

INDIVIDUAL ADULT PRIORITIZATION SCREENING

IMPORTANT: the information related to the questions below **must be entered into the identified location in HIFIS**. *This form is intended as a guide, - you do not need to enter information directly on it.*

Entering information directly into HIFIS is critical as entering the information incorrectly may directly impact the client during the prioritization process. The prioritization report will only use the information from specified locations in HIFIS.

NAME: _____

DATE OF BIRTH: _____

WHAT DOCUMENTATION DOES THIS PERSON HAVE?

- BIRTH CERTIFICATE
- DRIVERS LICENSE
- OHIP CARD
- ONTARIO PHOTO CARD
- PROOF OF INCOME ASSISTANCE OR EMPLOYMENT INCOME
- PASSPORT
- STATUS CARD

WHAT IS THEIR SOURCE AND AMOUNT OF MONTHLY INCOME:

SOURCE: _____

MONTHLY AMOUNT \$ _____

IS THIS PERSON A SURVIVOR OF DOMESTIC/INTIMATE PARTNER VIOLENCE?

- YES
- NO

DOES THIS PERSON HAVE CHILDREN IN CARE THAT WILL BE REUNITED ONCE HOUSING IS ACQUIRED?

Children must be listed on the Common Consent Form in the dependant's section and added to HIFIS

- YES
- NO
- N/A

DOES THIS PERSON HAVE A DOCUMENTED DISABILITY?

- YES – THEY HAVE A DISABILITY AND DOCUMENTATION OF IT
- YES – THEY HAVE A DISABILITY BUT DO NOT HAVE DOCUMENTATION FOR IT
- NO

