

Theresa House and Welcome Inn/Union Street Place Shelter(s) Application and Referral Form

We serve women and families and men who are a part of a family unit. We are unable to serve single men at this time.

Date: S	elect one or both locat	tions you are willing to have a shelter stay:	
Mankato (Theresa House ar	nd Welcome Inn)	St. Peter (Union Street Place)	
Name(s), genders, and ages of ALL Person(s)/Family members who would come to shelter:			
Phone number/email to contact:			
Do you prefer phone or email?	ls	it safe to leave a voicemail if we call?	
Preferred language:			
Current Living Situation/Address:			_
Any Current probation/parole/law enforcement involvement			
Any Substance Abuse History/Length of S	Sobriety?		
Currently experiencing/fleeing domestic	violence?		
	If ye	es, is there an OFP or HRO on file?	
Currently employed? If yes, where:			
Person/Agency Making referral:			
Referral agency's contact phone number	(if applicable):		
Do you consider yourself or any member If so, please explain:	of the family to have a	a physical, mental, developmental, or chronic disabilit	y?
Any additional information/health inform	nation or special accom	nmodations for staff to be aware of:	
Are you/they receiving services from any	agencies or working w	vith any professionals? Please list them:	

Staff will contact you if there is an opening for your family size. Applications or referrals can be dropped off at both locations or emailed to shelter@partnersforhousing.org.