RHY/YHDP Exit Enrollment

Head of Household Name: _____

Client ID #	‡:

Date Client Exited Project:					
Destination:					
Place not meant for habitation					
Emergency shelter, including hotel or motel paid for with emergency shelter voucher					
Safe Haven					
Foster care home or foster care group home					
Hospital or other residential non-psychiatric medical facility					
Jail, prison or juvenile detention facility					
Long-term care facility or nursing home					
Psychiatric hospital or other psychiatric facility					
Substance abuse treatment facility or detox center					
Residential project or halfway house with no homeless criteria					
Hotel or motel paid for without emergency shelter voucher					
Transitional housing for homeless persons (including homeless youth)					
Host Home (non-crisis)					
Staying or living with friends, temporary tenure, (e.g., room, apartment, or house)					
Staying or living in a family, temporary tenure (e.g., room, apartment or, house)					
Staying or living with family, permanent tenure					
Staying or living with friends, permanent tenure					
Moved from one HOPWA funded project to HOPWA PH					
Moved from one HOPWA funded project to HOPWA TH					
Rental by client, with GPD TIP housing subsidy					
Rental by client, with VASH housing subsidy					
Permanent housing (other than RRH) for formerly homeless persons					
Rental by client, with RRH or equivalent subsidy					
Rental by client, with HCV voucher (tenant or project based)					
Rental by client is a public housing unit					
Rental by client, no ongoing housing subsidy					
Rental by client, with other ongoing housing subsidy					
Owned by client, with ongoing housing subsidy					
Owned by client, no ongoing housing subsidy					
Not exit interview completed					
Other					
Deceased					
Client doesn't know					
Client prefers not to answer					
Data not collected					
Project Completion Status					
Completed ProjectYouth voluntarily left early					
Youth was expelled or otherwise involuntarily discharged from project					
Major Reason (Involuntary)					
Criminal activity/destination of property/violenceNon-compliance with project rules					
Non-payment of rent/occupancy chargeReached maximum time allowed by project					
Project terminatedUnknown/disappeared					

RHY BCP Status							
Complete RHY-BCP Status Determination only once when the status determination has occurred. There should only be one RHY-BCP Status Determination per project stay							
Date RHY-BCP Status Determined:/							
Youth Eligible for RHY Servi	Youth Eligible for RHY Services:NoYes						
Runaway Youth:NoYes							
<u>Disability Information:</u> Answer for all household members (Adults and Children) Does client have a disability of long duration? YesNoClient doesn't knowClient prefers not to answerData not collected							
Circle below for each disabilit	ty type: Y=Y N=No DK=Doe	sn't Knov	v P=Prefe	ers not to	answer	NC=Not collected	
Disability Type	Disability Determination (Has disability)	IF YES:				to live independently and could be improved by	
Alcohol use disorder	Y N DK P NC		Y N DK P NC				
Drug use disorder	Y N DK P NC			Υ	N DK	P NC	
Both alcohol and drug use disorder	Y N DK P NC			Υ	N DK	P NC	
Chronic health condition	Y N DK P NC		Y N DK P NC				
Developmental disability	Y N DK P NC		N/A				
Mental health disorder	Y N DK P NC		Y N DK P NC				
Physical disability	Y N DK P NC		Y N DK P NC				
HIV/AIDS	Y N DK P NC		N/A				
Monthly Income Information: Answer for all Adults in household (18 years and older) Does client have an Income from Any Source? YesNoClient doesn't knowClient prefers not to answerData not collected							
Receives Monthly Income		Mor	thly\$	Yes 1	lo No	t Collected	
Alimony or other spousal support							
Child support							
Earned income General assistance							
Pension or retirement income from a job							
Private disability insurance							
Retirement income from social security							
Social Security Disability Income (SSDI)							
Supplemental Security Income (SSI)							
TANF (FIP)							
Unemployment Insurance							
VA Non-service-connected disability pension							
VA service-connected disa	bility compensation						
Worker's Compensation							

