

Homeward Bound Intake Form

CMIS #

VOA welcomes all people of any race, creed, color, national origin, disability, religion, sex, sexual orientation, and gender identity or gender expression.

Client Information

Name: _____
Birthdate: _____ Veteran: Y / N
Social Security #: _____ - _____ - _____
Doesn't Know Refused

Agency/Staff Information

Agency Affiliation: _____
Staff Name: _____
Staff Job Title: _____
Phone: _____ Email: _____

UNIVERSAL DATA

Ethnicity: Hispanic/Latinx Non-Hispanic/Latinx Doesn't Know Refused
Race: American Indian or Alaskan Native Asian Black or African American Native Hawaiian or Other Pacific Islander
 White Doesn't Know Refused
American Indian or Alaskan Native: Tribe _____

Gender Identity: Male Female Trans Female (MtoF) Trans Male (FtoM) Gender Non-Conforming Non-Binary
 Genderqueer Other: _____ Client Doesn't Know Client Refused Data Not Collected

Sexual Orientation: Bisexual Gay Lesbian Questioning/Unsure Heterosexual Asexual Demi-Sexual
 Pansexual Queer Other: _____ Client Refused Client Doesn't Know Data Not Collected

Living Situation:

Where did you stay last night? _____ How many days did you stay there? _____
How many times have you been homeless in the last 3 years? _____ How many days/months total? _____
Address/zip code of location where you stayed last night: _____

Housing Verification:

- By checking this box, I, the requester, hereby certify that the client named in this request has a safe and stable place to live at their desired location, whether with friends, family or a rental of their own.

Client Signature

Date

Requester Signature

Date