

Today's Date: _____ Time: _____ Date Entered Shelter _____
 Referred by Agency: _____ Staff Signature: _____ Staff Contact Phone: _____
 Staff E-Mail: _____

Initial Client Eligibility (must meet all three):

- Has income of 30% or below Area Median Income
- Has income that will sustain ongoing housing costs
- Has moderate barriers that can be overcome to sustain housing long term after 3 months of financial assistance and housing stabilization support.

AHP HPRP Rapid Re-housing Central Screening Interview

*First Name _____ *MI _____ *Last Name _____ SP ID No _____

Telephone # _____ Current Address: _____

City: _____ Zip: _____

Message Phone #: _____ Contact Name: _____

*Date of Birth _____ (mm/dd/yyyy) *Gender Female Male

Household Type: Female Single Parent Two Parent Family Male Single Parent Single Individual : Other

Number in Household: _____ No of Adults _____ No of Children _____ First Time Homeless in Shelter

Monthly Household Income: _____ Percent of Median Income: _____

Employed Employer: _____

Unemployed: Recently (within 12 months) Long Term (greater than 12 months) Unemployed job eliminated (not a moderate barrier)

Rapid Re-housing Decision Matrix

Must be homeless and meet at least one Other Criteria Below in addition to Insufficient Income	Yes No Unknown or Refused			
Is Client Homeless	Yes	No	Unk	Ref
*Insufficient Income (at less than 30% AMI)				
**Lacking adequate family/community support systems to obtain housing.	Yes	No	Unk	Ref
Sleeping in Emergency Shelter	Yes	No	Unk	Ref
Sleeping in place not meant for habitation Location:	Yes	No	Unk	Ref
Exiting institution following homelessness	Yes	No	Unk	Ref
Exiting Transitional Housing	Yes	No	Unk	Ref
Domestic Violence	Yes	No	Unk	Ref

**Lacks access to critical community services such as drug tx, DHS, or SSI.

Current Housing Status (check one):

1. Literally Homeless (places not meant for human habitation, shelter, on the streets, Transitional Housing last night)
2. Housed and at imminent risk of losing housing (being evicted, discharged from hospital, condemned housing with no subsequent housing and inadequate resources).
3. Housed and at risk of losing housing (at-risk due to high housing costs, conflict, or other conditions that put housing at risk and inadequate resources. Danger is not immediate)
4. Stably housed (not at risk of losing housing)
5. Don't Know
6. Refused to answer questions or share data

Preliminary Screening Determination (check one):

- A Referred for HPRP Rapid Re-housing Intake Assessment.*
- b. Not eligible for HPRP Rapid Re-housing at this time, referred for alternative services
- c. Ineligible Shelter Referral

I agree to share and authorize my referral agent to share information necessary to coordinate this HPRP referral.

Client Signature: _____ Date: _____

***Meeting initial criteria does not guarantee program participation.**

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Secondary Risk Factors

The Following Items Resulted in Housing Loss or Affects Current Housing	Impact on Current Housing Situation (Circle One)			
Priority Risk Factors:				
Literally Homeless	Yes No Unk Refused			
Actual or pending eviction w/in 2 weeks	Yes No Unk Refused			
Lacking adequate community support systems to sustain or obtain housing.	Yes No Unk Refused			
Institutional Care 2 weeks of discharge w/o housing plan	Yes No Unk Refused			
Condemned or Sub-Standard Housing	Yes No Unk Refused			
Significant Sudden Loss of Income	Yes No Unk Refused			
At risk of having utilities disconnected.	Yes No Unk Refused			
Severe overcrowding in doubled-up situation	Yes No Unk Refused			
50% or more of income spent on housing	Yes No Unk Refused			
Secondary Risk Factors (Required Questions)	"No Current Impact" If Historical:			
Rental Arrearage	Yes, No Current Impact, NA			
Prior Episodes of Homelessness	Yes, No Current Impact, NA			
Prior Eviction History, Number of Prior Evictions: ____	Yes, No Current Impact, NA			
Foreclosure of Rental Housing	Yes, No Current Impact, NA			
Moved 2 or more times in the last year	Yes, No Current Impact, NA			
Unemployment: Recent (within last 12 mo)	Yes, No Current Impact, NA			
Unemployment: Long Term (longer than 12 months)	Yes, No Current Impact, NA			
Unemployment: Position has been eliminated	Yes, No Current Impact, NA			
Unemployment: Job has been moved out of state	Yes, No Current Impact, NA			
Unemployment benefits have been exhausted	Yes, No Current Impact, NA			
Unstable Employment History/Frequent Job Changes	Yes, No Current Impact, NA			
Language/Communication barrier that impacts employment	Yes, No Current Impact, NA			
Lack of Transportation that impact employment	Yes, No Current Impact, NA			
Lack of HS Diploma or GED	Yes, No Current Impact, NA			
Young HOH (under 25 w children or pregnant)	Yes, No Current Impact, NA			
Experienced Domestic Violence within last 30 days	Yes, No Current Impact, NA			
High amount of medical debt	Yes, No Current Impact, NA			
Foster Care History	Yes, No Current Impact, NA			
Physical Disabilities & other Chronic Health Issues	Yes, No Current Impact, NA			
Medical Crisis that impacts employment	Yes, No Current Impact, NA			
Recent Death of Spouse or Primary Care Provider	Yes, No Current Impact, NA			
Substance Abuse condition that impacts housing	Yes, No Current Impact, NA			
Mental Health condition the impacts housing	Yes, No Current Impact, NA			
Unresolved Legal Issues	Yes, No Current Impact, NA			
Violent Misdemeanor	Yes, No Current Impact, NA			
Violent felony	Yes, No Current Impact, NA			
CSC felony (Criminal Sexual Conduct)	Yes, No Current Impact, NA			
Other (Describe)	Yes, No Current Impact, NA			
HPRP Decision Grid:				
# priority risk factors	# secondary risk factors	Total:	HH AMI	%

++More than 3 Secondary Risk Factors does not usually indicate someone with Moderate barriers and may indicate the need for intensive services to maintain housing.