

2022 NORTHEAST KINGDOM COMMUNITY ACTION

COMMUNITY RESOURCE GUIDE



*To empower all generations in the Northeast Kingdom to grow,
prosper and thrive.*



Northeast Kingdom Community Action Program Directory

ST JOHNSBURY PCC
115 Lincoln Street
St Johnsbury VT 05819
802.748.6040

ISLAND POND OUTREACH
P.O. Box 430
Island Pond, VT 05846
802.723.5245

NEWPORT OUTREACH
70 Main Street
Newport, VT 05855
802.334.7316

CANNAN PCC
253 Gale Street
Canaan, VT 05903
802.266.7134

NEWPORT PCC
371 Main Street
Newport, VT 05855
802.334.7316

NEWPORT THRIFT STORE
55 Seymour Lane
Newport, VT 05855
802.334.4072

**NEWPORT COMMUNITY
& SOCIAL JUSTICE**
71 Seymour Lane
Newport, VT 05855
802.334.8224

Children's Integrated Services (CIS)

NEKCA -Office
Early Childhood Intervention and
Family Support
1.888.NEKCA4

Northeast Kingdom Human Services
Early Childhood and Family Mental Health
802.334.6744

Umbrella
Specialized Child Care Services
802.748.1992

Northern Counties Health Care
Maternal and Child Health Services
802.748.8116

Headstart/Child Family Development Program (CFDP)

Central Office 525.3362 ext. 203

Headstart Partnership Program S.
Cynthia Fryman(279.8003)
cfryman@nekcavt.org
115 Lincoln St., St Johnsbury 05819
P: 748.3201

Headstart Partnership N.
Cynthia Fryman(279.8003)
cfryman@nekcavt.org
34 Farrant St., Newport 05855
P: 995.2061

Lyndonville CFDP
Emily Frazier
Efrazier@nekcavt.org
1913 LynBurke Rd., Lyndonville 05851
P: 626.8616

Hardwick CFDP
Lee Ann Lee
61 Church St., Hardwick 05843
P: 472.5496
F: 472.7068

North Troy CFDP
Muguette Limoges
mlimoges@nekcavt.org
155 North Pleasant St., N. Troy
05859
P: 988.2262

Island Pond CFDP
Shannon O' Rourke
sorourke@nekcavt.org
36 Cross St., Island Pond 05846
P: 723.6231

Newport CFDP
Courtney Sanville
34 Farrant St., Newport 05855
P: 995.2058

Albany CFDP
Noni Moore
nmoore@nekcavt.org
351 Main St., Albany 05820
P: 755.6811/755.6351

Barton CFDP
Meredith Morgan
mmorgan@nekcavt.org
130 Kinsey Rd., Barton 05822
P: 525.6291

Gilman CFDP
Heather Thomas
hthomas@nekcavt.org
19 Parish St., Gilman 05904
P: 525.6291

Find NEKCA on the Web:
<https://www.nekcavt.org/>

Find NEKCA on Facebook:
NEKCAParentChildCenterSt.Johnsbury
NEKCA Parent Child Center - Newport

Essential Services

Food

- *Marketplaces* 4 locations (St. Johnsbury, Canaan, Island Pond, Newport) provides individuals and families with food and household items at no cost. Pet food is available at most locations. No income requirements are needed to access the food shelves, however for Federal Commodities food distribution a verbal verification the person/family meets USDA income guidelines is required. See attached form for the current income guidelines.
- *Lincoln Street, St. Johnsbury Boutique and Marketplace* provides community members with a unique shopping experience. Every member comes in and can shop for their own food and clothing needs. Members will be provided a membership card to use in the store. All items are free of charge.
- *Farm to Families Farmers Market coupons* provide fresh, local fruits and vegetables to those who receive WIC and/or income eligible participants. Families can receive \$30 valid for one market season and expire October 31. See attached form for current guidelines. Limited vouchers are typically available from the end of June.
- Assistance with 3SquaresVT applications.
- Turkey basket program varies by year. Information becomes available late October/early November. This is free of charge and open to everyone.
- *Mobile Van Unit* Call St Johnsbury or Newport offices to have our mobile essential service (food, clothing, family supplies) come to your town or school.

