

# Project One Intake

Date \_\_\_\_\_

Name																							
Team																							

Birthdate																							
DL																							

Birth State																							
DL St																							
Valid																							
Y																							
N																							
State																							
City																							
Past Living Situations																							
#Moves last 5 years																							
#Y																							
RS																							

Family of Origin. Parents. Foster, adopted? Brothers and Sisters. 0-5 when appropriate


Marital  Single  Married  Separated  Divorced  Partnered Date \_\_\_\_\_

Children's names, gender, ages, other parent's name, visitation, support payments, etc.


Education background: Schools, Degrees, etc.


Work type. How long. Work desires/goals, etc.


Medical [M], Physical [P], Dietary [D], Learning Disability [LD]



Credit Card [CC], Loan Co. [LC], Court Fees [CF], School Loans [SL], Other

What	\$	Owed to

What	\$	Owed to

Felony [F] T1 T2 T3 #Arrests \_\_\_\_\_

Type	Date	City	ST	Comments

Type	Date	City	ST	Comments

Community Resources

United Way	Salvation Army
Mental Health	Food banks

Catholic Charities	211
Churches	

Friend Names + Comments


Fentanyl Heroin Meth Scripts, etc., Smoke Y N

What	Last Used	XDWM	#Y	Comment
Alcohol				

What	Last Used	XDWM	#Y	Comment

Good habits hobbies, fun things


### Your Goals

<b>Jesus, Family, Friends, Education, Work Skills, Money, Addictions</b>

<b>Trial Period in days</b>	
<b>Homeless/Re-Entry</b>	
<b>Employment Info</b>	<b>Approx. Salary \$</b>
<b>Money/budget</b>	
<b>Medical Insurance</b>	

Full name & date

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Project One team signatures

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