



AICHO

American Indian Community
Housing Organization

Giiwe Mobile Team Referral

Date: _____

| Name | Date of Birth | Gender | Social Security Number |
|------|---------------|--------|------------------------|
| | | | |

Family Situation (check one):

A family with children: One or two adults living with dependent children. Ages of children in home _____

A couple: Two adults with no children living with them.

A single adult: An individual over the age of 21.

An unaccompanied youth: An individual age 21 or under not living with parents or guardians.

Best Contact Method: _____

Current Living Situation: _____

Reservation _____

Meets Giiwe Mobile Team Eligibility Criteria:

Long-term homeless: Lacking a permanent place to live continuously for one year or more or at least four times over the last three years.

Not eligible or connected to housing and support services at this time, including HRA programs, transitional housing, case management services, etc.

Has no income or very little income.

- Demonstrated history of barriers to housing stability and support services.
- Previous evictions
- Criminal Background that prevents Section 8 eligibility
- Substance Abuse
- Disability
- Mental Health/Illness
- Domestic Abuse Situation

Please explain the barriers checked above and any other relevant information you feel makes you an appropriate candidate for the long-term supportive housing program you are applying for.

Please describe the types of services you would like to receive from our program. There is a program requirement for participation. Services can include housing, job seeking, custody, etc.

Team Member Following Up: _____ Date: _____

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