



The Department of Human Services in Partnership with the Departments of Economic Development, Education, Human Rights, Management, and Workforce Development.

REFERRAL TO COMMUNITY AGENCIES

TO:	Agency	Date
	Street	City
	State	Zip Code
		Telephone Number ()

ATTENTION: _____

PROMISE JOBS is referring the client listed below to your agency. If we can be of any help or if you have any questions, please call.

Last Name	First Name	Middle
Street and Number		County
City	State	Zip Code
Birth Date (MM/DD/YY)	Social Security Number	
Services Requested:		

PROMISE JOBS Representative		Telephone Number ()	
Street	City	State	Zip Code

Please see the attached *Consent to Obtain and Release Information*, when needed to obtain medical and mental health information.