head and saying, "Rob, you couldn't do this before. I don't understand this." We had gone to see Denise's cousin and they said that, when we left, they cried because Denise had to help me walk around. Then, we saw them a little while ago

and they cried because I was so much better.

Spotlight: Let's switch gears. Tell me about your educational background and your work history.

Rob: I'm a lifelong student—that's what Denise says. When I graduated from high school, I spent a year at Indiana University of Pennsylvania. Had I chosen to go back, they probably wouldn't have let me. But, then I decided to get a job and get married and then I went to night school. I went to Franklin and Marshall College and received my associate's degree. I went to Elizabethtown College to get my bachelor's degree and I went to Lebanon Valley College to get my master's degree. With all of the traveling I've done, I saw the need to have more education, so I have my Ph.D. in international marketing. There is a lot of words you can say for each degree and the last one—my Ph.D.—means "Piled Higher and Deeper," so you see what the rest of them are.

Spotlight: What do you like to do for fun?

Rob: I like listening to music, playing in a folk group that I started 25 years ago at Saint Anthony's Church in Lancaster. This year, to commemorate the 25 years we have been playing, we are putting together a CD that should be coming out some time in November. I have been spending a lot of time in the studio with the recorder because I sing, play the guitar, play percussion and play Q-Chord, which is like a synthesizer. I am helping the guy at the studio do a lot of the mixing, so I am also helping to produce the CD. All that is new stuff for me and it is keeping me active. I am grateful he is allowing me to pal around with him actually. I am able to sit there in awe of what the music industry is like.

Spotlight: Tell me about the kinds of strategies you use in your everyday life to keep yourself on track.

Rob: I've always considered myself a pretty organized person. Before the accident, I could keep everything in my head. I was the type of person who knew people's names, I could repeat their phone numbers, and know exactly where I was going and what I was going to do. I was the type of person who, when I was giving a speech somewhere, would give my presentation without notes. If there were any questions, I would be prepared. But I can't do that anymore. Now, I need to have things written down. I keep my calendar intact; I am not always successful, but I try to always make sure that my calendar is in sync with the calendar we have hanging on the door that Denise writes things on, so that we are not conflicting. Then, I write down daily activities and, as I complete them, I check them off. I use that as a daily success story of how much I can get done or how little I get done. I even have your name and your visit at 9:00 a.m. on Friday. [Rob is referring to Heather Brossman, B.A., his neurorehabilitation specialist with Community Skills Program, who conducted this interview.] When you leave, I check your name off so I don't forget. It's working.

Spotlight: So, tell me what doesn't work; tell me what frustrates you.

Rob: There are a lot of things that frustrate me. First thing is that I am not able to drive. Denise says, "I know that you probably can, but I don't think that you should." The reason is there have been a couple of times when I have lost my sense of direction in areas that I know like the back of my hand. She is concerned about that happening and how I would react in a stressful situation because I've always been a hyper person. If someone cuts me off or gives me the "high sign" or beeps their horn or something like that, she's pretty concerned that I wouldn't be the gentleman that I'm known to be. Because I do not drive, Denise is my

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chauffeur. She comes home from work tired. She has Lupus so she comes home from work fatigued to begin with.

Spotlight: Do you use public transportation sometimes?

Rob: Yes. I was accepted for the Red Rose Access, so that has helped somewhat. The thing that frustrates me is finding out that Denise has Lupus. I always thought that I would be her caregiver and now she is mine. I don't like that. Also, watching Denise having to deal with the insurance companies and doing the finances. Whenever there was a battle, that was always my job. I would do all the taxes, all the balancing of the checkbooks, and things like that, but I can't do that anymore. I can look at it and I can add 2 and 2 and get 4, but I can't do the taxes like I did before and I can't do the finances. Denise has power of attorney over my medical, financial, and social well-being so I'm literally in the palm of her hands, which isn't a bad place to be.

Spotlight: How did you get involved with Community Skills Program?

Rob: Denise got the information in the mail for the "Ticket to Work" program and we went through another agency that wasn't really doing that much and then we were reassigned to OVR. Through OVR, in trying to get me on the "Ticket to Work" program, because I have a brain injury, they contracted Community Skills Program to be involved with my case.

Spotlight: How has the Community Skills Program staff helped and supported you?

