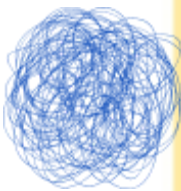




Family Resource Sheet


Please check all that apply if you are in need of any assistance/resources. We will be in contact with you as soon as possible!



Name: _____

Phone: _____

I need assistance with:

- | | |
|--|--|
| <input type="checkbox"/> Food | <input type="checkbox"/> SNAP Benefits |
| <input type="checkbox"/> Clothing | <input type="checkbox"/> Insurance |
| <input type="checkbox"/> Housing/Rental Assistance | <input type="checkbox"/> Emotional Support |
| <input type="checkbox"/> Hygiene Products | <input type="checkbox"/> Other: _____ |
- 

If you have any questions or concerns, please contact
Felicia LaCuesta - Family Services Coordinator
lacuesta_f@4j.lane.edu
(541)790-6174



Thank you!

