



## Navigator's RRH Participant Case Summary

Participant HMIS #: \_\_\_\_\_

Navigator Name: \_\_\_\_\_

Navigator Agency: \_\_\_\_\_

Date Rapid Rehousing Overview Pamphlet Issued to participant: \_\_\_\_\_

Family Composition: (who will be housed with HOH)

**Current Living Situation:**

- Shelter, Name: \_\_\_\_\_
- Agency paid hotel
- Place not meant for human habitation

**Interested in shelter?**

- No
- N/A (already in shelter)
- Yes

If yes, Shelter Tool completed on: \_\_\_\_\_

**Marital Status:**

- Single    Married    Widow

**Preferred Language Spoken:**

- English    Spanish    Creole

**Methods of contact:**

- Phone: \_\_\_\_\_
- Email: \_\_\_\_\_
- Point of contact: \_\_\_\_\_

**Highest level of education completed:**

- High School Diploma    GED    Some College    Technical/Occupational Certificate
- Master's Degree    Associates Degree    Bachelor's Degree    None

**Any pets or service animals?**

- No
- Yes, *if so*, what type of animal? (i.e. dog, bird, cat, snake, etc.)

**Medically diagnosed physical or psychological disability?**

- No
- Yes (If yes, list the type)

\_\_\_\_\_

\_\_\_\_\_

	<u>All Household Members</u> <i>Note: At least one minor under the age 18 has to be in the home</i>	<u>Age</u>	<u>Relationship</u>
<u>1</u>			<u>Self</u>
<u>2</u>			
<u>3</u>			
<u>4</u>			
<u>5</u>			
<u>6</u>			
<u>7</u>			
<u>8</u>			
<u>9</u>			



**Legal Concerns:**

Any history of felony convictions?  No  Yes (If yes, list the charge)

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Any history of evictions?  No  Yes (If yes, list the # of evictions and year of each eviction)

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**Current Financial Situation:**

Total Household Gross income for all adults 18+: \$ \_\_\_\_\_

Any known financial stressors (economic events that create anxiety or worry):  No  Yes (If yes, list type)  
*ie. ( Medical Debt, Credit Card Debt, Rental Arrears, Utility Debt, Job Loss, Lack of Stable Income, etc.)*

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**Participant Strengths** (potential sources of strength, coping, and resilience)

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**Acknowledgment**

By signing this form, you acknowledge:

- You read, understand and have been provided information about the Rapid Rehousing Program.
- You have received a copy of the RRH Overview Pamphlet
- You have answered all the questions truthfully and to the best of your ability

**Participant Name:** \_\_\_\_\_

**Participant Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Receipt by (Navigator):** \_\_\_\_\_