



Hosting Churches

First United Methodist
Episcopal Church of the Ascension
First Presbyterian Church
Christ United Methodist
First Baptist Church
Spring Hill Church of Christ
Breiel Blvd First Church of God
Healing Word Assembly of God
Yankee Road First Church of God

SHALOM Intake Questionnaire

Intake Date _____ Intake Person _____ What County are you from _____

Print Full Name _____ SSN _____

Gender _____ Race _____ Birth date _____ Are you a Veteran _____

Did you graduate from high school _____ What is the highest grade of school you attended _____

Are you interested in obtaining a GED _____ Why are you homeless _____

How long have you been homeless _____ How did you get here _____

Do you have a case worker _____ Name _____ Agency _____

Have you ever been in jail _____ Where _____ Offense & Date _____

Do you have any warrants _____ Verify no warrants @ 425-7700 _____

Are you working _____ When did you work last _____ Where _____

What job skills do you have _____

Do you receive any of the following: Food stamps \$ _____ Medicaid \$ _____ Cash \$ _____

Do you have problems with: Substance abuse _____ Mental health issues _____ Physical _____

Explain: _____

Are you taking any medication _____ What kind _____

Do you have a doctor _____ Name _____ Phone # _____

We must have an emergency contact : _____ *Phone #* _____

When did you last talk with this person _____

Client Signature _____ Date _____

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