



Referral Form

EVERY CHILD DESERVES A HOME! That is why Family Promise of Tulsa County's mission is to engage our communities and local organizations in ending homelessness - one family at a time. Family Promise of Tulsa County is a nonprofit, multi-faith organization affiliated with National Family Promise. We provide shelter, meals, and support to homeless children and their families. We initiate coordinated efforts that bring communities together to help homeless families regain their housing, independence, & dignity.

Criteria: Due to the nature of this program and its dependency on volunteers and the use of congregational facilities, Family Promise Guests must meet the following conditions. Please check the boxes to indicate all adults in the referred family meets the following criteria:

- Does not have history of violent or sexual crimes
- Is not involved in current domestic violence that can pose a threat to the family and other Family Promise constituents.
- Able to pass a drug screening and commit to a drug & alcohol-free environment
- Willing to commit to a drug-free environment but not able to pass a drug screen because of:

***While we do screen for THC, we review each family profile on a case by case basis and may approve/accept a family with a positive THC drug screen if they can agree to remain drug free throughout the duration of the program.*

Date: _____ Referring Agency: _____ Submitted by: _____

Head of Household:

Name: _____ DOB: _____ Age: _____ SSN: _____ - _____ - _____
 Phone: _____ Email: _____

Other Adults in Family (over the age of 18):

Name: _____ DOB: _____ Age: _____ SSN: _____ - _____ - _____
 Name: _____ DOB: _____ Age: _____ SSN: _____ - _____ - _____
 Name: _____ DOB: _____ Age: _____ SSN: _____ - _____ - _____

Child(ren):

Name: _____ DOB: _____ Age: _____ SSN: _____ - _____ - _____
 Name: _____ DOB: _____ Age: _____ SSN: _____ - _____ - _____
 Name: _____ DOB: _____ Age: _____ SSN: _____ - _____ - _____

Family Narrative & Reason for Referral: (Please include current living situation) _____

Office Use Only

<input type="checkbox"/> Accepted:	<input type="checkbox"/> Wait List:	<input type="checkbox"/> Denied:	<input type="checkbox"/> Declined:
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Please email the referral for to: casemanager1@familypromisetulsa.org and director@familypromisetulsa.org

You can also submit a referral online through our website: www.familypromisetulsa.org

**Submitting this form does not guarantee acceptance into the program.*