## **CLIENT FILE CHECKLIST**

	The following items (where applicable) should be included in every client file:								
	CSP ID #:								
	Intake Date:								
0	CSP Intake Form (AII)								
0	Homeless Status Verification (All)								
	HOMELESS STATUS (use date of completion to indicate)								
		Third- Party, Source	Third-Party, Written (Inclusive of CSP Records)	Third-Party, Oral	Intake Observation				
	Type of Certification Form								
	Third-Party, Oral <u>OR</u> Intake Observation Confirmation (detail is required):								
0	O Client Acknowledgement of Data Collection form (All)								
0	Individualized Housing Stabilization Plan (IHSP) (All – within five (5) days of entry)								
0	Evidence of IHSP Progress twenty (20) days from entry (Single Adult Shelters)								
0	Evidence of IHSP Progress thirty (30) days from entry (Single Adult Shelters)								
0	Vulnerability Assessment (Single Adult Shelters & Outreach)								
0	Record of Services Provided and/or Referrals to Other Programs (All)								

0	Client Personal Documentation that Supports CSP Data (All)							
0	<ul> <li>Exit Paperwork (all, when applicable, determined by individual case)</li> <li>CSP Exit Form</li> <li>Evidence of Service Restriction / Ban Form</li> <li>Evidence of an appeal process in which the client was given the opportunity to present written or oral objections to the termination decision</li> <li>Exit Survey</li> </ul>							
	FOR CLIENTS APPLYING FOR FINANCIAL ASSISTANCE:							
	INCOME	E VERIFICAT	ΓΙΟΝ (use date	of completion	n to indicate)			
		Third- Party, Source	Third-Party, Written	Third-Party, Oral	Intake Observation	Self- Certification		
	Type of Certification Form							
	Third-Party, Oral (detail of conversation):							
0	Lease Agreeme	ent (Direct	Housing, PSH)					
	Lease Agreement (Direct Housing, PSH)							
0	Habitability Form (Direct Housing)							
0	CSB Housing Inspection Form, including lead-based paint visual assessment							
	(HEARTH Operating P&P attachment 25) and signed acknowledgement that client							
	received the federal lead information pamphlet (All)							
0	Rent Reasonableness Form (Direct Housing, PSH)							

0	Budget Form (Direct Housing, except J2H)						
0	Funding Assistance Determination Form (Direct Housing, except J2H)						
0	Rental Assistance Agreement (Direct Housing, except J2H)						
0	Staff Certification of Eligibility for Assistance (Direct Housing, except J2H)						
0	Self-Declaration OR Verification of Income (Direct Housing, PSH – 90 days after enrollment; J2H – at entry into program)						
0	Funding / Assistance Application Denial (For clients denied financial assistance – Direct Housing)						
0	O If applying for utility assistance, please document all attempts to obtain financial assistance from other sources on the lines below (Direct Housing):						
DATE	SOURCE	TYPE OF CONTACT (Gas, Electric, etc.)	RESULT OF CONTACT (Amount Received, if Applicable)	CASE MANAGER			
CSP DATA TREATMENT COMPLIANCE:							
See CSB's Data Dictionary at <a href="https://www.csb.org">www.csb.org</a> for a complete list of required data elements by program.							
PROGRAM STAFF (print / signatures / dates):							