**ARPA Rapid Rehousing Assistance Application Questions**

Collect for (HoH) on all applications
Record data on Client Profile for applicants who do not receive assistance

Project Name (Enter Data As): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Client Record

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_ First Middle Last Suffix

|  |  |
| --- | --- |
| Name Data Quality * Full Name Reported
* Partial, Street Name, or Code Name Reported
 | * Client doesn’t know
* Client refused
 |

Social Security Number \_\_\_\_\_\_\_\_\_\_\_\_-\_\_\_\_\_\_\_\_\_-\_\_\_\_\_\_\_\_\_\_\_

|  |  |
| --- | --- |
| * Full SSN Reported
* Approximate or Partial SSN Reported
 | * Client doesn’t know
* Client refused
 |

U.S. Veteran  No  Yes  Client doesn’t know  Client refused

Date of Birth \_\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |
| --- | --- |
| * Full DOB Reported
* Approximate or Partial DOB Reported
 | * Client doesn’t know
* Client refused
 |

Gender(s) select all that apply

|  |  |
| --- | --- |
| * Female
* Male
* Transgender
* Questioning
 | * A gender other than singularly female or male (e.g., non-binary, genderfluid, agender, culturally specific gender)
* Client doesn’t know
* Client refused
 |

Race(s) select all that apply

|  |  |
| --- | --- |
| * American Indian, Alaska Native, or Indigenous
* Asian or Asian American
* Black, African American, or African
 | * Native Hawaiian or Pacific Islander White
* Client doesn’t know
* Client refused
 |

Ethnicity

|  |  |
| --- | --- |
| * Non-Hispanic/Non-Latin(a)(o)(x)
* Hispanic/Latin(a)(o)(x)
 | * Client doesn’t know
* Client refused
 |

**ARPA Rapid Rehousing Assistance Application Questions**

Is this application a Coordinated Entry referral?  No  Yes

Information Collection Date \_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

Date of Application\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

Date of decision \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

Decision of application (select from dropdown)

* Accepted
* Application Withdrawn
* Denied

Reason for rejection of RRH application

* Other
* Over Income Limit
* Paperwork not complete

*If other, list: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

End Date *(Application for ARPA mortgage assistance End Date)* \_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

***Client Contact Information***

Start Date (Date of Information) \_\_\_\_\_/\_\_\_\_/\_\_\_\_\_

Contact Type

|  |  |  |
| --- | --- | --- |
| * Address
* Email
* Fax
 | * Home Phone
* Landmark/Address
* Mobile Phone
 | * Pager
* Voicemail/message
* Work phone
 |

Contact Information

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

End Date (last date information can be used) \_\_\_\_\_/\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_