

# SSVF Supplemental Intake Form

## Military History

Year Entered Service: \_\_\_\_\_

Year Separated from Service: \_\_\_\_\_

Military Branch: \_\_\_\_\_

Discharge Status: \_\_\_\_\_

Theater of Operations: World War II  Yes  No

Theater of Operations: Korean War  Yes  No

Theater of Operations: Vietnam War  Yes  No

Theater of Operations: Persian Gulf War  Yes  No

Theater of Operations: Afghanistan  Yes  No

Theater of Operations: Iraq (Iraqi Freedom)  Yes  No

Theater of Operations: Iraq (New Dawn)  Yes  No

Theater of Operations: Other Operations  Yes  No

## Additional Information

Chart In CPRS  Yes  No

Chart In HOMES  Yes  No

VAMC Station #: \_\_\_\_\_

## Connection With SOAR

No  Yes  Client doesn't know  Client refused  Data Not Collected

## Household Income as Percent of AMI

Less Than 30%  30% to 50%  Greater Than 50%

## 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

\_\_\_\_\_

## If No, Why Not Employed

Looking for Work

Unable to Work

Not Looking for Work

Client refused

Client doesn't know

Data not collected

**Last Grade Completed**

- 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

**Zip Code of Last Permanent Address**

**General Area of Previous Residence**

- Within Franklin County (Outside City-Columbus)
- Outside Franklin County (Outside City-Columbus)
- Outside Franklin County (Inside City-Columbus)

- Within Franklin County (Within City-Columbus)
- Outside of Ohio
- Client Doesn't Know

**Homeless Primary Reason**

- Addiction
- Divorce
- Domestic Violence
- Evicted
- Family/Personal Illness
- Jail/Prison
- Lack of affordable housing
- Moved to seek work
- Natural Disaster
- Physical/mental disability
- Relationship problems
- Substandard housing
- Unable to pay rent/mortgage
- Unemployment
- Other

**Homeless Secondary Reason**

- Addiction
- Divorce
- Domestic Violence
- Evicted
- Family/Personal Illness
- Jail/Prison
- Lack of affordable housing
- Moved to seek work
- Natural disaster
- Physical/mental disability
- Relationship Problems
- Substandard Housing
- Unable to pay rent/mortgage
- Unemployment
- Other
- No secondary reason for source of crisis

**Pregnant**     No     Yes

Due Date: \_\_\_\_\_

## COVID Vaccine Information

### COVID Vaccine Received

Fully vaccinated

Not vaccinated

Partially vaccinated

Client doesn't know

### Vaccine Brand Options

Pfizer

Johnson & Johnson

Moderna

Date of 1st dose:

Expected date of 2nd dose: