

**FUTURES UNLIMITED, INC.**

**REQUEST FOR PROGRAM SERVICES**  
**Confidential Case Information**

**General Information**

Name \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_  
Street City Zip

Birthdate \_\_\_\_\_ Social Security No. \_\_\_\_\_

Phone Numbers: Home \_\_\_\_\_ Cell \_\_\_\_\_

Alternate Contact: Name \_\_\_\_\_ Number \_\_\_\_\_

Who referred you to Futures Unlimited? \_\_\_\_\_

Have you received services from Futures Unlimited before? \_\_\_\_\_

If so, when? \_\_\_\_\_ If so, under what name? \_\_\_\_\_

**Services Desired**

*Futures Unlimited, Inc. provides services to Livingston County residents with disabilities or functional limitations, to assist them in achieving independence and to develop skills needed to live and work successfully in our community.*

Do you feel that you may have a functional limitation or disability?

Yes \_\_\_\_\_ No \_\_\_\_\_ Unsure \_\_\_\_\_ If so, please identify \_\_\_\_\_

Do you have (or can you get) anything to document this? Yes \_\_\_\_\_ No \_\_\_\_\_

What services are you seeking?

- \_\_\_\_ Help with getting a job in the community
- \_\_\_\_ Vocational work training
- \_\_\_\_ Classroom training
- \_\_\_\_ Help with community resources
- \_\_\_\_ Other \_\_\_\_\_

**Transportation**

Do you have a valid driver's license? Yes \_\_\_\_\_ No \_\_\_\_\_

Do you have your own vehicle? Yes \_\_\_\_\_ No \_\_\_\_\_

Do you need assistance with transportation? Yes \_\_\_\_\_ No \_\_\_\_\_

**Education**

Highest Grade Completed \_\_\_\_\_ Are you still in school? \_\_\_\_\_

Did you take classes in Regular Education? \_\_\_\_\_

Did you take classes in Special Education? \_\_\_\_\_

High School(s) Attended \_\_\_\_\_

Advanced Education or Training \_\_\_\_\_

**Employment Experiences**

Please list any past **employment** or **volunteer work**. This information will assist us in determining which programs might be best for you.

Where worked \_\_\_\_\_

Job title \_\_\_\_\_ Dates \_\_\_\_\_ to \_\_\_\_\_

Reason for leaving \_\_\_\_\_

Where worked \_\_\_\_\_

Job title \_\_\_\_\_ Dates \_\_\_\_\_ to \_\_\_\_\_

Reason for leaving \_\_\_\_\_

Where worked \_\_\_\_\_

Job title \_\_\_\_\_ Dates \_\_\_\_\_ to \_\_\_\_\_

Reason for leaving \_\_\_\_\_

Where worked \_\_\_\_\_

Job title \_\_\_\_\_ Dates \_\_\_\_\_ to \_\_\_\_\_

Reason for leaving \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_