

Client Referral Form:
TIED TO SUCCESS (YORK)

29 South 10th Street, Harrisburg, PA 17101
Phone (HBG): 717-232-1333 ext. 111
Fax 717-232-1332 (CALL before FAXING)



PROGRAMS OF SUITS TO CAREERS, INC.

TTS Office Use Only:

5/1/16

Coordinator Verified _____

Database Entered _____

Suiting Entered _____

F/U Call _____

REFERRAL AGENCY INFORMATION

Program/Agency: _____ Contact Name: _____

Telephone: _____ EXT _____ Contact Email: _____ Date: _____

Instruct clients to arrive **on time** and **arrive alone** or they will not be suited. **NO CHILDREN OR VISITORS ALLOWED.**

Client Name: _____ Date of Suiting: ____/____/____ **US. Veteran?**

Home phone: (____) _____ Cell phone: (____) _____

Address: _____ Apt # _____ City _____ Zip _____

SS#: _____ DOB ____/____/____ Email Address: _____

Ethnicity (circle one): African American Hispanic Asian Caucasian Other _____

Marital Status (circle one): Single Married Divorced Separated **Family Status:** # of Children _____

Housing Status (circle one): Rent Own Lives w/Others Homeless/Shelter Section 8 Group Home Work Release

Public Assistance TANF: Yes No **SNAP(Food Stamps):** Yes No **Interpreter Assistance Needed?** Yes _____

Education completed (circle one): 9 10 11 12 GED Technical School Some College AA Bachelors Masters

Height: ____feet ____inches **Special Attire Request:** _____

Jacket size: 36 38 40 42 44 46 48 50 52 54 56 58 60

Waist size: 29 30 31 32 33 34 35 36 37 38 39 40 42 44 46 48 50 52 54 **Outseam Measurement:** _____

Shirt size: 14-14.5 15-15.5 16-16.5 17-17.5 18-18.5 19 **Sleeve length:** 32/33 34/35 36/37

Shoe size: 7.5 8 8.5 9 9.5 10 10.5 11 11.5 12 12.5 13 14

Interview Suit: Potential Employer: _____ Position: _____ Interview date: ____/____/____

Training Suit: Site of training: _____ Position: _____ Start date: ____/____/____

Employment Suit: Employer: _____ Position: _____ Start date: ____/____/____

LEAVE THIS BOX BLANK UNTIL APPOINTMENT--PERSONAL SHOPPER USE ONLY

INTERVIEW SUIT

(Indicate Quantity / Color / Corporate)

SUIT: # _____ Size _____ Color _____

JACKET: # _____ Size _____ Color _____

SHIRT: # _____ Size _____ Color _____

PANT: # _____ Size _____ Color _____

SHOES: # _____ Size _____ Color _____

COAT: _____ Size _____ BRIEFCASE: _____ TIE: _____ PERSONAL CARE: _____

OTHER ITEMS(describe): _____ PAWW TOTAL COST: \$ _____

EMPLOYMENT SUIT / TRAINING / UNIFORM

(Indicate Quantity / Color / Corporate)

SHIRT: # _____ Size _____ Color _____

JACKET: # _____ Size _____ Color _____

PANTS: # _____ Size _____ Color _____

SHOES: # _____ Size _____ Color _____ (____)\$ _____

SCRUBS: # _____ Size _____ Type/Color _____ (____)\$ _____

BRIEFCASE: _____ TIE: _____ COAT: _____ SIZE: _____ PERSONAL CARE #: _____

OTHER ITEMS(describe): _____ PAWW TOTAL COST: \$ _____

PERSONAL SHOPPER: _____ Client Signature: _____