Rob: Kathleen did the evaluation. [Rob is referring to Kathleen Meade, B.S., MT-BC, CBIS, client services liaison for Community Skills Program.] I went to a new psychiatrist yesterday and I was trying to find some of the

paperwork. I read her report and it was very thorough, but I don't remember a lot of that stuff, so reading it in black and white was very upsetting to me. Heather, as my neurorehabilitation specialist, you don't let me exaggerate. When I have my head in the sky, you keep it real. You still let me hope, but you keep it real for me and I appreciate that and Denise appreciates that.

Spotlight: Tell our readers where you're working.

Rob: I work part-time as an usher at the American Music Theatre in Lancaster. I take people to their seats and I get to see the shows. I get to interact with the other ushers and have fun with them. There are several of them and we banter back and forth and enjoy humor as well. There's not that much stress to it, so I'm coping very well. I also help clean the restrooms and things like that. It's pretty fun. I enjoy it.

Spotlight: How many days a month do you typically work?

Rob: That varies. We get a schedule for the next month's shows and then we circle all of the shows that we want to work (see, actually) and then we get the schedule back on the number of shows that we are scheduled to work. So, in July, I only worked six shows. In August and September, I worked something like 14 shows. The Christmas shows are in November and December, so I'll probably work more shows during those months. But, January through April, there are very few shows. That's because the theatre puts on their own original productions—the Summer Spectacular and the Christmas Show—which run every day of the week, except Monday and some Sundays, and sometimes there are two shows a day. I average 15 to 20 hours a week in a busy month. That's what I probably will be working in November and December, and a little bit less than that during other months.

Spotlight: What are your future goals and your hopes?

Rob: Well, first of all, even though I like the American Music Theatre, I want to be more gainfully employed. I am 54 years old. I want to make sure that we can maintain our quality of life during our retirement. I also just want to continue seeing my children and my children's children grow. I want to see Denise get well. I want to get well, or better. I never want to lose my passion for life. I don't want to ever give that up. I've always had that, "Hey, if you're involved with Rob Finger, get onboard; you're on for a heck of a ride."

Spotlight: I'd have to agree that that's the case. So, tell me, Rob, do you have any words of wisdom for our *BrainWaves* readers?

Rob: I have a lot of words of wisdom. One of the things I've heard that I keep dear to me is something Winston Churchill said,

"Never give in,
Never give in!
Never, never, never, never—
In nothing great or small,
Large or petty—never give in,
Except to convictions of
Honor and good sense."

That's from Winston Churchill and I would add to that:

Never give in to thinking
God and family are not there
to help.

Spotlight: That's a wonderful thought. Is there anything else that you would like our readers to know?

Rob: One of the things I would highly recommend for anyone who has a disability—especially a brain injury—is to be as active as you possibly can be. When they said I had dementia, they don't know now if it was misdiagnosed. They found out some brain trauma causes dementia, but the brain cells can regenerate themselves. They're finding that out now. Or, they're saying it might have been a viral infection that caused swelling and things like that. So, they don't know.

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But when we first heard that diagnosis, it was whatever I possibly could do to keep my mind as active as possible.

At one point, the only thing I was able to read was the large-print *Reader's Digest*. So, read anything large print that you have. I was doing the Sudoku puzzles—the easy ones are really fun. The difficult ones are *very* difficult and frustrating; it ticks me off. I play chess with the computer—the easy games. I play poker on the computer, not for money; I play the free sites online, so Denise doesn't have to worry about that. I use a program called "EyeQ," which is a brain enhancement program that really helps reading comprehension and exercises the muscles of the mind and your brain. I would seriously encourage you to keep as active as possible, mentally and physically.

Spotlight: Very good advice. Anything else you want to add?

Rob: Rob Finger was always going to live forever. Through all of this, I realize now that I am not invincible and that life is so precious that, at any given split second, it can change. So, enjoy what you have and live each day as you can. Be thankful to family, friends and God for allowing life to happen, and embrace it.

Spotlight: Thank you.

Rob: It sounds like I'm running for political office. I should say, "And lower taxes, too." But, I really believe in guardian angels and I know they are watching over me, especially a couple of good friends who are up there keeping their wings around me. I know that.

[Editor's Note: Many thanks to the Office of Vocational Rehabilitation (particularly, Rachel Hamilton, Rob's counselor) for their support of Rob's rehabilitation services.]

