



Confidential Support Request Form

This form is a safe and confidential way to request support. You are not required to share anything you're not comfortable with. Our goal is to meet you with care, respect, and understanding.

This support is designed for **women with children who are ready and committed to their healing journey and creating a path toward stability and independence.**

To ensure we can provide the highest level of care, this program is best suited for individuals who are in a safe enough position to engage in ongoing support and services.

Please note:

If you are in immediate danger or crisis, this form may not be the fastest way to get help. We encourage you to contact emergency services or a local crisis hotline for immediate support.

Section 1: Basic Information

- First Name *(or initials if preferred)*
- Preferred Contact Method
 - Phone
 - Email
 - Text
- Phone or Email
- Safe Time to Contact *(optional)*

Section 2: Current Needs (Select all that apply)

- Healing & emotional support
- Housing / relocation
- Financial assistance
- Legal support
- Childcare support
- General guidance / not sure

Section 3: Urgency Level

- How urgent is your situation?
 - Immediate (within 24-72 hours)
 - Urgent (within a week)
 - Flexible / not time-sensitive

Section 4: Optional Context

- Would you like to share anything about your situation? (*Optional*)

Section 5: Connection to Sponsorship (Optional)

- Are you connected to a company or sponsor?
 - Yes
 - No
 - Not sure
- If yes, company name (optional): _____

Section 6: Consent & Safety

- I understand this is a confidential request for support
- I consent to be contacted by Project 816

You are not alone. A member of our team will reach out to you with care and confidentiality as soon as possible.

Thank you for your commitment to supporting your people. A member of Project 816 will follow up within 24-48 hours to discuss next steps.

Email Inquiry to: info@project816.org