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| **THE RHD CHIPRA PROGRAM – REFERRAL FORM**\*\*\*Request for CHIP, MA, SNAP Food Stamp Benefits & more!!!\*\*\* |
| **Welcome to the RHD CHIPRA Program!**Fill in the information below and a Family Benefits Advocate will respond within 24 hours to begin enrollment. Feel free to call **(215) 508–5800/3300 Extension 1168** for additional enrollment information. |
| **PARENT/CAREGIVER INFORMATION** |
| Parent/Caregiver Name *(First & Last)*: |   | Date of Referral: | Click here to enter a date. |
| Parent/Caregiver Address: | Click here to enter text. |
| City: | Click here to enter text. | State: | Click here to enter text. | Zip Code: | Click here to enter text. |
| Primary Phone Number: | Click here to enter text. | Secondary Phone Number: | Click here to enter text. | Alternate Phone Number: | Click here to enter text. |
| Email Address: | Click here to enter text. |
| REFERRAL SOURCE INFORMATION |
| Name of Individual Completing Referral *(First & Last)*: | Click here to enter text. | Referral Source *(Agency & Department):* | Click here to enter text. |
| Referral Source Address: | Click here to enter text. |
| City: | Click here to enter text. | State: | Click here to enter text. | Zip Code: | Click here to enter text. |
| Primary Phone Number: | Click here to enter text. | Secondary Phone Number: | Click here to enter text. | Alternate Phone Number: | Click here to enter text. |
| Email Address: | Click here to enter text. |
| **ADDITIONAL INFORMATION** |
| Number of Children: | Choose an item. | What is the best time of day to reach the family? | Click here to enter text. |
| Additional Notes: | [Type any additional notes if needed.] |
| Referrals Accepted By: |
| Fax or E-mail:1-(888)-972-6681**Subject Line:** CHIPRA ReferralAttention: Shawna Sidibe, CHIPRA Program Director**Email:** shawnas@RHD.ORG | Mailing Address & Phone:Ms. Shawna SidibeCHIPRA, Resources For Human Development90 Rochelle AvenuePhiladelphia, PA 19128(215) 508-5800/3300 Extension 1168 |
| OFFICE USE ONLY: |
| Reviewed By: | Click here to enter text. | Date Received: | Click here to enter a date. |