Utilities and Fuel

- *Supplemental Fuel Assistance* (also known as LiHEAP) is a state program that provides fuel assistance to income eligible homeowners and renters who are within 200% of the federal poverty level. Participants can apply anytime of the year, however we strongly encourage applicants to submit their application before August 31 or they will see a reduction in benefits. We provide application assistance.
- *Crisis Fuel* provides homeowners and renters who are income eligible with fuel assistance. This can also include paying for electricity connection if the heating system is electric dependent. For afterhours emergencies call 1-866-331-7741. This program runs between November 15th and April 15th.
- *Furnace repair/replacement* program provides eligible homeowners within 200% of the FPL with free furnace repair or replacement. Call your local NEKCA office for details. This is made possible through NEKCA's partnership with NETO. Call 1-877-295-7998 for emergency furnace repair that occurs outside of business hours.

- *Green Mountain Energy Assistance Program*, through Green Mountain Electric and DCF, assists households within 150% of FPL by reducing their monthly bill by 25%. Application can be found at the end of this guide.
- *Power Partners* is a program established by Green Mountain Power serving only Green Mountain Power customers. Limited funds are available to help those who are within 200% of the FPL with past due costs to avoid disconnect. Call to confirm availability.

Housing/Shelter

- *Housing Counseling* Housing counselors assess participant needs and establish housing goals, create a plan to solve problems and overcome barriers. We can help work with landlords and provide information about tenants' rights and responsibilities.
- *Emergency Shelter Apartments* provide temporary emergency apartment housing based on eligibility. Participants work alongside housing counselors to identify barriers and seek permanent housing.
- *Financial Assistance* can support individuals and families with financial assistance to prevent eviction by paying back rent. It can also provide move in costs for those moving from homelessness into housing. Services contingent upon resource availability, income eligibility, and sustainability.
- *Family Supportive Housing* is a voluntary program providing intensive Case Management for families with minor children who also have a prolonged history with DCF, chronic homelessness, etc. Program participation is determined solely by Coordinated Entry status and referred to the Housing Review Team for approval.
- *PATH* is a federally funded program that acts as a bridge for people experiencing housing insecurities to obtain all necessary services to obtain all necessary services in order to support their underlying chronic conditions. Requirements include participants having a dual diagnosis of mental health, substance abuse and chronic homelessness.
- *Rapid Rehousing* Provides 2-year housing vouchers and case management to provide stable housing laying the foundation for long-term housing sustainability.
- *Landlord Support Staff* Collaborates with landlords and participants to provide education and support.
- *Tenant/Landlord Rights 101 Class* is open to anyone seeking guidance and educational information on what VT laws encompass. This includes tenant and landlord rights.
- *Financial Education Classes* Workshops and classes focused on improving financial wellbeing. Learn from a certified counselor about credit reports, credit/debit cards, savings, budgeting, and planning for your future. Every workshop and/or class can be individualized.

Family Services – Parent Child Center Core Services

- *Home Visits* PCC staff provide home visits to families with young children who request home-based support. The frequency and content of visits is determined by family goals and interest.

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- *Family Education Programs* provide education opportunities in a variety of formats and on a range of topics and themes responding to family issues. Educational opportunities are supportive, practically oriented, and empowering.
- *Concrete Supports* provide families access to a welcoming environment which offers support and resources to address the immediate needs of the family and/or contribute to the long-term well-being of the family. *On site Diapers Bank.
- *Community Development* Our staff and families advocate for and contribute to family-centered services and events by taking a supportive role in the promotion, prevention, and early intervention efforts in the community.
- *Playgroups* provide opportunities for parents and children to come together on a regular basis for socialization, peer support, healthy snacks, and information and resource sharing in a developmentally appropriate setting. Playgroups are held twice a week or call 1-855-6NEKCA4 to schedule your own playgroup times or schedule bringing a playgroup to your community! All are welcome!
- *Parent Workshops and Groups* offer a variety of opportunities for families with common experience and interests to gain mutual support in a peer group setting.
- *Headstart/Early Headstart and The Child Family Development Program* offers a wide array of support services to parents and families including education and volunteer opportunities, family literacy activities, and goal identification. In this way, Head Start/Early Head Start nurtures the development of the child within the family, and the family within the community.
Expectant families, and families with children 0-5 may be eligible for Early Head Start and/or Head Start if:
 - The child's family receives Reach-Up or Supplemental Security Income (SSI); or
 - The child is in foster care: or
 - The child's family is without a permanent home: or
 - The child's family meets income eligibility.
- *Employment and Training Coaching (St. Johnsbury location)* is a contract with the state of Vermont. This coach assists and supports those referred from Reach Up throughout the goal setting and goal obtainment process.
- *Children's Integrated Services: Early Intervention and Family Support* provides speech and language services, physical and occupational therapy, and in-home family support. Services are available for children 0-3 and families throughout the NEK. See attached for referral form.
- *Information and Referral* Provide general information about child development and parenting as well as information about local and statewide resources for families. Offers information and resources for the long-term health and wellbeing of children and families by sharing information about health care (insurance programs, medical homes, and related resources). Service is provided through direct referral and follow-up, if requested. PCCs support services to welcome babies into the community.