Non-Cash Benefits Information: Answer for all Adults in household (18 years and older) Does client have Non-Cash Benefits from Any Source? YesNoClient doesn't knowClient prefers not to answerData not collected								
Receives the following Non-cash Benefit Types: Supplemental Nutrition Assistance Program (SNAP) (food stamps)				Yes	No	Not Collected	l 	
Special Supplemental Nutrition for Women,	infants,	childre	n (WIC)					
TANF Child Care services								
TANF transportation services								
Other TANF-funded services								
Other (specify):								
Health Insurance Information: Answer for all	househo	old mem	bers (Adults and Ch	ildren)				
Covered by Health Insurance?YesNoClient doesn't k	now _	CI		nswer		Data not collecte	d	
Insurance Type	Yes	No	Insurance Type				Yes	No
MEDICAID	Health insurance through COBRA							
MEDICARE				_				
State children's health insurance			State health insu	urance for adults				
Veteran's Health Administration (VHA)			Indian Health Se	rvices P	rogram			
RHY Specific Youth Information			1					
Last Grade CompletedLess than Grade 5Grades 5-6Grades 7-8Grades 9-11Grade 12School program does not have grade levelsGEDSome collegeAssociates degreeBachelor's degreeGraduate degreeVocational certificationClient Doesn't KnowClient RefusedData not collected School StatusAttending school regularlyAttending school irregularlyGraduated from high schoolObtained GEDDropped OutSuspendedExpelledClient doesn't knowClient refusedData not collected Employed								
NoYesClient doesn't knowClient refused Data not collected Type of Employment Full time Part time Seasonal/Sporadic (including day labor) Why Not Employed								
Looking for workUnable to workNot looking for work General Health StatusExcellentVery GoodFairPoorClient doesn't knowClient						lient		
refusedData not collected Dental Health StatusExcellentVery Good Client refused Data not collected	Fair					_		

ExcellentVery GoodFairPoorClient doesn't knowClient refusedData not collected Pregnancy StatusNoYesClient doesn't knowClient refusedData not collected Due Date:// Commercial Sexual Exploitation/Sex Trafficking				
NoYesClient doesn't knowClient refusedData not collected Due Date:/				
Commercial Sexual Exploitation/Sex Trafficking				
Ever received anything in exchange for sex (e.g., money, food, drugs, shelter)?				
YesNoClient doesn't knowClient prefers not to answerData not collected				
In the last three months?				
YesNoClient doesn't knowClient prefers not to answerData not collected				
How many times?				
1-38-1112 or more				
Client doesn't know Client prefers not to answer Data not collected				
Ever made/persuaded/forced to have sex in exchange for something?				
YesNoClient doesn't knowClient prefers not to answerData not collected				
In the last three months? YesNoClient doesn't knowClient prefers not to answer Data not collected				
Youth Education Status (YHDP Programs ONLY)				
Current Enrollment and attendance				
Not currently enrolled in any school or educational course				
Currently enrolled but NOT attending regularly (when school or the course is in session)				
Currently enrolled and attending regularly (when school or course is in session) Client doesn't know				
Client doesn't knowClient prefers not to answer				
Data not collected				
Most recent Education Status				
K:12 Graduated from high school				
K:12 Obtained GED K:12 Dropped Out				
K:12 Suspended				
K:12 Expelled				
Higher Education: Pursuing a credential but not currently attending				
Higher Education: Dropped out				
Higher Education: Obtained a credential/degree				
Client doesn't know				
Client prefers not to answer Data not collected				

Labor Exploitation/Trafficking
Ever afraid to quit/leave work due to threats of violence to yourself, family, or friends?
YesNoClient doesn't know Client prefers not to answer Data not collected
Ever promised work where work or payment was different than you expected?
Yes No Client doesn't know Client prefers not to answer Data not collected
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Felt ferred research greenward authiched into continuing the into
Felt forced, coerced, pressured, or tricked into continuing the job?
YesNoClient doesn't know Client prefers not to answer Data not collected
In the last three months?
YesNoClient doesn't know Client prefers not to answer Data not collected
Counseling
Counseling received by client?
YesNo
Identify the types of counseling received:
IndividualFamilyGroup – including peer counseling
Identify the number of sessions received by exit:
Total number of sessions planned in youth's treatment or service plan:
A plan is in place to continue counseling after exit
YesNo
Safe and appropriate exit
Exit destination safe – as determined by client
YesNoClient doesn't know Client prefers not to answer Data not collected
Exit destination safe – as determined by the project/caseworker
YesNoWorker doesn't know
Client has permanent positive adult connections outside of project
YesNoWorker doesn't know
Client has permanent positive peer connections outside of project
YesNoWorker doesn't know
Client has permanent positive community connections outside of project
YesNoWorker doesn't know