Supporting Strong Families Referral Form

SSF is a collaboration among The Learning Web, the Advocacy Center, Cornell Cooperative Extension, and DSS

Client Name:		Date of Referral: _ Is the client aware of the referral? □ Yes □ No	
Date of Birth:	Is the clier		
Contact #:		_ Is it safe to: □ call □ text □ voicemail	
Housing: Homeless	□ Stable hous	ing	
Address:			
Please check one or both below			
Referral to: The Learning Web a Extension (Parent Education)	and/or □ Advocacy 0	Center and/or □ Cornell Cooperative	
Referral Source Name:		Contact #:	
E-mail:			
List areas of need that client has id	entified they want sup	pport around:	
, ,	•	e referring party helps us make a personal ide a date, time and location that this could	
	Please return refe	errals to:	
The Learning Web	Stephanie Thoma	S	
Phone: 607-275-0122 ext. 110	Fax: 607-275-0312	E-Mail: stephanie@learning-web.org	
Advocacy Center	Sarah Aaron		
Phone: 607-277-3203	Fax: 607-277-4003	E-Mail: saaron@actompkins.org	
Cornell Cooperative Extension	Serena Ward		
Phone: 607-272-2292 ext. 247	Fax: 607-272-7008	E-Mail: slw256@cornell.edu	



