

# East Tennessee Collaborative Interest Form



**Parent/Guardian:**

**Date:** \_\_\_\_\_

Parent/Guardian's Name: \_\_\_\_\_  
First name M.I. Last Name

Parent/Guardian DOB: \_\_\_\_/\_\_\_\_/\_\_\_\_  I have a child in the home under the age of 18.

**Contact information:**

Address: \_\_\_\_\_  
Street Address County State Zip Code

Primary Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

Additional Phone Number: \_\_\_\_\_  It is okay to contact me via text message

Preferred Language: \_\_\_\_\_

**Interest in Services:**

I am interested in working with a mentor for these services (check all that apply):

- Career Planning
- Family Health & Wellbeing
- Housing Stability
- Financial Literacy/Budgeting
- Educational Advancement
- Goal Setting

**Who would you prefer serve you through the East Tennessee Collaboration?**

- Boys and Girls Club
- Knox Area Urban League
- YWCA
- Centro Hispano
- YMCA
- No Preference

Are you or a family member an employee at United Way of Greater Knoxville or one of the above agencies?

Yes  No

If yes, which agency? \_\_\_\_\_

**Who is submitting the referral?**

- Self-referral \_\_\_\_\_
- The Change Center \_\_\_\_\_
- Agency: \_\_\_\_\_ Contact person: \_\_\_\_\_ Phone: \_\_\_\_\_
- Friend/Family: \_\_\_\_\_ Phone: \_\_\_\_\_
- Other: \_\_\_\_\_

\*Send completed form to [ETC@unitedwayknox.org](mailto:ETC@unitedwayknox.org) or call 865-521-0861 for more information