



Families and Communities Together, INC.

Re-Direct Referral Form

Re-Direct Referral Guidelines

- 1. Only Probation & Parole can refer a client to this service!**
To refer a client to the FACT, Re-Direct Project please fill out referral form.
2. Completed form should be should be emailed to the FACT office at scc@mcafct.org. If you need to complete a hard copy, they may be faxed by the officer to the FACT Office at 573-221-1606.
3. Client Surveys must be completed before service may be secured. The surveys can be found on the FACT website at: <http://www.mcfact.org/Re-Direct.html>
4. For any ongoing services client must meet with the Re-Direct staff to complete an opportunity plan.
5. For more information or questions go to the FACT website at: www.mcfact.org or email scc@mcfact.org

Probation & Parole Officer Information

Officer Name: _____ Date: _____
County: _____ Title: _____
Email Address: _____ Telephone Number: _____

Re-Direct Client Information (Questions with * are optional)

Client Name: _____ County of Residence: _____
DOC Number: _____ Date of Birth: _____ *Telephone Number: _____
Specific need/Resource request: _____
Employment Status: FT: _____ PT: _____ Unemployed: _____ Disabled: _____ Unknown: _____
Is this an ongoing need? Yes _____ No _____ (If yes please explain)

For FACT Staff Use Only

Date Received: _____ Interviewed? Yes _____ No _____ If yes, date of interview: _____
Services: _____ Amount \$: _____ Date: _____
Notes: _____

