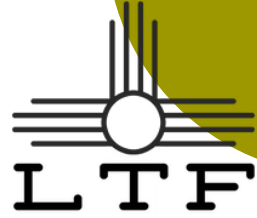


Latino Task Force Resource Hubs



Step 1: Please check off which resource hub location is most convenient for you.

Step 2: Turn over and complete the application.

Step 3: Once completed, you can return the application in one of three ways. Either drop off the application (front and back) at one of the resource hub sites below, during the hours specified. Or, take a picture of both sides and text it to the number below. Or, attach it to an email and send it to the email address below.

Call or Text: (415) 532-7275

Email: LTFhub@gmail.com

Mission Hub
701 Alabama St, SF CA 94110
Wednesday/Thursday 10 AM- 4 PM

Case de Apoyo in Excelsior
4834 Mission St, SF CA 94112
Tuesday/Thursday 10 AM - 4 PM

Evans in Bayview
1329 Evans St, SF CA 94124
Tuesday/Wednesday 10 AM - 4 PM

Yosemite in Bayview
1706 Yosemite Ave, SF CA 94124
Wednesday/Thursday 10AM - 4PM

The Hut at Executive Park
150 Executive Park Blvd #2450, SF CA 94134
Monday/Friday 10AM - 4PM

Instagram:
[@latinotaskforcesf](https://www.instagram.com/latinotaskforcesf)

Website:
www.ltfrespuentalatina.com



LATINO TASK FORCE COVID-19 RESOURCE HUB APPLICATION

1. APPLICANT INFORMATION **Eligible participants must be San Francisco residents.*

NAME: (First)	(Last)	DOB:
ADDRESS: (Street and City)		(Zip code)
RACE/ETHNICITY:	PHONE NUMBER:	SECONDARY PHONE NUMBER:
GENDER:	EMAIL ADDRESS:	
LANGUAGE(S): <input type="checkbox"/> English <input type="checkbox"/> Spanish <input type="checkbox"/> Yucatec <input type="checkbox"/> Mam <input type="checkbox"/> Quiché <input type="checkbox"/> Other: _____		

2. ASSESSMENT AND SERVICE NEEDS

<p>Basic Needs and Public Benefits</p> <input type="checkbox"/> Food <input type="checkbox"/> Transportation Assistance <input type="checkbox"/> COVID Testing <input type="checkbox"/> COVID Vaccination <input type="checkbox"/> Protective Equipment and Cleaning Supplies <input type="checkbox"/> Physical Health <input type="checkbox"/> Mental Wellness <input type="checkbox"/> Public Benefits:Medi-Cal <input type="checkbox"/> Public Benefits:CalFresh <input type="checkbox"/> Public Benefits:CalWORKS <input type="checkbox"/> Unemployment Insurance <input type="checkbox"/> Affordable Housing Application <input type="checkbox"/> Tenant Support <input type="checkbox"/> Basic Needs for Children (up to age 15) <input type="checkbox"/> Basic Needs for Young Adults (ages 16-24) <input type="checkbox"/> Case Management for Adults <input type="checkbox"/> Case Management for Young Adults (ages 16-24) <input type="checkbox"/> Other: _____
<p>Employment, Taxes and Small Business Support</p> <input type="checkbox"/> Employment Services (Adult) <input type="checkbox"/> Employment Services (Young Adults 16-24) <input type="checkbox"/> Employment Training <input type="checkbox"/> Career Coaching <input type="checkbox"/> Financial Coaching <input type="checkbox"/> ITIN (renewal) <input type="checkbox"/> ITIN (new application) <input type="checkbox"/> Taxes <input type="checkbox"/> Small Business Support <input type="checkbox"/> Other: _____
<p>Economic Relief</p> <input type="checkbox"/> Family Relief <input type="checkbox"/> Immigrant Worker Relief <input type="checkbox"/> Senior Relief <input type="checkbox"/> Rental Relief <input type="checkbox"/> LTF Hub Relief <input type="checkbox"/> Other: _____
<p>Education</p> <input type="checkbox"/> School Enrollment/Transfer <input type="checkbox"/> Distance Learning Support <input type="checkbox"/> College Support <input type="checkbox"/> ESL Classes <input type="checkbox"/> Other: _____
<p>Legal Services</p> <input type="checkbox"/> Eviction Defense <input type="checkbox"/> Worker Rights <input type="checkbox"/> Immigration <input type="checkbox"/> Other: _____

REFERRAL INFORMATION
Name of Organization/School: _____ Contact Person Making Referral: _____

ADMINISTRATIVE INFORMATION (STAFF ONLY)
<input type="checkbox"/> Mission Hub <input type="checkbox"/> Casa de Apoyo in Excelsior <input type="checkbox"/> Evans in Bayview <input type="checkbox"/> Yosemite in Bayview <input type="checkbox"/> The Hut at Executive Park Intake Date: _____ Date Entered in Tracker: _____