**This form is to be used to gather information prior to scheduling an appointment on Bridging’s online referral and scheduling website:** [**http://appointmentquest.com/provider/2120069436**](http://appointmentquest.com/provider/2120069436)

CLIENT REFERRAL FORM

Information needed to schedule an appointment

*If you leave some areas blank, Bridging may not be able to process this form.*

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | Appointment Type | In Person | | | | VIRTUAL  Google Duo FaceTime Staff Shops for Client | | | | | | |
|  | Preferred Bridging Location (select one) | Bloomington | | | | Roseville | | | | | | |
|  | Appointment Time | 9:00 a.m. | | | | 10:30 a.m. | | | | | | |
|  | AGENCY NAME | **MEDICA** | | | | | | | AGENCY ID:  **N/A** | | | |
|  | Moving/pick up of items | Bridging to Deliver | | | | Client/agency to arrange | | | | | | |
|  | Program/Department | **N/A** | | | | | | | | | | |
|  | Caseworker Name | Click or tap here to enter text. | | | | | | | | | | |
|  | Caseworker Phone Number | Click or tap here to enter text. | | | | | | | | | | |
|  | Caseworker email | Click or tap here to enter text. | | | | | | | | | | |
|  | http://www.appointmentquest.com/rs/tp.gifClient First Name: | Click or tap here to enter text. | | | | | | | | | | |
|  | http://www.appointmentquest.com/rs/tp.gifClient Last Name: | Click or tap here to enter text. | | | | | | | | | | |
|  | Client Preferred Name/ Pron |  | | | | | | | | | | |
|  | http://www.appointmentquest.com/rs/tp.gifClient Date of Birth: | Click or tap to enter a date. | | | | | | | | | | |
|  | http://www.appointmentquest.com/rs/tp.gifClient Address (include apartment #): | Click or tap here to enter text. | | | | | | | | | | |
|  | http://www.appointmentquest.com/rs/tp.gifClient City: | Click or tap here to enter text. | | | | | | | | | | |
|  | http://www.appointmentquest.com/rs/tp.gifClient State: | Click or tap here to enter text. | | | | | | | | | | |
|  | http://www.appointmentquest.com/rs/tp.gifClient Zip Code: | Click or tap here to enter text. | | | | | | | | | | |
|  | http://www.appointmentquest.com/rs/tp.gifCounty Client Lives In: | Click or tap here to enter text. | | | | | | | | | | |
|  | Building- Client access code | Click or tap here to enter text. | | | | | | | | | | |
|  | http://www.appointmentquest.com/rs/tp.gifPrimary Client Phone Number: | Click or tap here to enter text. | | | | | | | | | | |
|  | http://www.appointmentquest.com/rs/tp.gifAlternate Client Phone Number: | Click or tap here to enter text. | | | | | | | | | | |
|  | Client Email Address | Click or tap here to enter text. | | | | | | | | | | |
|  | http://www.appointmentquest.com/rs/tp.gifHas client accessed Bridging services in the past?: | YES  NO | | | | | | | | | | |
|  | http://www.appointmentquest.com/rs/tp.gifClient Race/Ethnicity: | African | | | American Indian or Alaska Native ☐ | | | | | Asian or Pacific Islander ☐ | | |
| Black or African American | | | Hispanic | | | | | Mixed Racial Background | | |
| White | | | Other | | | | | Prefer not to answer | | |
|  | http://www.appointmentquest.com/rs/tp.gifClient Marital Status: | Single Separated Widowed or Divorced | | | | | Married | | | | | |
|  | http://www.appointmentquest.com/rs/tp.gifClient Sex: | Transgender | Male | | | | Female | | | | | Prefer not to answer |
|  | http://www.appointmentquest.com/rs/tp.gifClient Age: | Click or tap here to enter text. | | | | | | | | | | |
|  | http://www.appointmentquest.com/rs/tp.gifHousehold Size: | Click or tap here to enter text. | | | | | | | | | | |
|  | http://www.appointmentquest.com/rs/tp.gifAge of ALL others in household: | Click or tap here to enter text. | | | | | | | | | | |
|  | http://www.appointmentquest.com/rs/tp.gifHow many children in the household are 17 and under?: | Click or tap here to enter text. | | | | | | | | | | |
