

2024 Balance of State Unsheltered PIT Survey

PIT NIGHT IS January 24, 2024, 5pm to 7am

Please Print Neatly: Use these categories, un-answered questions will not be "interpreted"

Include notes at the end if necessary, but answer all questions.

Surveyor's Name: Organization/Agency:

County Survey Conducted In: City Survey Conducted In:

Where is survey conducted? Street Service-based Cross-streets or relative position survey took place:

Surveyor: Read to each respondent. We are conducting a statewide survey about people experiencing a housing crisis that will take about 10 minutes. Participation is completely voluntary. If you change your mind, we can stop at any time. We can also skip questions. The survey is confidential and is used for reporting and planning purposes only. We will store the information you provide in a secured system.

Consent was read to respondent: Are you willing to participate and share your information? STOP: This individual/household does not wish to be included. Thank them and move on.

Initials Of Client: All members in Household under age 25? Yes Youth: Complete all Youth items. No

Are you the only person in the household? Head of household? TOTAL number of people in Household: Is this person a dependent child?

Unsheltered: Abandoned Building, Vehicle/Car, On Streets / Homeless Camp, Campground, Park, Youth Options: Prefers not to answer but Unsheltered, 24-Hour Business

Sheltered: If 'yes' to any of these choices, this individual/house does not need to be counted in the Unsheltered Count. Family/Friends, Youth Options: Foster Home, Group Home, Juvenile Detention Center, Hotel/Motel, Prefers not to answer but Sheltered

Reasons for Homelessness: Eviction History, Divorce/Separation, Substance or Drug Use History, Disability, Mental Health, No Income or Unemployment, Sexual Orientation, Natural Disaster/Flooding, Fleeing Domestic Violence/Sexual Assault/Trafficking/Stalking, Neglect, or Abuse, Client does not know/prefers not to answer, Other:

Youth-Specific Additional Options: Can't get along with Parents or Guardian, Juvenile Justice Jail History, Parents Abandoned, Can't Afford My Own Housing, Lack of Employment, Can't Sign My Own Lease, Unsafe or Unsanitary Family Home, I Ran Away and am Not Welcome Back, Other:

Age Category: Under 18, 18-24, 25-34, 35-44, 45-54, 55-64, 65 +

Gender: Woman (girl, if child), Man (boy, if child), Culturally Specific Identity (e.g. Two-Spirit), Transgender, Questioning, Different Identity, Client does not know/prefers not to answer

Race: American Indian, Alaska Native, or Indigenous, Asian or Asian American, Black, African American, or African, Hispanic/Latin(a)(o)(x), Middle Eastern or North African, Native Hawaiian or Pacific Islander

Has this household been homeless continuously for a year or more? White Client does not know/prefers not to answer

Has this household experienced 4 or more episodes of homelessness in the past 3 years? Add together all the months in the last 3 years in which you spent at least one day on the streets or in emergency shelters:

Do any members of the household have a disability? Client does not know/prefers not to answer

Continue Survey On Back

Do YOU have a disability?
MARK ALL THAT APPLY

Drug Use Disorder <input type="checkbox"/>	Alcohol Use Disorder <input type="checkbox"/>	Mental Health <input type="checkbox"/>	Physical <input type="checkbox"/>	Client does not know/ prefers not to answer <input type="checkbox"/>
NONE <input type="checkbox"/>	Developmental <input type="checkbox"/>	Chronic Health <input type="checkbox"/>	HIV/AIDS <input type="checkbox"/>	

Have you ever been a victim of domestic violence?

No <input type="radio"/>	Yes <input type="radio"/>	Currently Fleeing? <input type="checkbox"/>	No <input type="radio"/>	Yes <input type="radio"/>	Client does not know/ prefers not to answer <input type="checkbox"/>
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Would you like assistance calling the National Domestic Violence Hotline? 1-800-799-7233 or 1-800-787-3224 (TTY)

Are you currently serving or have you previously served in the Armed Forces?

Yes <input type="radio"/>	No <input type="radio"/>	Client does not know/ prefers not to answer <input type="checkbox"/>
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Have you ever been in foster care or placed with a foster family?

Yes <input type="radio"/>	No <input type="radio"/>	Client does not know/ prefers not to answer <input type="checkbox"/>
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Thank you for your time and understanding during this survey.

Surveyors Notes. Put any notes to the data analyst here.

YOUTH ADDENDUM

Is this individual a parent or guardian? Yes No Client does not know/prefers not to answer

Sexual Orientation Straight Gay or lesbian Bisexual Unsure or Questioning Client does not know/prefers not to answer

Do you have a high school diploma? Yes No Client does not know/prefers not to answer

Are you currently attending or enrolled in school or another program? Yes No Client does not know/prefers not to answer

Do you currently receive a paycheck or any other non-governmental financial support? Yes No Client does not know/prefers not to answer

Do you currently receive any public or government benefits, such as Medicaid, food stamps, SSI, or TANF? Yes No Client does not know/prefers not to answer

Have you ever been in juvenile detention, prison, or jail? Yes No Client does not know/prefers not to answer

Are you currently pregnant, have you ever been a parent, or do you expect to become a parent in the next 9 months? Yes No Client does not know/prefers not to answer