

Foster Youth Independence Center of Milwaukee, Inc.

604 E. Center Street Milwaukee, WI 53212

Phone: 414-264-6290 Fax: 414-264-6073

LIFE SKILLS SERVICES

GROUP WORKSHOPS and TRAINING

Source of Referral: _____ Referring Agency: _____

Case Manager/Ongoing Contact: _____ Telephone: _____

Address: _____

Supervisor Name: _____ Telephone: _____

Name of Training Participant: (Last): _____ (First): _____ (MI) _____

DOB: _____ Reason for referral: _____

Please indicate (X) which of the following workshop(s) you are requesting for the participant listed above.

_____ Aging Out Viewings

_____ Housing Options

_____ Support Networks

_____ Creating FYI 3 Binders

_____ Financial Management

_____ Obtaining Vital Records

_____ Independent Living Options

_____ High School Competition/GED

_____ Healthy Shopping and Spending

_____ AODA/Sexual Health/Family Planning

_____ Cooking/Dietary Needs

_____ Post Secondary Education/Financial Aide

_____ Job Placement Training and Career Options

Completed by: _____ Date: _____