Critical Assistance Client File Checklist

Client Information

Household Name:	
HMIS ID #:	
Entry Date:	Exit Date:

Services Provided *(check all that apply)*

☐ Home Repair
☐ Mortgage Assistance
☐ Property Tax Assistance
☐ Rent Assistance
☐ Security Deposit Assistance
☐ Utility Assistance

Required Documents

1. _____ **Intake form/initial assessment** along with the **Critical Assistance application**.

2. _____ **Release of information form** of the applicant for the Critical Assistance program and the Homeless Information Management System (HMIS).

3. _____ Documentation of eligibility, including **third-party income documentation**, **income calculation**, and **need of assistance**.

4. _____ **Landlord verification form** for security deposit and/or rental assistance, if applicable.

5. _____ Certification of the client's program **entry into HMIS**.

6. _____ **Inspection** of the unit or **self-certification** by the client ensuring that the unit meets basic health and safety conditions.

7. _____ **Correspondence** with the Critical Assistance client regarding the need for additional documentation and/or payment approval.

8. _____ Documentation of a **one-time payment** to the Critical Assistance client along with a copy of their overdue bill.