### Medical Assistance

**Receiving Public HIV/AIDS Medical Assistance?**
- Yes
- No
- Client Refused
- Client Doesn’t Know
- Data Not Collected

**If No, Reason:**
- Applied; Decision Pending
- Applied; Client Not Eligible
- Client Did Not Apply
- Insurance Type N/A For This Client
- Refused  □ Doesn’t Know  □ Not Collected

### Receiving AIDS Drug Assistance Program (ADAP)

- Yes
- No
- Client Refused
- Client Doesn’t Know
- Data Not Collected

**If No, Reason:**
- Applied; Decision Pending
- Applied; Client Not Eligible
- Client Did Not Apply
- Insurance Type N/A For This Client
- Refused  □ Doesn’t Know  □ Not Collected

### Receiving Ryan White-Funded Medical or Dental Assistance?

- Yes
- No
- Client Refused
- Client Doesn’t Know
- Data Not Collected

**If No, Reason:**
- Applied; Decision Pending
- Applied; Client Not Eligible
- Client Did Not Apply
- Insurance Type N/A For This Client
- Refused  □ Doesn’t Know  □ Not Collected

### T-Cell (CD4) Count Available

- Yes  Count: ____________
- No
- Client Refused
- Client Doesn’t Know
- Data Not Collected

**Viral Load Information**

- Available  Count: ____________
- Not Available
- Undetectable
- Client Refused
- Client Doesn’t Know
- Data Not Collected

### Has the Participant Been Prescribed Anti-Retroviral Drugs?

- Yes
- No
- Client Refused
- Client Doesn’t Know
- Data Not Collected

**If linked to a mental health agency please list:**

- □ Yes
- □ No

**OR:**

- □ Not currently linked, but **NEEDS** linkage
- □ Not currently linked, does **NOT** need linkage

### Pregnant

- □ No
- □ Yes

**Due Date:** __________________________

Page 1
# Employment

## Employed
- **Yes**
- **No**
- **Data not collected**

### If Currently Employed, Select Tenure
- **Full-time**
- **Part-time**
- **Seasonal**
- **Data not collected**

## If Employed Average Number of Hours Worked Per Week
- **Looking for Work**
- **Unable to Work**
- **Not Looking for Work**
- **Client refused**
- **Client doesn’t know**
- **Data not collected**

## Last Grade Completed

### Highest Level of Education Attained
- **Less than Grade 5**
- **Grades 5-6**
- **Grades 7-8**
- **Grades 9-11**
- **12th grade/High School Diploma**
- **School program does not have grade levels**
- **GED**
- **Some College**
- **Associate’s Degree**
- **Bachelor’s Degree**
- **Graduate Degree**
- **Vocational Certification**
- **Client doesn’t know**
- **Client refused**
- **Data not collected**

## Received Vocational Training
- **Yes**
- **No**
- **Client doesn’t know**
- **Client refused**