**Current Living Situation- For Street Outreach, PATH, YHDP, Coordinated Entry or Night by Night Emergency Shelter:**

**Date of Contact: \_\_\_\_\_\_/\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Current Living Situation**

**Homeless Situations**

\_\_\_\_ Place not meant for habitation

\_\_\_\_Emergency shelter, including hotel or motel paid for with emergency shelter voucher, Host Home shelter

\_\_\_\_ Safe Haven

**Institutional Situations**

\_\_\_\_Foster care home or foster care group home

\_\_\_\_Hospital or other residential nonpsychiatric medical facility

\_\_\_\_Jail, prison, or juvenile detention facility

\_\_\_\_Long-term care facility or nursing home

\_\_\_\_Psychiatric hospital or other psychiatric facility

\_\_\_\_Substance abuse treatment facility or detox center

**Temporary Housing Situations**

\_\_\_\_Transitional housing for homeless persons (including homeless youth)

\_\_\_\_Residential project or halfway house with no homeless criteria

\_\_\_\_ Hotel or motel paid for without emergency shelter voucher

\_\_\_\_ Host Home (non-crisis)

\_\_\_\_Staying or living with family, temporary tenure (e.g., room, apartment, or house)

\_\_\_\_ Staying or living with friends, temporary tenure (e.g., room, apartment, or house)

\_\_\_\_ Moved from one HOPWA funded project to HOPWA TH

**Permanent Housing Situation**

\_\_\_\_Staying or living with family, permanent tenure

\_\_\_\_Staying or living with friends, permanent tenure

\_\_\_\_Moved from one HOPWA funded project to HOPWA PH

\_\_\_\_Rental by client, no ongoing housing subsidy

\_\_\_\_Rental by client, with ongoing housing subsidy **(Please select subsidy type below)**

\_\_\_\_Owned by client, with ongoing housing subsidy

\_\_\_\_Owned by client, no ongoing housing subsidy

 **Other**

\_\_\_\_No exit interview completed

\_\_\_\_Other

\_\_\_\_Deceased

\_\_\_\_Worker unable to determine

\_\_\_\_Client doesn’t know

\_\_\_\_Client prefers not to answer

**Subsidy Types (Please Complete if “yes” to Rental by client, with ongoing housing subsidy)**

\_\_\_\_GPD TIP housing subsidy

\_\_\_\_VASH housing subsidy

\_\_\_\_RRH or equivalent subsidy

\_\_\_\_HCV voucher (tenant or project based) (not dedicated)

\_\_\_\_Public housing unit

\_\_\_\_ Rental by client, with other ongoing housing subsidy

 \_\_\_\_Housing Stability Voucher

\_\_\_\_Family Unification Program Voucher (FUP)

\_\_\_\_Foster Youth to Independence Initiative (FYI)

\_\_\_\_Permanent Supportive Housing

\_\_\_\_Other permanent housing dedicated for formerly homeless persons

Living Situation Verified by (Coordinated Entry Projects Only):

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Name of Continuum Project)

Is client going to have to leave their current living situation within 14 days?

 \_\_\_\_\_\_Yes \_\_\_\_\_\_No \_\_\_\_\_\_Client doesn’t know \_\_\_\_\_\_Client prefers not to answer

Has a subsequent residence been identified?

\_\_\_\_\_\_Yes \_\_\_\_\_\_No \_\_\_\_\_\_Client doesn’t know \_\_\_\_\_\_Client prefers not to answer

Does individual or family have resources or support networks to obtain other permanent housing?

\_\_\_\_\_Yes \_\_\_\_\_\_No \_\_\_\_\_\_Client doesn’t know \_\_\_\_\_\_Client prefers not to answer

Does individual or family have resources or support networks to obtain other permanent housing?

\_\_\_\_\_\_Yes \_\_\_\_\_\_No \_\_\_\_\_\_Client doesn’t know \_\_\_\_\_\_Client prefers not to answer

Has the client had a lease or ownership interest in a permanent housing unit in the last 60 days?

\_\_\_\_\_\_Yes \_\_\_\_\_\_No \_\_\_\_\_\_Client doesn’t know \_\_\_\_\_\_Client prefers not to answer

Has the client moved 2 or more times in the past 60 days?

\_\_\_\_\_\_Yes \_\_\_\_\_\_No \_\_\_\_\_\_Client doesn’t know \_\_\_\_\_\_Client prefers not to answer