

**St. Vincent de Paul - St. Marks Conference  
Client Interview**

Case Number: _____	CLIENT ADVOCATE: _____	Interview Date: _____
Name: _____		
Address: _____		
Street _____		
City, State and Zip _____		Telephone _____
Apartment Complex _____		
Apartment Number _____		Church: _____

Family Household Information:						
Name	Age	Relationship	Student		Working	
			Yes	No	Yes	No
			Yes	No	Yes	No
			Yes	No	Yes	No
			Yes	No	Yes	No
			Yes	No	Yes	No
			Yes	No	Yes	No
			Yes	No	Yes	No
Does the client qualify for U.S. Government Program Assistance?					Yes	No
Has the client used St. Vincent de Paul in the past?					Yes	No
If yes, who was the client advocate? _____						
Comments: _____						

Monthly Income:	PT/FT	Hours/week:
Source:      Salary _____	Amount _____	
Child Support _____	Amount _____	
Food Stamps _____	Amount _____	
<b>Total</b>		

Monthly Expenses:		
	To whom is the payment made?	Amount paid
Rent/Mortgage	Section 8: Y/N	
Car:	Pymts:                      Ins:                      Gas:	
Electric:		
Gas:		
Water:		
Ph/Cable/Int:		
Food:		
Misc Exp:		
<b>Total:</b>		

What do you see as your greatest need?	
Amt Rqstd: _____	Acct.No: _____
	AcctName: _____

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Have you applied for any of the following programs?

TANF

Yes	No
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Date Applied \_\_\_\_\_

HUD

Yes	No
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Date Applied \_\_\_\_\_

WIC

Yes	No
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Date Applied \_\_\_\_\_

Texas Workforce

Yes	No
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Date Applied \_\_\_\_\_

Medicaid

Yes	No
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Date Applied \_\_\_\_\_

Food Stamps

Yes	No
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Date Applied \_\_\_\_\_

Medicare

Yes	No
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Date Applied \_\_\_\_\_

CHIPS

Yes	No
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Date Applied \_\_\_\_\_

DADS (Department of Aging and Disability

Yes	No
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Date Applied \_\_\_\_\_

Consumer Credit Counseling

Yes	No
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Date Applied \_\_\_\_\_

Social Security

Yes	No
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Date Applied \_\_\_\_\_

Other: \_\_\_\_\_

Do you have family and/or friends that have helped or are willing to help?  
In what ways have they or can they help? \_\_\_\_\_

May we release your name to other service organizations?

Yes	No
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Client Signature: \_\_\_\_\_

**X**

Have you asked for or received help from other local agencies or churches?

Previously, have you been given recommendations to contact agencies or other help organizations?

Yes
Yes

No
No

Have you done this?

Whom did you contact: \_\_\_\_\_

If Not, why? \_\_\_\_\_

If yes, what were the results? \_\_\_\_\_

Caseworker Comments/Notes:

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