



IF YOU HAVE ANY QUESTIONS, PLEASE CONTACT:  
 MEGAN PETERSON, PROGRAM MANAGER  
 DIRECT: 952.888.1750  
 EMAIL: [MEGAN@BRIDGING.ORG](mailto:MEGAN@BRIDGING.ORG)

**AGENCY APPLICATION**  
 Send Completed Application to:  
 201 W 87<sup>th</sup> Street  
 Bloomington, MN 55420  
 Or Fax to 952.888.1239

THIS APPLICATION IS TO BE COMPLETED BY THE REPRESENTATIVE WHO WILL BE THE CONTACT PERSON WITH BRIDGING, INC.

**PLEASE PRINT**

DATE COMPLETED: ____/____/____		
AGENCY:		
ADDRESS:		
CITY:	STATE:	ZIP CODE:
WEBSITE:		CAN WE DISPLAY YOUR ORGANIZATION'S NAME ON OUR WEBSITE (THERE WILL BE A LINK TO YOUR WEBSITE)? YES/NO
CONTACT PERSON:	PHONE:	
EMAIL ADDRESS:		

DESIGNATED "REFERRING CASEWORKERS" (IF MORE THAN 4 PLEASE ATTACH ADDITIONAL SHEET):

1.	PHONE:
EMAIL ADDRESS:	
2.	PHONE:
EMAIL ADDRESS:	
3.	PHONE:
EMAIL ADDRESS:	
4.	PHONE:
EMAIL ADDRESS:	

ESTIMATE HOW MANY APPOINTMENTS WILL BE USED EACH YEAR:
DOES YOUR AGENCY CONDUCT HOME VISITS? <input type="checkbox"/> YES <input type="checkbox"/> NO
WHAT SUPPORT WILL BE OFFERED TO CLIENTS SUCH AS CHILD CARE DURING APPOINTMENTS, TRANSPORTATION TO APPOINTMENTS AND INTERPRETERS?   
WILL YOUR AGENCY BE ASSISTING WITH DELIVERY OF FURNITURE TO CLIENTS? <input type="checkbox"/> YES <input type="checkbox"/> NO
WHICH LOCATION WILL YOU BE REFERRING CLIENTS TO (CHECK ALL THAT APPLY)? <input type="checkbox"/> BLOOMINGTON <input type="checkbox"/> ROSEVILLE

**\*\* IF APPLYING FOR SCHOLARSHIP, PLEASE ATTACH THE SCHOLARSHIP APPLICATION AND CURRENT BUDGET \*\***

**AGENCIES WILL RECEIVE NOTICE OF ACCEPTANCE AFTER ALL MATERIALS REQUESTED HAVE BEEN RECEIVED AND WE HAVE HAD TIME TO REVIEW THE COMPLETE APPLICATION.**

**FOR OFFICE USE ONLY:**

Date Received		
Orientation Date		
Paperwork Sent		
Added to Computer	Access	
	Excel	
	Outlook	
Scholarship	App rcvd	
	Budget rcvd	
	Approved	