BRIGHTPOINT Referral & Information Form

Do you want information on any of the programs we offer below? Mark boxes of interest. (Do **NOT** mark if you are already receiving the program)

CCDF (Childcare vouchers)	Housing Choice Voucher (Outside of Fort Wayne)			
On My Way Pre K	Family Development (Voluntary Case Management)			
Early Head Start	JAG-Youth Programs, Focus Forward			
Head Start	SNAP (Food Stamps)			
Brightpoint Development Fund (Small Business Loans)	CKF (Medicaid, Hoosier Healthwise, Healthy Indiana Plan HIP, Health Insurance Marketplace)			
Brightpoint Development Fund (Housing Developments)	Weatherization			
Brightpoint Development Fund (Community Involvement)	Other:			

Please list ALL household members. Use the codes at the bottom of the						
page.		1				
First and Last Name	Current Employment Status	Highest Education Completed	Current Health Insurance	Current Household Type	Disconnected Youth	

Employment Codes:

FT - Employed full time

PT - Employed part time

R - Retired

US - Unemployed 6 months or less

UL – Unemployed longer than 6 months

NL - Not in labor force

M - Migrant seasonal farm worker

Education Codes:

A- Grades 0-8

B – Grades 9-12, non-graduate

C - Diploma/Equivalency

D - Some post-secondary school

E - 2- or 4-year college degree

F – Other post-secondary graduate

Health Insurance Codes:

A- Medicaid

B - Medicare

C – State Children's Health Ins Program

D - State Health Insurance for Adults

E - Military Insurance

F - Employment based

G - None

Household Type Codes:

S- Single

TN - 2 Adults, no children SF - Single Female Parent

SM - Single Male Parent

TP - 2 Parent household

NR - Non-related adults with children

MG - Multi - Generational household (3 or more generations)

OE - Other

Disconnected Youth:

Y - Ages 16-24 and NOT enrolled in school, NOT working

N- Ages 16-24, enrolled in school or working