- *Diaper Banks* Provide participants with diapers (sz NB – 4t/5t pull-ups), wipes, creams, formula, baby gear, and more. Call your local office for more information as item availability varies by location.
- *Thrift Store (Newport)* Provides job training and work experience to individuals from the community. Our store also provides the community with an affordable shopping alternative for clothing of all sizes, Toy household goods and furniture.
- Drive (Newport Only) provides toys to families at Christmas. Donations are accepted year-round.

Economic Equity

- *Micro Business Development Program* Provides technical assistance and training to individuals at or below 80% of Vermont’s median income, who are interested in starting, expanding, or enhancing their business. The goal of this program is to:
 - help low-income business owners strive by fostering self-employment as a route to economic self-sufficiency for residents in the Northeast Kingdom who are facing economic, social and/or medical challenges.
 - To provide assistance and education for business startups and expansions.
 - To offer business resources and on-going support to assist participants in achieving long term success.

Free services include:

- Business idea assessment, business plan and marketing plan development
- Financial capacity and management
- Budgeting and credit repair
- Assistance with business loan applications
- Assistance with marketing materials
- Classes / Workshops / Seminars
- Organizational structure development
- This program does **NOT** provide funding or grants directly.
- Financial Coaching
- Financial and Energy Counseling Works with income eligible individuals and families to increase wellbeing and self-sufficiency around credit building, debt reduction, savings strategies and budgeting.

Youth Advocacy/Services

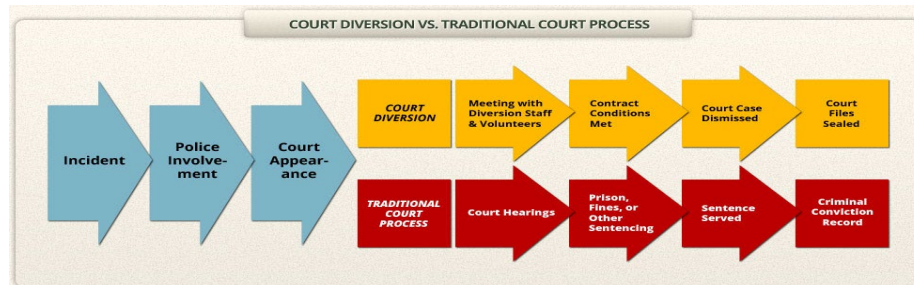
- *Youth Development Program (YDP)* provides extended care for teens and young adults ages 14-23 who have experience within the foster system. This program provides opportunities for housing, education, employment, transportation, health, identification and basic needs. This program offers:
 - *Youth Development Coordinators (YDC’s)* partner with youth to assist in goal setting, exploring personal interests, connecting with natural supports and transitioning to adulthood successfully.
 - *Financial Resources* provide flexible funding to support interests and goals of youth who are engaged in the program.
 - *Leadership Opportunities* empower and inspire youth to advocate for necessary improvements within the youth justice system and beyond.

- *Extended Foster Care* financially supports former foster parents and other supportive adults to care for youth over the age of 18.
- *Transitional Living Program (TLP)* is geared toward youth between the ages of 16-23 who need support and services to transition to independent living. These services include referrals, assessment of life skills, strengths and needs, safe living placements, emotional supports, guidance and advocacy, life skills instruction both individually and in group settings, case management and an alternative approach to learning. Youth participants are expected to design and engage in their independence plan and keep scheduled appointments. Issues addressed through TLP include decision making, social skills, money management, job skills, apartment planning, area resources, financial skills, education, CPR and First Aid, healthy relationships and boundaries, and health and wellness.
- *Landlord Liaison Position* Through partnerships with private market landlords—who range from landlords who can offer one unit in a house to corporations that own many apartment buildings—the landlord liaison reaches out to agencies that work with people experiencing homelessness, who have various barriers to finding housing, including bad credit or a criminal background. Landlord liaison is not a subsidy program, so no one is placed in low-income housing. Rather, the focus is on affordable and private-market housing and the expansion of the housing market pool. With few exceptions, those who are renting are expected to pay private market rates, whether through gov’t subsidies or employee wages.
- *ACCESS Program* Stabilization services program primarily for children in crisis and their families in Orleans and Northern Essex counties. This program is for those without current mental health or youth service providers and where the children are at-risk of being removed from the home. The ACCESS program is managed by NKHS and is a collaborative effort between NKHS, NEKCA, CYS, and DCF. No client will be denied services based on financial or insurance status.
- *Preservation and Stabilization for Youth and Family* uses a strength based approach in engaging with youth between the ages of 12 and 23 and their families who are struggling with communication, need mediation and goal setting. We can work with youth who are at-risk of being truant or who are truant, thinking of running away or have run away. Services include 24/7 crisis work, life skills, Making Proud Choice class, try to work out alternative living arrangements during the crisis and connections to community resources.
- *Learn Together Program* supports teens, young parents/adults to learn job, parenting, and life skills while setting and meeting educational and employment goals. We collaborate with local schools to support academic tutoring towards high school graduation and GED preparation.

