*The Education & Employment program provides case management, education, housing & employment services for individuals facing the impacts of poverty.*

**REFERRAL SOURCE INFORMATION (PLEASE PRINT OR TYPE)**

|  |  |  |
| --- | --- | --- |
| **Date of Referral:** | **Referral Agency:** | |
| **Referral Contact Name:** | | |
| **Contact Number:** | | **Email:** |

**PARTICIPANT INFORMATION**

|  |  |  |  |
| --- | --- | --- | --- |
| **Participant Name:** | | | |
| **Phone #:** | | | **Email:** |
| **Best way to contact participant to schedule an initial screening:** | | | |
| Participant Phone  Participant Email | Referral Contact Phone  Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | |
| **Current Address/Location:** | | | |
| **Education Level:**  High School Diploma GED Trade School College | | | |
| **Documents you have:**  Social Security Card  Photo ID/Driver’s License  Birth Certificate  Medical Insurance Card | | | |
| **Benefits/Income you have:**  SNAP  MEDICAID  MEDICARE  VA Related Sources  Employment  Unemployment  SSI  SSD  Pension  Child Support | | | |
| **Areas the participant wants to work on:** | | | |
| **JOB RELATED**  Resume Development  Job-Search Assistance  Interview Preparation  Ongoing Job Coaching once employed | | **BASIC LIFE SKILLS**  Time Management Skill-Building  Conflict Resolution Skill-Building  Health Habit Exploration and Development  Computer Skill-Building | |
| **EXPERIENCE DEVELOPMENT**  Volunteer experience  Employment Connection  Transportation Assistance  Case Management Services | | **Housing related**  Credit Development  Budgeting Skills  Landlord Connection | |

|  |  |  |
| --- | --- | --- |
| **Referral Agent Signature** |  | **Date** |
| **Participant Signature** |  | **Date** |