Pendleton Uplift Program “PUP” for Seniors

The Pendleton Uplift Program (PUP) for Seniors is a community outreach of the Pendleton Police Department to help seniors remain in their homes longer. We are teaming with the United States Postal Service (USPS), Supper On Us Pendleton (SOUP), and Senior Solutions to check on individuals throughout the Town of Pendleton. The USPS will advise the department if they see a pattern of mail piling up for anyone so we can check on them. SOUP and Senior Solutions will help identify people who could potentially benefit from the program.

PUP is for citizens who do not live in assisted living, nursing homes, or have relatives that are able to visit them frequently. This program is designed to uplift our seniors, helping them to maintain independent living in their own home. Family members or other concerned people can provide the following information and a police officer will check in with that person daily or as requested by phone or in person.

Name (program participant): ________________________________________________
Date of Birth: ___________________ Phone Number(s): __________________________
Address: ________________________________________________________________

Doctor's Name: _________________________ Phone: ____________________________

Do you attend any Senior Centers? (circle one): YES NO
If yes, Name of Center / Phone: _____________________________________________

Are there certain days you attend the Senior Center or any other pre-planned activity?
________________________________________________________________________

Live Alone? YES NO If no, who lives with you? _________________________________

Are you able to walk? YES NO Please list any physical impairments: ____________
Vehicle Make: ____________________ Model: ____________________________

Year: __________________ Color: _______________________________________

Animals at the Residence: ____________________________________________

Special Instructions or Notes: _________________________________________
_____________________________________________________________________
_____________________________________________________________________
_____________________________________________________________________

Emergency Contacts

Name (Print): _________________________________________________________
Address: _____________________________________________________________
Phone Number(s): _____________________________________________________
Email Address: _________________________________________________________
Keyholder: YES NO

Signature: _____________________________________________________________

Name (Print): _________________________________________________________
Address: _____________________________________________________________
Phone Number(s): _____________________________________________________
Email Address: _________________________________________________________
Keyholder: YES NO

Signature: _____________________________________________________________

Name (Print): _________________________________________________________
Address: _____________________________________________________________
Phone Number(s): _____________________________________________________
Email Address: _________________________________________________________
Keyholder: YES NO

Signature: _____________________________________________________________
If no contact is made with the individual on PUP, the officer will contact the emergency contacts list for a key to be brought to the residence to ensure the welfare of the individual. All individuals in the PUP, or their representative, will need to complete a waiver that would allow officers the right to enter the residence if contact cannot be made with the individual or their emergency contacts. Officers will use the totality of the circumstances in determining whether or not the door should be breached. Individuals interested in signing up for the program should contact the Pendleton Police Department at (864) 646-9409 referencing the Pendleton Uplift Program for Seniors.

SWORN TO AND SUBSCRIBED before me
This________Day of __________________, 20__

__________________________________
Notary Public for the State of South Carolina
My Commission Expires:________________