

Agency Name: _____



CLARITY HMIS: CURRENT LIVING SITUATION

Use block letters for text and bubble in the appropriate circles.
Please complete a separate form for each household member.

Record the date and location of each interaction/contact with a client by recording their *Current Living Situation*.
The first *Current Living Situation* with the client will occur at the same point as *Project Start Date*.

CLIENT NAME OR IDENTIFIER: _____

DATE OF CONTACT *[Adults and Head of Household]*

		/			/				
Month			Day			Year			

CURRENT LIVING SITUATION *[Adults and Head of Household]*

FOR PROGRAMS FUNDED SOLELY BY PATH only the following values should be selected: "Place not meant for habitation (e.g., a vehicle, an abandoned building, bus/train/subway station/airport or anywhere outside)," "Emergency shelter, including hotel or motel paid for with emergency shelter voucher, or Host Home shelter," "Safe Haven," "Other," or "Worker unable to determine."

☐	Place not meant for habitation (e.g., a vehicle, an abandoned building, bus/train/subway station/airport, or anywhere outside)	☐	Host Home (non-crisis)
☐	Emergency shelter, including hotel or motel paid for with emergency shelter voucher, or Host Home shelter	☐	Staying or living in a friend's room, apartment, or house
☐	Safe Haven	☐	Staying or living in a family member's room, apartment or house
☐	Foster care home or foster care group home	☐	Rental by client, no ongoing housing subsidy
☐	Hospital or other residential non-psychiatric medical facility	☐	Rental by client, with ongoing housing subsidy
☐	Jail, prison or juvenile detention facility	☐	Owned by client, with on-going housing subsidy
☐	Long-term care facility or nursing home	☐	Owned by client, no on-going housing subsidy
☐	Psychiatric hospital or other psychiatric facility	☐	Other
☐	Substance abuse treatment facility or detox center	☐	Worker unable to determine
☐	Transitional housing for homeless persons (including homeless youth)	☐	Client doesn't know
☐	Residential project or halfway house with no homeless criteria	☐	Client prefers not to answer
☐	Hotel or motel paid for without emergency shelter voucher	☐	Data not collected
IF "RENTAL BY CLIENT, WITH ONGOING HOUSING SUBSIDY" – SPECIFY:			
☐	GPD TIP housing subsidy	☐	Emergency Housing Voucher
☐	VASH Housing subsidy	☐	Family Unification Program Voucher (FUP)
☐	RRH or equivalent subsidy	☐	Foster Youth to Independence Initiative (FYI)
☐	HCV voucher (tenant or project based) (not dedicated)	☐	Permanent Supportive Housing
☐	Public Housing Unit	☐	Other permanent housing dedicated for formerly homeless persons
☐	Rental by client, with other ongoing housing subsidy		

LIVING SITUATION VERIFIED BY *[Coordinated Entry Programs Only]*

☐	Name of Program
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Is the client going to have to leave their current living situation within 14 days?

[If 'Current Living Situation' response is a non-homeless situation]

☐	No	☐	Client doesn't know
☐	Yes	☐	Client prefers not to answer
		☐	Data not collected

Has a subsequent residence been identified?

[If 'Yes' to 'Is client going to have to leave their current living situation within 14 days?']

☐	No	☐	Client doesn't know
☐	Yes	☐	Client prefers not to answer
		☐	Data not collected

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

[If 'Yes' to 'Is client going to have to leave their current living situation within 14 days?']

☐	No	☐	Client doesn't know
☐	Yes	☐	Client prefers not to answer
		☐	Data not collected

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

[If 'Yes' to 'Is client going to have to leave their current living situation within 14 days?']

☐	No	☐	Client doesn't know
☐	Yes	☐	Client prefers not to answer
		☐	Data not collected

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

[If 'Yes' to 'Is client going to have to leave their current living situation within 14 days?']

☐	No	☐	Client doesn't know
☐	Yes	☐	Client prefers not to answer
		☐	Data not collected

Location Details

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Signature of applicant stating all information is true and correct

Date