HOPWA - HMIS Exit Form

Client Exit from Project

Client Name: ___________________________________________  Client ID#: _______________________

Project Name: ___________________________________________  Exit Date: _______________________

☐ Exit includes all household members
☐ Exit includes only these household members: ___________________________________________

Note: Please enter “Final Services” and “Financial Assistance Provided” before exiting client.

1. Reason for Leaving at Exit:

☐ Completed program
☐ Criminal activity/destruction of property/violence
☐ Death
☐ Disagreement with rules/persons
☐ Needs could not be met by project
☐ Left for housing opportunity before completing program

☐ Non-payment of rent/occupancy charge
☐ Non-compliance with project
☐ Reached maximum time allowed by project
☐ Unknown/disappeared
☐ Other (specify): __________________________________

2. Destination at Exit:

☐ Deceased
☐ Emergency shelter (including a hotel, motel, or campground paid for with emergency shelter voucher)
☐ Foster care home or foster care group home
☐ Hospital or other residential non-psychiatric medical facility
☐ Hotel or motel paid for without emergency shelter voucher
☐ Jail, prison, or juvenile facility
☐ Long-term care facility or nursing home
☐ Moved from one HOPWA funded project to HOPWA PH
☐ Moved from one HOPWA funded project to HOPWA TH
☐ Owned by client, no ongoing housing subsidy
☐ Owned by client with ongoing housing subsidy
☐ Permanent housing for formerly homeless persons (such as CoC project/HUD legacy programs/HOPWA PH)
☐ Place not meant for habitation (e.g., vehicle, abandoned building, bus/train/subway/airport, anywhere outside)
☐ Psychiatric hospital or facility
☐ Rental by client, no ongoing housing subsidy
☐ Rental by client, RRH or equivalent subsidy
☐ Rental by client, VASH subsidy
☐ Rental by client, GPD TIP subsidy
☐ Rental by client, other ongoing housing subsidy
☐ Safe Haven
☐ Staying or living with family, permanent tenure
☐ Staying or living with friends, permanent tenure
☐ Staying or living with family, temporary tenure (e.g. room/apartment/house)
☐ Staying or living with friends, temporary tenure (e.g. room/apartment/house)
☐ Substance abuse treatment facility or detox center
☐ Transitional housing for homeless persons (including homeless youth)

Effective: 2/1/2018
☐ Other (specify): __________________________________________
☐ No Exit interview completed
☐ Doesn’t know
☐ Refused

3. **Housing Assessment at Exit (All Clients):**
   ☐ Able to maintain the housing they had at project entry
   ☐ Moved to new housing unit
   ☐ Moved in with family/friends on a temporary basis
   ☐ Moved in with family/friends on a permanent basis
   ☐ Moved to a transitional or temporary housing facility or program
   ☐ Client became homeless – moving to a shelter or other place unfit for human habitation
   ☐ Client went to jail/prison
   ☐ Client died
   ☐ Doesn’t know
   ☐ Refused

3.a. **Subsidy Information** (if able to maintain the housing they had at project entry)
   ☐ Without a subsidy
   ☐ With subsidy they had at project entry
   ☐ With an on-going subsidy acquired since project entry
   ☐ Only with financial assistance other than a subsidy

3.b. **Subsidy Information** (if moved to new housing unit)
   ☐ With an on-going subsidy
   ☐ Without an on-going subsidy

4. **Update Health Insurance at Exit** (all clients)

5. **Update Disability Information at Exit** (all clients)

6. **Update Income at Exit** (Head of Household and Adults)

7. **Update Non-Cash Benefits at Exit** (Head of Household and Adults)

8. **Update Medical Assistance at Exit** (Client with HIV/AIDS)

Effective: 2/1/2018