Community and Social Justice

- *Dept of Corrections Transitional Housing* Promote housing stability of individuals returning to the community from incarceration. Supervise and support individuals in the least restrictive environment. Provide opportunities for reintegration and connections to community and services.

- *Balanced and Restorative Justice (BARJ)* is in place to enhance youth-focused restorative justice across Vermont. The philosophy emphasizes how harmful actions are violations of people and relationships, that violations create obligations, and restorative justice seeks to engage and support those who have been harmed or victimized and are encouraged to make decisions and share how the events affected them.



- *Court Diversion* is a restorative alternative to the court process. The state's attorney may offer Diversion to adults or youth who are charged with committing a crime (or youth charged with being delinquent). After successful completion of the program, the original charge is dismissed. If an individual does not complete the contract, the case is returned to the state's attorney for prosecution.
- *Driving with License Suspended Program (DLS)* The Civil DLS Diversion Program is designed to help people regain their driver's license while they pay off their fines and fees. Participants work with Diversion staff to develop a contract including a payment plan that is presented to the Vermont Judicial Bureau (VJB) for review. Upon approval by VJB Hearing Officer, the Department of Motor Vehicles (DMV) is notified that the person is following the VJB. DMV re-instatement requirements must also be met before the person's driver's license is re-instated. Some people may be eligible for a reduction in their debt, and some may provide community service and/or participate in an educational program in exchange for a reduction in fines and fees owed. When you successfully complete a Civil DLS Contract to pay off old fines, past civil DLS violations will not count toward more serious criminal charges.

Name: _____ Number in household: _____

Address (optional): _____

Phone Number (optional): _____

(Phone number may be used to notify you if there is a food safety recall)

TEFAP Income Eligibility Guidelines Effective July 1, 2021 - June 30, 2022

Household Size	Yearly	Monthly	Weekly
1	\$38,640	\$3,220	\$743
2	\$52,260	\$4,355	\$1,005
3	\$65,880	\$5,490	\$1,267
4	\$79,500	\$6,625	\$1,530
5	\$93,120	\$7,760	\$1,792
6	\$106,740	\$8,895	\$2,054
7	\$120,260	\$10,030	\$2,316
8	\$133,980	\$11,165	\$2,578
For each additional household member add	\$13,620	\$1,135	\$262

Do not count any benefits from 3SquaresVT as part of your income when deciding if you meet these guidelines.

By signing below, I certify that I am eligible to receive USDA Foods from TEFAP because my household income is at or below the above guidelines, and I live in the State of Vermont.

Signature	Date

USDA Regulations require that you sign this statement the first time that you receive USDA Foods from TEFAP during the period of eligibility. The period of eligibility runs July 1 - June 30.

This statement will be kept on file at the food pantry where you receive USDA Foods from TEFAP.

In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, sex, disability, age, or reprisal or retaliation for prior civil rights activity in any program or activity conducted or funded by USDA.

Persons with disabilities who require alternative means of communication for program information (e.g. Braille, large print, audiotape, American Sign Language, etc.), should contact the Agency (State or local) where they applied for benefits. Individuals who are deaf, hard of hearing or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English.

To file a program complaint of discrimination, complete the USDA Program Discrimination Complaint Form, (AD-3027) found online at: How to File a Complaint, and at any USDA office, or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992.

Submit your completed form or letter to USDA by:

(1) mail: U.S. Department of Agriculture Office of the Assistant Secretary for Civil Rights 1400 Independence Avenue, SW Washington, D.C. 20250-9410; (2) fax: (202) 690-7442; or (3) email: program.intake@usda.gov.

