

**Check appropriate Box:**

- SMART SSI/SSDI referral  
 Vocational Assessment Referral



El Hogar Community Services, INC. - GUEST HOUSE CLINIC  
 Specialized Multiple Advocate Resources Team-S.M.A.R.T.

### **S.M.A.R.T. REFERRAL FOR SOCIAL SECURITY BENEFIT ADVOCACY**

<b>SECTION A: Referring Party Information</b>	
Name:	
Agency (CMHP):	
Phone #:	
Fax #:	
Date referral sent:	

<b><u>SMART Requirements</u></b>
___ - Actively engaged in Sac County Mental Health Program
___ - Clean & Sober at least 90 days
___ - Age 64 and under
___ - US Citizen/Permanent Resident on/before 8/20/1996
___ - Disabled & cannot work for 12 months or more

<b>SECTION B: Personal Information</b> (Please fill in all requested details).							
<b>Last Name:</b>		<b>First Name:</b>		<b>Middle Name:</b>			
<b>SSN:</b>		<b>DOB:</b>		<b>Language:</b>		<b>Avatar ID:</b>	
<b>Phone Number:</b>		<b>Message Phone Number:</b>		<b>Education (Highest Grade Completed):</b>			
<input type="checkbox"/> <b>Housed (street address):</b>		<input type="checkbox"/> <b>Homeless/Transitional Housing (explain):</b>		<b>City:</b>		<b>Zip:</b>	
				<input type="checkbox"/> <b>US Citizen</b>		<input type="checkbox"/> <b>Permanent Resident (Date of Residency):</b> _____	

<b>SECTION C: Reasons for referral &amp; documentation support; in particular, how disability affects the client's ability to work.</b>

**How We Help:**

- *S.M.A.R.T. provides assistance free of charge for homeless/at-risk individuals.*
- *S.M.A.R.T. may assist those who do not yet have representation of a pending claim for SSI/SSDI.*
- *S.M.A.R.T. may assist individuals whose claims are not currently at Hearing.*

**Sacramento County Mental Health Providers (CMHP): FAX completed referral to (916) 454-4585**

#### **SECTION D: OFFICE USE ONLY by SMART STAFF**

<b>Referral Received Date:</b>		<b>Outcome:</b>		<input type="checkbox"/> Open	<input type="checkbox"/> Closed
<b>Benefits Specialist Name</b>					
<b>Notes:</b>					
<b>Tracker System</b>		<input type="checkbox"/> SMART Database	<input type="checkbox"/> HMIS	<input type="checkbox"/> AVATAR	<b>Screening Appt.:</b>