

Email form to: walshc@westerntc.edu

La Crosse County Child Support Agency 333 Vine Street Room 1701 La Crosse, WI 54601-3200 414-615-2594 Phone 608-785-5760 Fax

www.lacrossecounty.org/childsupport

PROJECT PROVEN REFERRAL FORM

The purpose of this form is to have Project Proven staff contact you within one week of submission to explore your interest in their program. The goal of Project Proven is to increase the likelihood of successful transition from jail into the community by working with community partners to break down barriers for program participants. Project Proven promotes easier access to education, employment information and other community resources you may want or need. Project Proven involvement can enhance a stronger connection to your community and provide a way to increase your skills in making better choices which will decrease your chances of re-offending.

Name:		 	
Address:			
Phone #:			
Email:			
Interests: Ple	ease check		
Education:			
Employment			
• •			
General Resc	ource:		