**SAMPLE FORM FOR TRACKING HOUSING AND SAFETY STATUS**

*This form is designed to be completed as clients enter the program and updated periodically throughout their program participation (e.g., monthly)*

**Client’s Name:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Today’s date:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |
| --- | --- |
| **Client’s current housing situation:** (please check all that apply) | \_\_\_ on the street\_\_\_ emergency shelter:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ transitional shelter:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ staying with others (who?)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ temporary housing\_\_\_ stable housing (apartment, house, etc.)\_\_\_ other: (please specify): |
| **Rating of client’s physical safety at this location:** | \_\_\_ immediate danger\_\_\_ high potential for danger\_\_\_ average potential for danger\_\_\_ lower-than-average potential for danger |
| **Rating of client’s emotional safety/stability at this location:**  | \_\_\_ immediate risk to emotional stability\_\_\_ high risk to emotional stability\_\_\_ average risk to emotional stability\_\_\_ lower-than-average risk to emotional stability |
| **Rating of overall stability for current housing situation:** | \_\_\_ no stability\_\_\_some stability\_\_\_ average stability\_\_\_ adequate stability\_\_\_ possibility for long-term stability |