

Client Referral Form

Name:	Telephone:	
Address:	City:	State: Zip:
Date of Birth: Age:	Gender: \Box F \Box M	
Appointment Time/Date:		
Please mark the appropriate response below:		
Marital Status: Single Married	Divorced Separated	l Widowed
Race: African-American Caucasian	_ Asian Hispanic N	Native AmericanOther
Education: 8th Grade Some High School Graduated High School GED College (Graduated) Technical Training Other		
Income: Receiving Assistance? Yes No What type? RIWorks (FIP) SSI Other		
Are you employed? Yes No If yes, how long?		
CLOTHING COLLABORATIVE INFORMATION		
Reason for visiting Success Wear: Job int Currently employed Interning/		
REFERRAL INFORMATION		
Person Making Referral: Referring Agency: Address (City and Zip):	Date of R Referral '	Referral: Telephone:

ABOUT YOUR APPOINTMENT

- Please call 401-766-3384 to schedule your appointment. We do not accept Walk-In's.
- The showroom is open Monday, Wednesday and Thursday, 9:00 am to 1:00 pm.
- We allow 40 minutes per appointment per person. If you cannot make it, call to reschedule.
- Please **bring your referral form** and ID with you. You cannot keep your appointment without it.
- Please come alone and bring a bag with you. Children are not allowed to attend appointments.
- We do not accept refunds. All items must be tried on for proper fit.
- This **form is valid for one year** from the time of your first appointment.

We are located at Heritage Place 727 Front Street, Suite 112 Woonsocket, RI 02895

Behind the Dunkin Donuts where the Resident Units are located

We look forward to serving you!