



**Dreams to Reality**  
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**Referral Form**

(Please complete and fax form to: 888-634-5202 or e-mail to [lorie@dreamstoreality-jc.org](mailto:lorie@dreamstoreality-jc.org))

Today's Date: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

**Client Contact Information:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone #: ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_ County: \_\_\_\_\_

**Name of Referral Source:** \_\_\_\_\_

Contact Person: \_\_\_\_\_ Phone #: ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_

Contact Persons E-mail address: \_\_\_\_\_

**Does Client have any special needs?**  Yes  No

Please describe: \_\_\_\_\_

**For office use only:**

1<sup>st</sup> Message Left On: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

2<sup>nd</sup> Message Left On: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

3<sup>rd</sup> Message Left On: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

\*Notes: \_\_\_\_\_



*"The mission of Dreams to Reality is to support women in transition by providing appropriate interview and work attire to help them be confident and prepared for career and employment opportunities".*

Thank you for your interest in becoming a referring source with Dreams to Reality. We look forward to working with you and the clients that you refer.

### **Referral Source Guidelines**

We strive to provide client services in the most respectful, effective and efficient manner possible. It is the responsibility of the referring source to determine the eligibility of the woman who could benefit from receiving services from Dreams to Reality.

Clients May Include Women Who:

- Have job interviews scheduled
- Are in the process of seeking employment, but do not have a job interview scheduled
- Have recently been hired and require a wardrobe to meet their employer's expectations
- Have been referred by their caring employer/supervisor/etc.
- Have been hired for jobs that require steel-toed and non-skid footwear
- Are students who need interview outfits, clothing for training and internships
- Are in need because of personal circumstances (Examples include: victims of domestic violence, household emergencies that destroyed their clothing, quick relocation or other safety issues)

### **Referral Process**

The following describes the process of a typical referral.

- Fill out a referral form, (reverse side) and either fax to 888-634-5202, or email to [lorie@dreamstoreality-jc.org](mailto:lorie@dreamstoreality-jc.org)
- The client will be contacted by Dreams to Reality and an appointment will be scheduled
- Appointments typically take at least one hour
- Typical appointments are scheduled on Tuesdays or Thursdays between 10 a.m. and 2 p.m., or other times as needed
- Clients will be asked to complete a service survey

We are a donation based organization and strive to provide the following items to the best of our ability:

- |                         |   |
|-------------------------|---|
| Suits                   | Steel Toed Footwear                           |
| Blazers                 | Bras/ Knee High Hosiery/ Socks                |
| Slacks/ Skirts          | Accessories (jewelry, purses, scarves, belts) |
| Dresses/ Tops/ Sweaters | Scrubs  |
| Shoes                   | Toiletries                                    |