

**Client Referral Form:**

**TIED TO SUCCESS MOBILE COUNTY**

29 South 10th Street, Harrisburg, PA 17101  
Phone (HBG): 717-232-1333 ext. 106  
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: \_\_\_\_\_