



3/13/25, 12:21 PM

Connect: Intake Form



Medical Aid Request Form

*Required

If you need assistance filling out this form call 608-207-8635.

E-mails from Social Solutions are from RESCU's data system.

These are sent to you automatically when you submit an Aid Form.

Social Solutions follows HIPAA privacy laws. Your information is not being shared.

Client Info

Legal Name*

FIRST*

MIDDLE

LAST*

Preferred Name

Date of Birth*

Gender

Age*