



**FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY**

OneSight Location: _____

Appt. Date & Time: _____

SUBJECT: OneSight voucher request for _____

This client is part of a vulnerable population of special immigrants (SIV-holders).¹ When SIV-holders arrive, the federal government assigns them to a local resettlement agency. This client is presently supported by the YMCA International Services. We are a 501(c)(3) non-profit; our tax ID is 74-1109737.

Please note that this client

- earns less than 200% of the current Federal Poverty level,
- does not have any other eyeglass benefit,
- has a valid lens prescription that is not more than one-year-old, and
- has not previously participated in the OneSight program.

Available for question,

Case Manager
713 339 9015 ext. _____

¹Persons who are provided "faithful and valuable service to the United States Government" and are admitted to the U.S. pursuant to Section 1244 of Public Law 110-181.

YMCA INTERNATIONAL SERVICES • 6300 Westpark, Suite 600, Houston, TX 77057 • 713-339-9015



YMCA Mission: To put Judeo-Christian principles into practice through programs that build healthy spirit, mind and body for all. Everyone is welcome.