

Maricopa County Regional Coordinated Entry System

VI-SPDAT Assessment Screening and Match Initiation Consent Form

Authorization to Participate in Housing Eligibility Survey

Participant Last Name:	Participant First Name:	DOB (mm/dd/yyyy):
HMIS Client ID Number (if applicable):		Social Security Number:
Where and when is the best way to contact you?		
Phone (If available):	Email (If available):	
Emergency Contact (Name and Contact Info):		
Employer (Name and Phone)(If applicable):		

We are here today to talk to you about your housing and service needs. If you give us permission, we will ask you questions about your health and housing for about 20-30 minutes. Participation in the VI-SPDAT Assessment and Match Initiation is completely voluntary. If you feel uncomfortable or upset during the interview, you may ask the interviewer to take a break, skip any of the questions, or stop the survey. At any time you may request that your information be removed from the database by contacting the Regional Coordinated Assessment Centers at the Human Services Campus Brian Garcia Welcome Center at (602) 759-5356.

No one will be upset or angry if you decide not to be interviewed today. You will not be denied access to necessary services based on your refusal to participate in the assessment interview.

Please initial below if you agree with the following statements:

_____ I agree to allow my responses to VI-SPDAT Assessment and Match Initiation to be disclosed and received by the organizations that participate in the Maricopa County Regional Coordinated Entry System and to be used to determine if I am eligible for participating housing, service and related programs. These organizations include but are not limited to:

- | | |
|------------------------------------|---|
| A New Leaf, Inc. | Lodestar Day Resource Center |
| Area Agency on Aging | Native American Connections |
| Arizona Behavioral Health Corp. | One N Ten |
| Catholic Charities | Recovery Innovations of Arizona |
| Central Arizona Shelter Services | Save the Family Foundation of Arizona |
| City of Phoenix | Southwest Behavioral Health |
| Community Information and Referral | Tumbleweed Center for Youth Development |
| Homeward Bound | UMOM New Day Center |
| Human Services Campus | United States Veteran's Initiative |
| Labor's Community Service Agency | Valley of the Sun United Way |

**For a complete list of participating agencies, please call or visit the Brian Garcia Welcome Center
204 S 12th Avenue, Phoenix AZ 85007 (602) 759-5356.**

__ I understand that the information from this survey will be entered into the Maricopa County Regional Coordinated Entry database. My personal information will be kept in accordance with all federal, state and local laws and regulations related to protecting personal information.

__ I understand that the following information can be shared with participating agencies in Maricopa County and other agencies as needed to help me find appropriate housing and/or services:

- Birthdate
- Gender

- Photo (optional)
- Housing and homelessness history
- History of medical and/or mental health treatment
- Income
- Contact information
- Additional information used for matching me with suitable housing and/or services

___ I allow my case manager or outreach worker to enter my personal information to the interview questions into secure database. My signature below signifies my permission.

___ I, or my outreach worker/case manager, may be contacted about my survey.

___ I understand that participating in the Maricopa County Regional Coordinated Entry System does not guarantee that I will be eligible for, or admitted into, a housing program.

___ I understand that the Maricopa County Regional Coordinated Entry System will act as the agency that matches my information against eligibility requirements of housing that becomes available and that I may be eligible for.

Important Rights and Other Required Statements You Should Know

- You may revoke this authorization at any time. To do so, please contact the Maricopa County Regional Coordinated Entry System at the Human Services Campus Brian Garcia Welcome Center at (602) 759-5356.
- All participating organizations of the Maricopa County Regional Coordinated Entry System agree to use information provided to only link clients with housing or supportive service options.
- This authorization will expire one year after the date it is signed by you.
- This authorization is completely voluntary, and you do not have to agree to authorize any use or disclosure.
- You have a right to a copy of this authorization once you have signed it. To obtain a copy, please contact the Maricopa County Regional Coordinated Entry System at the Human Services Campus Brian Garcia Welcome Center at (602) 759-5356.

SIGN BELOW IF AGREEING TO BE INTERVIEWED

Your signature (or mark) below indicates that you have read (or been read) the information provided above, have received answers to your questions, and have freely chosen to be interviewed. By agreeing to be interviewed, you are not giving up any of your legal rights.

Date

Signature (or Mark) of Participant

Printed Name of Participant

_____ I agree to have my photo taken (by initial or mark)

