Rebuilding Lives, Transforming Our Community

One Body Collaboratives

MeetTheNeed™ Letting your light shine

Need Intake Form

Please use this form to gather information on the need to be entered,
and submit the completed form to your designated Administrator.

Step 1

First, please communicate the following to the individual in need:

1. Needs of the following nature cannot be entered: cash or emergency needs; we also do not provide mattresses or box springs.
2. Needs are listed on a closed online database. Your first name and phone number will be provided to the individual who will donate the item/service to you.
3. Your need will be in the online database for 3 months, it may take up to this amount of time to meet your need.

If they agree to these terms, compete step 2.

Step 2

1. Type of Need (Circle One): Goods (Tangible Item) Service (Volunteer Opportunity)

2. Description of Need: Please be as specific as possible in the type of item of service that is being requested

_____

_____

_____

3. # of items needed: _____

4. Date Needed By: _____
   Please note the default to providing items is (3) months. The needs being submitted should not be emergency needs, but those that can take 8-10 weeks to be provided.

5. Contact Information of individual in need, please provide name and as much contact information as you can (address, phone number, email address:

_____

_____

Completed by (your name): _____ Date Submitted: _____

To Be Completed by Administrator: Date Entered: _____