



# REFERRAL PARTNER CONTACT FORM

**Complete and fax this form to:**  
Carrie Hanson Veurink, Education & Outreach Manager  
Fax: (215) 568-5998

The Career Wardrobe staff will work with the Primary Staff Liaison to schedule all client appointments. A secondary contact should also be identified. Liaisons will also receive communications about client education programs, and Referral Partner events and activities. The Career Wardrobe should be notified of any changes by faxing a new copy of this form or emailing this information to [partner@careerwardrobe.org](mailto:partner@careerwardrobe.org).

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Name of Program	Name of Parent Organization (if applicable)	Referral Partner ID#
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Program Address/Location
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City	State	Zip
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Scheduling Only - Primary Liaison Name	Title	Primary Contact E-mail
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Business Telephone	Business Fax
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Scheduling Only - Secondary Contact Name	Title	Secondary Contact E-mail
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Secondary Contact Business Telephone	Secondary Contact Business Fax
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Executive/Program Director (REQUIRED)	Title	Executive/Program Director E-mail
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Director Business Telephone (REQUIRED)	Director Business Fax
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**The Career Wardrobe**  
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Tel: (215) 568-6693 ~ Fax: (215) 568-5998  
E-mail: [partner@careerwardrobe.org](mailto:partner@careerwardrobe.org)

Visit [www.careerwardrobe.org/referral](http://www.careerwardrobe.org/referral) to learn about special events and to sign up our Referral Partner e-Newsletter.