



LANE COUNTY HMIS **BASIC UPDATE/INTERIM REVIEW FORM**

Agency	Project Name	Client ID #	Update/Review Date
			/ /

TYPE OF ASSESSMENT

<input type="checkbox"/> 30-Day Review	<input type="checkbox"/> 90-Day Review	<input type="checkbox"/> 6-Month Review	<input type="checkbox"/> Annual Assessment
<input type="checkbox"/> 60-Day Review	<input type="checkbox"/> 120-Day Review	<input type="checkbox"/> 9-Month Review	<input type="checkbox"/> Update (used for adding HMID)

HEAD OF HOUSEHOLD (HoH) NAME (first, middle initial, last, suffix)

EXISTING HOUSEHOLD INFO

<input type="checkbox"/> full <input type="checkbox"/> partial	Is this form adding client(s) to an existing household? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, HMIS Client ID (HoH) _____
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HEAD OF HOUSEHOLD CONTACT INFO

Name	Housing status	Email	Address	Contact #
				<input type="checkbox"/> Cell Phone <input type="checkbox"/> Message Phone

Housing Status selections: Unsheltered or Emergency Shelter, Doubled up, Transitional Housing Project, Housed

HOUSEHOLD MEMBERS IN THIS UPDATE (LIST NAMES AND CLIENT IDS)

NAMES	CLIENT #

HOUSEHOLD TYPE

<input type="checkbox"/> Adult Only
<input type="checkbox"/> Adult(s) and Child(ren)
<input type="checkbox"/> Child(ren) Only

HOUSEHOLD SIZE AND INCOME same for every HH member

Household Size:	Household Income:
Level of Family Income:	Percent of Median Family Income:
<input type="checkbox"/> Up to 50% <input type="checkbox"/> 51-75% <input type="checkbox"/> 76-100%	<input type="checkbox"/> 0-30% <input type="checkbox"/> 30-50%
<input type="checkbox"/> 101-125% <input type="checkbox"/> 126-150% <input type="checkbox"/> 151-175%	<input type="checkbox"/> 50-80% <input type="checkbox"/> Over 80%
<input type="checkbox"/> 176-200% <input type="checkbox"/> 201-250% <input type="checkbox"/> Over 250%	