Farm to Families eligibility

2021 Monthly Income Limits: \$1,986 a month for a single person, \$2,686 for a household of two, \$3,386 for a household of three, \$4,086 for a household of four, \$4,786 for a household of five, \$5,486 for a household of six, \$6,186 for a household of seven, \$6,886 for a household of eight and \$700 for each additional household member.

Application for Energy Assistance from Green Mountain Power



201UDI

GMP Energy Assistance helps low-income Vermonters afford electricity for their homes. If we determine that you are eligible, you'll get a 25% discount off the monthly charges for the energy you use.

To be eligible, you *must*:

1. Be a residential customer of Green Mountain Power; and
2. Have a total gross household income at or below 150% of the federal poverty level.

To apply, you *must*:

1. Fill out both sides of this form. print clearly.
2. Sign and date the form in the space provided on the next page.
3. Mail the following to the address at the bottom of this page:
 - a. Your completed and signed application; and
 - b. A copy of **your most recent electric bill**. *If you send an original bill, it will not be returned.*

IMPORTANT: If you do not fully complete both sides of this form & attach a copy of your most recent bill, your application will be denied and you will have to start over. You must reapply each year.

Household Information

Green Mountain Power Account Number (the account number on your electric bill) <u>attach a copy of your most recent bill</u>	
Account Holder's Name (the person named on the electric bill)	Social Security Number
Your Spouse or Partner's Name	Social Security Number
Physical Address (Street, house Number, town, State, & Zip Code) Is this your primary residence? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Mailing Address if Different (Street & house Number or po box, town, State, and Zip Code)	
Home Phone (with area code)	Daytime Phone/Cell Phone (with area code)
Number of People in your Home: _	Is this your first application for GMP energy assistance? • Yes <input type="checkbox"/> No



SEND YOUR APPLICATION TO:

DCF – Economic Services Division Application & Document Processing Center
280 State Drive, Waterbury VT 05671-1500 1-800-775-0516

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Household Income

Please complete *either* Section A or Section B, not both. Use an extra sheet of paper if necessary.

Section A: Public Benefits (if no one in your household gets public benefits, skip to Section B)

Please check the benefits household members currently get. The Economic Services Division of the Department for Children and Families (DCF) will use the information already on file to determine your eligibility.

Names of Household Members	3Squares VT	Essential Person	Fuel Assistance	Reach Up (Reach First, Reach Ahead, PSE)
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Section B: Gross Monthly Household Income (if you completed Section A, don't complete this section)

Include the **total gross monthly income** (income before deductions such as taxes) for **all** members of your household. You may be required to submit documents to verify income. If your household income changes, call 1-800-775-0516 to report these changes – within 10 business days.

- a. Wages, salaries, tips, etc..... a. _
-
- b. SSI, Social Security, railroad retirement, veteran's benefits, taxable and nontaxable. b. _
- c. Pensions and annuities, taxable and nontaxable..... c. _
-
- d. Unemployment compensation/worker's compensation..... d. _
-
- e. Interest and dividends (e.g., US, state and municipal bonds)..... e. _
-
- f. Alimony, child support..... f. _
-
- g. Business income: (for loss, enter -0- g. _
-).....
- h. Capital gains, taxable and nontaxable (for loss, enter -0- h. _
-).....
- i. Rental income (for a loss, enter -0- i. _
-).....
- j. Farm/partnership/Subchapter S income (for a loss, enter -0- j. _
-).....
- k. Other income. Please specify _ k. _
- TOTAL GROSS INCOME** (add lines a through k) \$ _

Applicant's Declaration & Signature

I declare under penalty of perjury that this application is true, correct, and complete to the best of my knowledge.

I agree to call 1-800-775-0516 to report any changes to my household income/household members — within 10 business days. Failure to report changes that make me ineligible for assistance may result in legal action against me for discounts improperly received. I authorize DCF - Economic Services Division to use information the department maintains about members of my household to determine my eligibility for energy assistance.

