



Housing Specialist Referral

Manifest Wellness

608-291-3676

Full Name:

Date of Birth:

Gender Identity:

Preferred Pronouns

Address:

Phone Number:

Email:

Telehealth or in person?

Preference of location of services?

Referring Agency/Organization:

Referrer's Name:

Referrer's Phone:

Referrer's Email:

Are you currently experiencing homelessness? (Select one)

- a) Yes, I am homeless
- b) No, I am not homeless

Notes:

If not, what is your current living situation? (Select one)

- a) Renting

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- b) Owning
- c) Living with family/friends
- d) Other (please specify)

Notes:

How long have you been experiencing homelessness? (Select one)

- a) Less than 1 month
- b) 1-3 months
- c) 3-6 months
- d) 6 months to 1 year
- e) More than 1 year

Notes:

What type of housing are you seeking? (Select all that apply)

- a) Emergency shelter
- b) Transitional housing
- c) Permanent supportive housing
- d) Affordable rental housing
- e) Group home
- f) Sober living
- g) Other (please specify)

Notes:

What are the barriers you face in obtaining housing? (Select all that apply)

- a) Lack of affordable housing options
- b) Insufficient income
- c) Poor credit history

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- d) Criminal history
- e) Discrimination based on race, gender, or other factors
- f) Lack of rental history
- g) Other (please specify)

Notes:

What is your current source of income, if any? (Select all that apply)

- a) Employment
- b) Government assistance (e.g., SNAP, TANF)
- c) Disability benefits
- d) Social Security
- e) Retirement/pension
- f) Other (please specify)
- g) None

Notes:

What is your monthly income, if applicable?

- a) Less than \$500
- b) \$500 - \$1,000
- c) \$1,000 - \$2,000
- d) \$2,000 - \$3,000
- e) More than \$3,000
- f) Not applicable (no income)

Notes:

How are you with budgeting income? Do you have a payee?

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Are you in need of assistance or resources to increase your income or improve your financial situation? (Select one)

- a) Yes, I need assistance
- b) No, I do not need assistance

Notes:

Do you have any specific preferences or requirements for your housing situation? (e.g., accessibility features, proximity to services, etc.)

What is your preferred location for housing? (Select all that apply)

- a) Urban area
- b) Suburban area
- c) Rural area
- d) Anywhere available
- e) Other (please specify)

Notes:

What is your timeline for finding housing, if applicable? (Select one)

- a) ASAP
- b) Within 3 months
- c) Within 6 months
- d) Within 1 year
- e) More than 1 year

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Do you have any other considerations or information you would like to share regarding your housing goals, needs, or barriers?

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