

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:

- | | |
|---|--|
| <input type="checkbox"/> Completed program | <input type="checkbox"/> Non-payment of rent/occupancy charge |
| <input type="checkbox"/> Criminal activity/destruction of property/violence | <input type="checkbox"/> Non-compliance with project |
| <input type="checkbox"/> Death | <input type="checkbox"/> Reached maximum time allowed by project |
| <input type="checkbox"/> Disagreement with rules/persons | <input type="checkbox"/> Unknown/disappeared |
| <input type="checkbox"/> Needs could not be met by project | <input type="checkbox"/> Other (specify): _____ |
| <input type="checkbox"/> Left for housing opportunity before completing program | |

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)

- 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)