

Attachment B

FutureSkills Training Referral Form

Please include the following documents with the FutureSkills Training Referral Form when referring a consumer for training:

☐ Shared Customer Information Release Form

MassHire Career Center: _____

MassHire Staff Providing the Referral:

Name:	Email:
	Phone:

Customer Information:

MOSES ID#:

Name:	Email:
	Phone:

FutureSkills Point of Contact:

(Name of Person the referral was made to)

Name:	Email:
	Phone:

Notes:

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