

Broome County Emergency Shelter Survey

Use this page for **EMERGENCY SHELTER ONLY**

Complete on: **January 23, 2009 24 hours Midnight to Midnight the 23rd**

Agency Name: _____ Name of Person Completing Form: _____

Phone: _____ Email: _____

Part 1: Homeless Population		EMERGENCY SHELTER Total Count
1	Number of Households WITH Dependent Children:	
2	Total Number of People in Households WITH Children	
3	Number of Households WITHOUT Dependent Children	
4	Total Number of People in Households WITHOUT Children	
5	Number of Single People	
TOTAL PEOPLE (Add lines 2, 4 and 5.)		

Part 3: Housing Need - Type of program needed to best help the clients who are in emergency shelter (ES) end their homelessness:		
Total people currently in ES who only need ES	Total people currently in ES who need TH	Total people currently in ES who need PSH
	+	+
	+	+
	+	+
	+	+

Part 2: Homeless Subpopulations (Count adults only, except item 7)		Subpopulation Count
1	Chronically Homeless	
2	Severely Mentally Ill	
3	Chronic Substance Abuse	
4	Veterans	
5	Persons with HIV/AIDS	
6	Victims of Domestic Violence	
7	Unaccompanied Youth (under 18)	

If your program issues emergency vouchers for hotel or motel:
 Please report your count of clients using vouchers separate from the count of clients in your shelter.
 If this sheet represents clients using vouchers, check here: _____

Please fax all surveys to Jim Hulse at Northern Creations Consulting Corporation Fax# 914-652-2521 no later than 72 hours after close of the survey. For questions feel free to email me at jhulse@ncreations.us or phone 607-760-4914
These surveys are very important to our communities as a whole for funding grants and helping targeted populations .