Account Holder's Name (print) Date Account Holder's Signature

Children's Integrated Services:

Strong Families Vermont, Early Intervention, Early Childhood & Family Mental Health, & Specialized Child Care

The Pregnant Person/Parent/Guardian/Child Care Provider or Director gave verbal permission for this referral:
☐ Yes ☐ No: (If "No," you are required to obtain their verbal permission before making a referral, except CAPTA)

A. CONTACT INFORMATION for INDIVIDUAL(S) BEING REFERRED

Client's Name: Client's Date of Birth: Pronouns: Gender: ☐ M ☐ F

Client Identified Ethnicity: ☐ Hispanic/Latinx or of Spanish origin of any race ☐ Non-Hispanic/Latinx/of Spanish origin

Client Identified Race: ☐ American Indian/AK. Native ☐ Asian ☐ Black/African Amer. ☐ White ☐ 2 or More Races ☐ Other as Identified by Client/Family: Note: This information is only used by the State to meet federal grant reporting requirements, not to determine services.

Client is a: ☐ Child (Parent/Guardian's Name:) ☐ Pregnant Person ☐ Child Care Program

Primary Language: Pregnant Person's Anticipated Due Date: - -
 Is Interpreter Needed? ☐ Yes ☐ No Best Way to Contact Client:

Mailing Address: Physical Address:

Phone (Home/Work/Cell): () - ext: Email:

Custody: ☐ Parent(s) ☐ Foster Parent(s) FSD Contact: ☐ Legal Guardian ☐ Kin (no legal status)

B. REASON FOR REFERRAL

For Child: **For Adult/Parent/Guardian/Child Care Program:**

- | | |
|---|--|
| <input type="checkbox"/> Health
<input type="checkbox"/> Developmental Concern, Delay or Disability
<input type="checkbox"/> Hearing / Vision <input type="checkbox"/> Cognitive <input type="checkbox"/> Behavioral <input type="checkbox"/> Adaptive
<input type="checkbox"/> Communication <input type="checkbox"/> Social / Emotional <input type="checkbox"/> Motor / Physical
<input type="checkbox"/> Other:
<input type="checkbox"/> Family Services substantiated abuse/neglect (CAPTA)
<input type="checkbox"/> Risk/History of Abuse / Neglect / Family Violence
<input type="checkbox"/> Nutrition, Diet, or Feeding
<input type="checkbox"/> Significant Birth Issues
<input type="checkbox"/> Sleep Concerns
<input type="checkbox"/> Child Care Access
<input type="checkbox"/> Diagnosed Condition:
<input type="checkbox"/> Other: | <input type="checkbox"/> Child Care Search/Access
<input type="checkbox"/> Child Care Questions from Parent
<input type="checkbox"/> Child Care Provider Questions
<input type="checkbox"/> Health of Parent/Expectant Parent
<input type="checkbox"/> Lactation/Breastfeeding Questions/Support
<input type="checkbox"/> Parenting Questions/Concerns
<input type="checkbox"/> Prenatal Questions/Concerns
<input type="checkbox"/> Postpartum Questions/Concerns
<input type="checkbox"/> Substance Use/History
<input type="checkbox"/> Domestic Violence
<input type="checkbox"/> Homelessness/Unstable Housing
<input type="checkbox"/> Other: |
|---|--|

C. ADDITIONAL COMMENTS, STRENGTHS, AND RESILIENCE FACTORS

D. REFERRAL SOURCE INFORMATION

Person Making Referral: Referral Date: - -
 Agency/Organization: Phone: () - ext:
 Address: Email: Role:

E. MEDICAL PROVIDER INFORMATION (If different from Referral Source)

Provider Practice Name: Referral Date: - -
 Provider/Physician Name: Phone: () - ext:
 Client Insurance: ☐ Medicaid/Dr. Dynasaur ☐ Private Insurance ☐ Uninsured ☐ Insurance Status Unknown
 Medicaid ID#: Private Insurance Carrier:

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THANK YOU • PLEASE SUBMIT THIS FORM TO YOUR REGIONAL CIS COORDINATOR

For Internal Use Only:

Date Received: - - Received By: Date of Initial Contact: - -



Northeast Kingdom Community Action Referral Form

115 Lincoln Street St Johnsbury VT 05819
371 Main Street St Newport VT 05855
Phone: 855-6635224
Email: referrals@nekavt.org

Date: _____

It is Northeast Kingdom Community Action's mission through our services, to empower families to grow, prosper, and thrive.

Contact information on Individual being referred:

Name:	Phone #
Address:	
Child(ren) & age(s):	

Referral source:

Name:	Phone #
Agency:	Fax #
Role:	Email

Reason for referral / Important Background
Information: _____

Client/Parent or Legal Representative Signature _____ Date _____

*****Office Use*****

Client Contacted - Yes / NO

Follow up Plan: _____

Received By: _____ Referred To: _____ Date: ____/____/20____