Tips On...

When planning to return to work after sustaining a brain injury, many persons need to consider another job than the one he or she had at the time of the injury. For physical or cognitive reasons, in particular, it may be necessary to think carefully about the essential job tasks and determine if the job is still suitable. After a brain injury, ongoing problems with fatigue may limit the amount of work one can do, and other physical factors may also determine what tasks can be performed (with or without reasonable accommodations) or perhaps should not be attempted. Post-injury cognitive and interpersonal difficulties may also result in a need to consider other kinds of work.

The *Dictionary of Occupational Titles*, last published by the United States Department of Labor (Employment and Training Administration) in 1991, provided many thousands of job descriptions to help people understand the job tasks of specific jobs. However, another edition of the *Dictionary of Occupational Titles* is not planned and many of the job descriptions are obsolete. Moreover, many other jobs in today's labor market developed after the last printing of the *Dictionary of Occupational Titles* and, therefore, are not included in it. The good news is that a relatively new resource, the Occupational Information Network (*O*NET*), is now available online, and can provide useful information when making vocational decisions. *O*NET OnLine* was created for the general public to have broad access to the *O*NET* database of occupational information.

*O*NET OnLine* provides a Summary Report of each job title in the database. The Summary Report provides a brief description of the job, followed by a list of the tasks involved in the job. Information is then provided on the knowledge and skills required to perform the job satisfactorily. Specific information about the abilities needed helps to determine the suitability of a job (for example, wrist-finger speed as would be required for data entry) and the major work activities are specified. Of primary importance to most people is the work context/setting. Information on work styles can be especially helpful in deciding whether a job is a good match for the individual. For example, the *O*NET OnLine* material on general office clerks states that the work styles include cooperation, dependability, integrity, attention to detail, concern for others, independence, self-control, stress tolerance, initiative, and social orientation.

The education, job training, specific vocational preparation and work experience required for the job are specified, as are the interests and work values. But just in case the specific job title does not exactly "hit the mark," a list of related occupations is also included. Wages and employment trends provide an estimate of the availability of the job, the outlook for the future, and the median pay. For example, the pay for a job may sound good, but the projected growth may not. It may state something like, "Projected growth (2004 - 2014)—slower than average (0 - 9%)." Depending on the job seeker's need for sustained employment over a long period of time, this information may satisfy the job seeker or cause him or her to look for another occupation with faster job growth.

To find out more about this source of occupational information, which is under continual development, visit <http://online.onetcenter.org/>.

[Editor's Note: Because of the importance of return-to-work issues, we will include in future issues of BrainWaves more information on resources for vocational planning and job placement.]

Upcoming Events

- The *Community Integration of Persons with Traumatic Brain Injury State of the Science 2007* will be held April 12 and 13, 2007 in the Ritz-Carlton Hotel in Pentagon City, Arlington, Virginia, which is just across the Potomac River from Washington, DC. As stated in the November 10, 2006 *ACRM Enews!*, the goal of this conference is to develop results that will help get a research agenda and lead to new knowledge and partnerships to solve problems in life areas important to persons with TBI. The deadline for the Call for Papers: Abstract Submissions is December 15, 2006. For submission guidelines and information on the conference, visit www.tbicommunity.org/html/training/T7.htm, or call Dr. Karen Hart at (713) 797-5946.
- The *American Congress of Rehabilitation Medicine Brain Injury – Interdisciplinary Special Interest Group (ACRM BI-ISIG) Mid-year Meeting* will be held immediately following the State of the Science conference, at the same location (Ritz-Carlton Hotel in Pentagon City), on April 12 and 13, 2007.
- The *2nd Biennial Vocational Outcomes in Traumatic Brain Injury Conference 2007* will be held May 24-26, 2007 at the University of British Columbia in Vancouver, BC, Canada. Submission and registration information can be found online at www.tbicvancouver.com or by contacting Shelly Johnson at (604) 875-1775.

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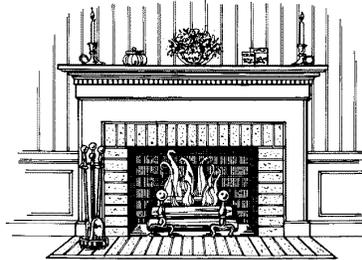
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