### School Information

**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

**School Status**

- [ ] Attending School Regularly
- [ ] Attending School Irregularly
- [ ] Graduated From High School
- [ ] Obtained GED
- [ ] Dropped Out
- [ ] Suspended
- [ ] Expelled
- [ ] Client doesn’t know
- [ ] Client refused
- [ ] Data not collected

**Current School Enrollment and Attendance**

- [ ] Not Currently Enrolled in Any School or Educational Course
- [ ] Currently Enrolled But NOT Attending Regularly (when school or the course is in session)
- [ ] Currently Enrolled and Attending Regularly (when school or the course is in session)
- [ ] Client doesn’t know
- [ ] Client refused
- [ ] Data not collected

**Most Recent Educational Status**

- [ ] K12: Graduated From High School
- [ ] K12: Obtained GED
- [ ] K12: Dropped Out
- [ ] K12: Suspended
- [ ] K12: Expelled
- [ ] Higher Education: Pursuing a Credential But Not Currently Attending
- [ ] Higher Education: Dropped Out
- [ ] Higher Education: Obtained a Credential/Degree
- [ ] Client doesn’t know
- [ ] Client refused
- [ ] Data not collected
### Current Educational Status

- [ ] Pursuing a High School Diploma of GED
- [ ] Pursuing Associate's Degree
- [ ] Pursuing Bachelor's Degree
- [ ] Pursuing Graduate Degree
- [ ] Pursuing Other Post-Secondary Credential
- [ ] Higher Education: Pursuing a Credential But Not Currently Attending
- [ ] Client doesn’t know
- [ ] Client refused
- [ ] Data not collected

### Additional Information

#### Sexual Orientation

- [ ] Heterosexual
- [ ] Bisexual
- [ ] Gay
- [ ] Questioning/Unsure
- [ ] Lesbian
- [ ] Other Specify: ________________
- [ ] Client Refused
- [ ] Client Doesn’t Know
- [ ] Data Not Collected

#### Employed

- [ ] Yes
- [ ] No
- [ ] Data not collected

#### If Currently Employed, Select Tenure

- [ ] Full-time
- [ ] Part-time
- [ ] Seasonal
- [ ] Data not collected

#### If No, Why Not Employed

- [ ] Looking for Work
- [ ] Unable to Work
- [ ] Not Looking for Work
- [ ] Client refused
- [ ] Client doesn’t know
- [ ] Data not collected

#### General Health Status

- [ ] Excellent
- [ ] Very Good
- [ ] Good
- [ ] Fair
- [ ] Poor
- [ ] Client Refused
- [ ] Client Doesn’t Know
- [ ] Data Not Collected

#### Dental Health Status

- [ ] Excellent
- [ ] Very Good
- [ ] Good
- [ ] Fair
- [ ] Poor
- [ ] Client Refused
- [ ] Client Doesn’t Know
- [ ] Data Not Collected
<table>
<thead>
<tr>
<th>Mental Health Status</th>
<th>Substance Use Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>□ Excellent</td>
<td>□ Severe Use/Dependence</td>
</tr>
<tr>
<td>□ Very Good</td>
<td>□ Dependence</td>
</tr>
<tr>
<td>□ Good</td>
<td>□ Persistent Use Within Last 6 Months</td>
</tr>
<tr>
<td>□ Fair</td>
<td>□ Single Use Within Last 6 Months</td>
</tr>
<tr>
<td>□ Poor</td>
<td>□ No Use Within Last 6 Months</td>
</tr>
<tr>
<td>□ Client Refused</td>
<td>□ Client Refused</td>
</tr>
<tr>
<td>□ Client Doesn’t Know</td>
<td>□ Client Doesn’t Know</td>
</tr>
<tr>
<td>□ Data Not Collected</td>
<td>□ Data Not Collected</td>
</tr>
</tbody>
</table>

Pregnant  □ No  □ Yes  Due Date:__________

Formerly a Ward of Child Welfare/Foster Care
□ Yes  □ No  □ Client Refused  □ Client Doesn’t Know  □ Data not collected

If Yes, Number of Years__________ Months__________

Formerly a Ward of Criminal Justice System
□ Yes  □ No  □ Client Refused  □ Client Doesn’t Know  □ Data not collected

If Yes, Number of Years__________ Months__________

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

Zip Code of Last Permanent Address
General Area of Previous Residence

☐ Within Franklin County (Outside City-Columbus)  ☐ Within Franklin County (Within City-Columbus)
☐ Outside Franklin County (Outside City-Columbus)  ☐ Outside of Ohio
☐ Outside Franklin County (Inside City-Columbus)  ☐ Client Doesn’t Know

If linked to a mental health agency please list:

OR ☐ Not currently linked, but NEEDS linkage
    ☐ Not currently linked, does NOT need linkage

COVID Vaccine Information

COVID Vaccine Received

☐ Fully vaccinated  ☐ Partially vaccinated
☐ Not vaccinated  ☐ Client doesn’t know

Vaccine Brand Options

☐ Pfizer  ☐ Moderna
☐ Johnson & Johnson

Date of 1st dose:

Expected date of 2nd dose:

Date of 2nd dose:

Client Signature: __________________________  Date: __________________________