# QUESTIONNAIRE
## For Those Who Are Referring Clients To Perspectives

Applicant Name: _____ Date: _____

Please be aware that if your client is currently staying or living with family or friends they are ineligible to be interviewed for Perspectives housing based on our requirements to follow the guidelines set forth by HUD. If you have any questions about these requirements, please call our Intake Manager at (952) 926-2600 x19.

**Please complete the following questionnaire as this will assist us in making sound decisions as regards your client.**

1. Please give specific data regarding your client that shows she/he is serious about their sobriety. How have you verified their sobriety and what was the last date of verification.

2. Please confirm in cases of child protection that your client will be reunited with their child/children and approximately when they will be reunited.

3. Please list your concerns as regards any specific challenges this client has and your assessment of their ability to progress.

4. Please sign, with your title, and date.

Please complete your answers as soon as possible and fax (952) 926-9395 to Intake Manager so that your client's application is complete.

_____ _____
Signed by Title

_____ _____
Phone Agency

**Perspectives, Inc.**
**Attn: Intake Manager**
**Fax 952-926-9395**