

Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_

**Wisconsin First Step  
Shared Resource Group  
New Agency/Service Recommendation/Suggestion**

**Agency/Service Name** \_\_\_\_\_

**Contact Person** \_\_\_\_\_

**Contact Title** \_\_\_\_\_

**Contact Phone** \_\_\_\_\_

**Contact Address** \_\_\_\_\_

**Contact City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip Code** \_\_\_\_\_

**Contact E-Mail** \_\_\_\_\_

**Website** \_\_\_\_\_

**Brief description of service:**

**Recommended Web Category:**

- |   |  |
|---|--|
| <input type="checkbox"/> Counseling & Therapy                 | <input type="checkbox"/> Crisis Mental Health                |
| <input type="checkbox"/> Mental Health Screening & Assessment | <input type="checkbox"/> Support & Education for Families    |
| <input type="checkbox"/> Physician-Based Psychiatric Services | <input type="checkbox"/> Complementary/Alternative Therapies |

**Submitted by:**

**Name:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Please return to:**

Barbara McPeak, CRS, Referral Database Coordinator  
Wisconsin Public Health Information and Referral Services  
1900 South Avenue; Mail Stop NCA2-04  
La Crosse, WI 54601  
(608) 775-6328 Office | (608) 775-4766 FAX  
[bjmcppeak@gundersenhealth.org](mailto:bjmcppeak@gundersenhealth.org) / [www.mch-hotlines.org](http://www.mch-hotlines.org)