

HOMELESS VETERAN COORDINATED REFERRAL SYSTEM- NORTH DAKOTA

The Supportive Services for Veteran Families (SSVF) program and its partners have committed to end homelessness among Veterans. SSVF's Homeless Veteran Coordinated Referral System will ensure that every Veteran experiencing homelessness has access to appropriate services. Anyone who served in the U.S. Armed Forces, Reserves or National Guard can join the referral system. The Homeless Veteran Coordinated Referral System is a partnership of agencies sharing information to provide a team of housing and service professionals to work together to help you access housing and services that meet your needs.

Description of Information That is Shared

This Client Release form authorizes the following identifying information to be routinely shared using the Homeless Veteran Coordinated Referral System to better help me and/or my family:

- Your name and information about how to contact you
- Your Veteran status, including type of discharge
- Your housing status and homelessness history, including barriers to housing
- Your eligibility for housing programs, which may include whether you qualify for any special kinds of housing based on disabling conditions or any history of drug abuse, alcoholism, or alcohol abuse;
- Names of current and past social service providers
- General Health Information, including physical health & behavioral health

Purpose of Sharing

Information from the CARES screening and assessments will be shared for the purpose of:

- Assessing my household's program eligibility
- Prioritizing my household's need for services
- Linking my household to the most appropriate services
- Evaluating CARES program and system performance
- Evaluating the homeless response system for gaps, needs and duplication.

List of Partner Agencies

ND Community Action Partnership	Southeastern North Dakota Community Action Agency	North Dakota Department of Veteran Affairs
CAP- Williston	Community Action- Region VI	North Dakota Continuum of Care
CAP- Minot	Community Action- Region VII	County Veteran Services Offices for all counties in North Dakota
Dakota Prairie Community Action Agency	Community Action- Dickinson	
Red River Valley Community Action Agency	U.S. Department of Veteran Affairs- Fargo	

Put a line through and initial any agency in the above list with whom you do not wish to share information. If crossing off agency at a later time, please indicate date.

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I, _____, understand that the Homeless Veteran Coordinated Referral System is a partnership of agencies sharing information to provide a more coordinated homeless response system. I authorize the information collected about my household to be included in the list, and shared with partners listed below in order to provide me with the best services possible. The information will also be used by Continuum of Care administrators for system evaluation, which will help improve services to me and others in the CARES region.

By initialing the "yes" below, I agree that information collected in the CARES assessments and in the HMIS and CARES Waitlist can be shared with CARES Partners as described below. The agencies that participate in the HMIS and CARES may change from time to time. A copy of the current list of agencies is available upon request.

Yes _____ No _____ Date: _____

If checked "No" your data will be entered into HMIS and waitlist as anonymous.

You understand that:

- You have the right to refuse to sign this form.
- Your participation in the Coordinated Referral System is voluntary.
- Services will not be withheld because you chose not to sign.
- You will receive a copy of this form after you sign it.
- You can revoke this release of information at any time.

Name of Veteran: _____

Signature: _____ Date: _____

Person Completing Survey: Please complete the following information:

Number in Household (Including Head of Household): _____ County: _____

Location Veteran can be found: _____

Phone Number/Contact Information: _____

Veteran Status and Eligibility (Circle below):

Veteran – VA Eligible

Veteran – Not VA Eligible

Unknown

Homeless Status (Circle One Below):

	Shelter		Transitional Housing
	Doubled Up		Place Not Meant for Habitation
	Treatment		Other: _____

Fax completed releases to (701)298-3115 Attn: Sarah Hasbargen