



SERVICE REQUEST

Last Name:	First Name:
Address:	City, State, Zip:
Phone number:	Email:

Service Requested (check all that apply)

1. Temporary Housing
2. Counseling Services
3. Job Placement
4. Resume Writing/ Interview Practice
5. Credit Repair
6. Financial Counseling
7. Financial Assistance (monetary support)
8. Couponing/ Smart Shopping

REQUIRED documents for Monetary Requests

1. Memo/Letter explaining current financial needs and amount of request
2. Copy of last check stub and proof of any government benefits received (WIC, HUD, EBT, VA, etc.)
3. DD214, NGB22, Military Assignment Orders
4. Date funds requested: _____ Date funds needed: _____
Number of dependents: _____ (please provide birth certificate(s)/marriage license)_
Age of Dependents: M/F _____, M/F _____, M/F _____, M/F _____

REQUIRED Documents for Temporary Housing Requests

1. DD214, NGB22, or Military Assignment Orders
2. Last Lease Contract
3. Dates housing needed: From: _____ To: _____
Number of beds needed: _____ (please provide birth certificates/marriage license)
Gender/Age of guests: M/F _____, M/F _____, M/F _____, M/F _____, M/F _____
4. Last pay stub, proof of any government benefits received (WIC, HUD, EBT, VA, etc.)

EMAIL ALL REQUESTS TO: executivedirector@womenelevated.org

***Non Profit Statement**Women Elevated (WE) are a nonprofit organization whose primary mission is to assist women veterans in acute crisis BEFORE they become homeless. We assist with temporary housing, counseling, job placement, resume writing, credit repair. We strive to be a viable link between veteran and other resources in our community.*

***TN non-profit corporation control*