

■ ASSESSMENT OF NEEDS

Thank you for being here. Basic needs such as food, money, safe housing, and employment form the foundation for success in everyday tasks. This questionnaire is designed to identify any unmet needs you may have. As your RC, I provide support and resource brokering in these areas. Please answer these questions, and feel free to add anything I may have missed. Thank you for your time.



Name:

Phone Number/Email:

Do you have any urgent need in the following categories:

Transportation

Phone/Email

Crisis Resources

Check next to any of the following that you would like to work on together:

- Unemployment
- Housing
- Employment Search
- Resume
- Bus Pass
- Rental Assistance
- Transportation
- Food Boxes/Pantry
- Overnight Shelter
- Treatment Resources/funding
- Food Benefits
- TANF
- Childcare
- Disability
- Child Support
- Clothing voucher
- Toiletries
- Advanced Care Directive

Financial

- Are you currently employed? Yes / No
- If not, do you have a source of funding for daily needs? Yes / No
- Are you able to work full time? Yes / No
- If not, are there any important details to know? Yes / No

- Do you have active bank account in good standing? Yes / No
- Do you need help finding or applying for a bank account? Yes / No

Sustenance

- Do you have access to food, food banks, or food resources? Yes / No
- Do you have a reusable water bottle? Yes / No
- Have you eaten today? Yes / No
- Would you like help finding a hot meal for today? Yes / No

ASSESSMENT OF NEEDS

continued



Logistics

- | | |
|--|----------|
| Do you have a driver's license or state ID? | Yes / No |
| If you need to apply, do you have your Social Security card, passport, or other official documents needed? | Yes / No |
| Do you have a physical address or PO Box to receive mail? | Yes / No |
| Would you like to speak to the post office regarding "general delivery" options? | Yes / No |

Transportation

- | | |
|---|----------|
| Do you have access to transportation to work or an interview? | Yes / No |
| If not, can you make it treatment as needed? | Yes / No |
| Do you live near public transportation? | Yes / No |
| Are there accomodations or limitations I should be aware of? | Yes / No |

Getting to Know You

Tell me about job history, work skills, or tasks of daily living you are comfortable with:

Do you have a resume and/or references?

List a few couple of skills of interests that we explore more:

■ CRISIS CARE PLAN



- The person I can call in a crisis:
- Meeting I can attend:
- Place I can safely sleep:
- Local Library:
- Closest Hot Meal:
- Times/Locations for Food Box pick-up:
- Places to donate plasma for same day payments:
- Staffing Agencies:
- Inexpensive hotel overnight:
- Places to shower/work out/ swim:
- Crisis support line: 988
- Where to go if I have any thoughts of self-harm:
- Next appointment with RC: