THE VILLAGE – TRANSITIONAL HOUSING PROGRAM REFERRAL FORM

BASIC ADMISSION CRITERIA	• 18-23 years old and a former foster care or homeless youth. • Youth must be committed to developing and improving self- sufficiency skills. • Youth must be willing to work, attend school and supervise oneself without intervention. • Youth must complete an intake interview with The Village program staff • Youth must be homeless or at-risk of homelessness upon entry
Submit the completed form to village@impowerfl.org. For more information, call the Outreach Specialist at 407-478-4034, Ext. 201	

CLIENT INFORMATION:		
Client Name:	DOB:	Age:
Current Address:		
Contact Number:	County:	
Email Address:		
Current Housing Status: □ Homeless □ At risk of homelessness		

CLIENT DEMOGRAPHICS:	
Gender: □ Male □ Female □ Other	**Preferred pronoun:**
If Other, specify:	
RACE	
□ Black/African American □ White □ Asian □ American Indian/Alaska Native □ Native Hawaiian □ Pacific Islander □ Other	
ETHNICITY	
□ Hispanic/Latino □ Non- Hispanic/Latino	

LIFE SKILLS AND EMPLOYMENT INFORMATION:	
Currently attending school? □ Yes or □ No	Currently employed? □ Yes or □ No
School Name: _____	If not employed, do you want to work? □ Yes or □ No
Current Grade: _____	Place of employment: _____
Expected graduation date: _____	Length of employment: _____

REFERRAL SOURCE INFORMATION:	
Referral Source (Name):	Referral Date:
Phone:	Email:
Referring Agency/Organization:	
OTHER INVOLVED AGENCIES:	

Case Manager:_____ Agency:_____ Phone:_____

Therapist:_____ Agency:_____ Phone:_____

DJJ Worker Name:_____ Phone:_____

Psychiatrist Name: _____ Phone: _____