

CORNERSTONE REENTRY LIVING

Senior Reentry Housing Referral & Application Packet

Serving Kansas & Missouri

Phone: (913) 388-4130

Email: cornerstonereentryliving@gmail.com

Providing Safe, Stable, and Supportive Housing for Older Adults Returning from Incarceration

Program Overview

Cornerstone Reentry Living provides safe, structured, supportive housing for justice-involved older adults transitioning from incarceration into the community. Our focus is housing stability, successful reintegration, dignity, and independence.

Services Offered

- Furnished Housing
- Case Management Coordination
- Transportation Assistance
- Benefits Enrollment Assistance
- Medication Support Reminders
- Health Care Coordination
- Employment & Volunteer Referrals
- Life Skills Development
- Peer Support
- Reentry Planning Assistance

Eligibility Criteria

- 65 years of age or older
- Transitioning from incarceration or recently released
- Willing to comply with house guidelines
- Independent or semi-independent living capability
- Income, benefits, or funding source available or pending
- Does not require skilled nursing facility placement

Referral Information

Referral Date: _____
Expected Release Date: _____
Referring Agency: _____
Referring Staff: _____
Title: _____
Phone: _____
Email: _____

Applicant Information

Full Name: _____
Date of Birth: _____
Age: _____
Gender: _____
DOC Number: _____
SSN (Last 4): _____
Phone: _____
Current Facility: _____
Projected Release Address: _____

Emergency Contact

Name: _____
Relationship: _____
Phone: _____

Address: _____

Funding Information

- ☐ Social Security Retirement
- ☐ SSI
- ☐ SSDI
- ☐ Pension
- ☐ Veterans Benefits
- ☐ Employment Income
- ☐ Family Support
- ☐ Community Assistance
- ☐ Other _____

Monthly Income Amount: \$ _____

Medical Assessment

Primary Physician: _____

Medical Conditions:

Current Medications:

Mobility Status:

- ☐ Independent ☐ Cane ☐ Walker ☐ Wheelchair ☐ Other

Mental Health & Recovery

Mental Health Diagnosis (if applicable):

Receiving Treatment? ☐ Yes ☐ No

Provider: _____

History of Substance Use? ☐ Yes ☐ No

Currently in Recovery? ☐ Yes ☐ No

Reentry Needs Assessment

- ☐ Housing
- ☐ Food Assistance
- ☐ Transportation
- ☐ Medical Care
- ☐ Mental Health Services
- ☐ Medication Assistance

- Employment Services
- Identification Documents
- Benefits Enrollment
- Community Support
- Other _____

Criminal Justice Information

Supervision Status:

■ Parole ■ Probation ■ Post Release ■ None

Supervising Officer: _____

Phone: _____

County: _____

Document Checklist

- Completed Referral Packet
- Release Summary
- Identification Documents
- Benefits Verification
- Medication List
- Medical Records
- Mental Health Records
- Risk Assessment
- Discharge Plan
- Insurance Information

Applicant Rights & Responsibilities

Residents are expected to maintain respectful behavior, comply with program requirements, participate in planning meetings, maintain housing standards, and report emergencies or changes affecting eligibility.

Release of Information Authorization

I authorize the release and exchange of information necessary to determine eligibility and coordinate services through Cornerstone Reentry Living.

Applicant Signature: _____

Date: _____

Referral Certification

I certify the information provided is accurate to the best of my knowledge.

Referring Staff Signature: _____

Date: _____

Internal Use Only

Date Received: _____

Reviewed By: _____

Interview Scheduled: ■ Yes ■ No

Accepted: ■ Yes ■ No

Waitlist: ☐ Yes ☐ No

Move-In Date: _____

Notes:

Submit Referrals To

Cornerstone Reentry Living

Email: cornerstonereentryliving@gmail.com

Phone: (913) 388-4130

Required Referral Documents:

- Completed Referral Packet
- Release/Discharge Summary
- Medication List
- Identification Documents
- Benefits Verification (if available)
- Risk Assessment (if available)

Equal Housing Opportunity

Cornerstone Reentry Living provides housing opportunities without discrimination and is committed to fair and equitable access to services consistent with applicable laws.