

## **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 you and/or your 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
- Names of current and past social service providers
- General Health Information, including physical health & behavioral health

### **Purpose of Sharing**

Information from the Homeless Veteran Coordinated Referral System will be shared for the purpose of:

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

### **Who Will Receive Information: List of Partner Agencies**

North Dakota Community Action Partnership	Southeastern North Dakota Community Action Agency	North Dakota Department of Veteran Affairs
Community Action Partnership- Williston	Community Action- Region VI	North Dakota Continuum of Care
Community Action Partnership - 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.**

## HOMELESS VETERAN COORDINATED REFERRAL SYSTEM- NORTH DAKOTA

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 state.

Any information disclosed prior to written revocation of this authorization shall not be a breach of confidentiality. A photocopy of this authorization is as effective as the original. Unless otherwise agreed to in writing, information may be disclosed under this authorization in any form or medium, including but not limited to, oral, written, or electronic transmission.

This authorization to disclose information remains in effect until 1 year from now  
(Date) OR: \_\_\_\_\_ (Specify Event Terminating Operation of the Release)

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 in writing to the agency or person.

By initialing the "yes" below, I agree that information collected in the Homeless Veteran Coordinated Referral System as described above. The agencies that participate in the referral system may change from time to time. A copy of the current list of agencies is available upon request.

Participant Initial: Yes \_\_\_\_\_ No \_\_\_\_\_ Date: \_\_\_\_\_

If checked "No" your data will be entered into the referral system and waitlist as anonymous.

Name of Veteran: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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Person Completing Survey: Please complete the following information:

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

Number in Household (Including Head of Household): \_\_\_\_\_ County: \_\_\_\_\_

Location Veteran can be found: \_\_\_\_\_

Phone Number/Contact Information: \_\_\_\_\_

Veteran Status and Eligibility (Circle):    Veteran – VA Eligible    Veteran – Not VA Eligible    Unknown

Homeless Status (Circle One Below):

<input type="checkbox"/>	Shelter	<input type="checkbox"/>	Transitional Housing	<input type="checkbox"/>	Place Not Meant for Habitation
<input type="checkbox"/>	Doubled Up	<input type="checkbox"/>	Treatment	<input type="checkbox"/>	Other (Explain):