|  | http://www.appointmentquest.com/rs/tp.gifNumber of Bedrooms: | Click or tap here to enter text. | | | | | | | | | | |
|  | http://www.appointmentquest.com/rs/tp.gifHome Visit Completed: (Date) | Click or tap to enter a date. | | | | | | | | | | |
|  | http://www.appointmentquest.com/rs/tp.gifCompleted Client Checklist: | Click or tap here to enter text. | | | | | | | | | | |
|  | http://www.appointmentquest.com/rs/tp.gifClient Yearly Income: | Under $5 000 | | $5 000 - $9 999 | | | | $10 000 - $14 999 | | | | |
| $15 000 - $20 000 | | $20,000-24,999 | | | | $25,000-29,999 | | | | |
| $30,000-$34,999 | | $35,000-39,999 | | | | Over $40,000 | | | | |
|  | http://www.appointmentquest.com/rs/tp.gifWas the client homeless?: | YES NO | | | | | | | | | | |
|  | http://www.appointmentquest.com/rs/tp.gifFor how long was the client homeless?: | Less than 1 month | | 1-3 Months | | | | 4-12 Months | | | | |
| Over 12 months | | Was not homeless | | | |  | | | | |
|  | http://www.appointmentquest.com/rs/tp.gifWhat brought the client to Bridging?: | Disability | | Domestic Violence | | | | Foreclosure/Loss of Home | | | Immigration | |
| Job Loss | | Leaving Prison | | | | Medical Bills | | | Mental Health | |
| Natural Disaster | | Persistent Low Income | | | | Substance Abuse | | | Bed Bug Infestation | |
|  | http://www.appointmentquest.com/rs/tp.gifDoes your client understand that the furniture is used?: | Click or tap here to enter text. | | | | | | | | | | |
|  | http://www.appointmentquest.com/rs/tp.gifDoes your client understand that the furniture must be moved within 48 hours?: | Click or tap here to enter text. | | | | | | | | | | |
|  | http://www.appointmentquest.com/rs/tp.gifWill bring an interpreter?: | YES NO | | | | | | | | | | |
|  | Will bring assistant required due to mental health or physical limitations? | YES  NO | | | | | | | | | | |
|  | Preference Form completed and submitted | YES  NO | | | | | | | | | | |
|  | http://www.appointmentquest.com/rs/tp.gifWho is paying for the appointment?: | Referring Agency | | | | | | Client or Other Paying Referring Agency | | | | |
| Client Paying Bridging | | | | | | Other Paying Bridging | | | | |
|  | If OTHER, who is paying for the appointment? | **Medica paying for all costs; see authorization letter** | | | | | | | | | | |
|  | Who is paying for Delivery? | |  |  | | --- | --- | | Referring Agency | Client or Other Paying Referring Agency | | Client Paying Bridging | Other Paying Bridging | | | | | | | | | | | |
|  | If OTHER, Who is paying for Delivery? | **Medica paying for all costs; see authorization letter** | | | | | | | | | | |
|  | Is there an Elevator in the building? | YES  NO | | | | | | | | | | |
|  | What floor does the client live on? |  | | | | | | | | | | |
|  | http://www.appointmentquest.com/rs/tp.gifAdditional Notes: | Click or tap here to enter text. | | | | | | | | | | |
|  | http://www.appointmentquest.com/rs/tp.gifUSED Beds Needed Household size of 1 - 4 = 1 bed, 5-6 = 2 beds, 7+ = 3 beds): | Click or tap here to enter text. | | | | | | | | | | |
|  | NEW Beds/Frames needed? (YES/NO) | **N/A** | | | | | | | | | | |
|  | Who is paying for NEW Beds and Frames? | Referring Agency | | | | Client or Other Paying Referring Agency | | | | | | |
| Client Paying Bridging | | | | Other Paying Bridging | | | | | | |
|  | If OTHER who is paying for NEW items? | **N/A** | | | | | | | | | | |
|  | (Prices include sales tax) If AGENCY is paying is Agency tax exempt? | **N/A** | | | | | | | | | | |
|  | NEW Twin Mattress and Platform Frame Set ($199.08 each) | **N/A** | | | | | | | | | | |
|  | NEW Full Mattress and Platform Frame Set ($248.54 each) | **N/A** | | | | | | | | | | |
|  | NEW Queen Mattress and Platform Frame Set ($283.17 each) | **N/A** | | | | | | | | | | |