Universal Data Elements

3.1 Name	Response Categories	Examples
Name		John David Doe, Jr.

3.2 Social Security Number	Response Categories	Examples
Social Security Number	__ __ __ - __ __ - __ __ __	(123-45-6789)
Social Security Number Type	1 = Full SSN Reported	123-45-6789
	2 = Partial SSN Reported	123-4_-____
	8 = Don't Know or Don't have SSN	
	9 = Refused	

3.3 Date of Birth	Response Categories	Examples
Date of Birth	__ __/__ __/__ __ __ __ (Month) (Day) (Year)	(08/31/1965)
Date of Birth Type	1 = Full DOB Reported	
	2 = Approximate or Partial DOB Reported	
	8 = Don't Know	
	9 = Refused	

3.11 Housing Status	Response Categories
	1 = Literally homeless
	2 = Imminently losing their housing
	3 = Unstably housed and at-risk of losing their housing
	4 = Stably housed
	8 = Don't Know
	9 = Refused

3.13 Program Exit Date	Response Categories	Examples
Program exit date	__ __/__ __/__ __ __ __ (Month) (Day) (Year)	(08/31/2007)

4.1 Income and Source	Response Categories		
Financial Resources	Income received from any source in past 30 days?		
	0 = No		
	1 = Yes		
	8 = Don't Know		
	9 = Refused		
If the answer above is NOT 1 = Yes, skip the rest of 4.1 below			
Source and Amount of Income	**Source of Income**	**Receiving income source?**	**Amount from Source**
	1 = Earned Income (i.e., employment income)	0 = No	
		1 = Yes	$_ _ _ _.00
	2 = Unemployment Insurance	0 = No	
		1 = Yes	$_ _ _ _.00
	3 = Supplemental Security Income (SSI)	0 = No	
		1 = Yes	$_ _ _ _.00
	4 = Social Security Disability Income (SSDI)	0 = No	
		1 = Yes	$_ _ _ _.00
	5 = Veteran's disability payment	0 = No	
		1 = Yes	$_ _ _ _.00
	6 = Private disability insurance	0 = No	
		1 = Yes	$_ _ _ _.00
	7 = Worker's compensation	0 = No	
		1 = Yes	$_ _ _ _.00
	10 = Temporary Assistance for Needy Families (TANF)	0 = No	
		1 = Yes	$_ _ _ _.00
	11 = General Assistance (GA)	0 = No	
		1 = Yes	$_ _ _ _.00
	12 = Retirement income from Social Security	0 = No	
		1 = Yes	$_ _ _ _.00
	13 = Veteran's pension	0 = No	
		1 = Yes	$_ _ _ _.00
	14 = Pension from a former job	0 = No	
		1 = Yes	$_ _ _ _.00
	15 = Child support	0 = No	
		1 = Yes	$_ _ _ _.00
	16 = Alimony or other spousal support	0 = No	
		1 = Yes	$_ _ _ _.00
	17 = Other source	0 = No	
		1 = Yes	$_ _ _ _.00
Total Monthly Income	Monthly income from all sources		$_ _ _ _.00

4.2 Non-Cash Benefits	Response Categories	
Non-Cash Benefit	Non-cash benefit received from any source in past 30 days?	
	0 = No	
	1 = Yes	
	8 = Don't Know	
	9 = Refused	
If the answer above is NOT 1 = Yes, skip the rest of 4.2 below		
	Source of Non-cash Benefit	**Receive Benefit**
	1 = Supplemental Nutrition Assistance Program (SNAP) Previously known as Food	0 = No
		1 = Yes
	2 = MEDICAID health insurance program	0 = No
		1 = Yes
	3 = MEDICARE health insurance program	0 = No
		1 = Yes
	4 = State Children's Health Insurance Program	0 = No
		1 = Yes
	5 = Special Supplemental Nutrition Program for Women, Infants, and Children (WIC)	0 = No
		1 = Yes
	6 = Veteran's Administration (VA) Medical Services	0 = No
		1 = Yes
	7 = TANF Child Care services	0 = No
		1 = Yes
	10 = TANF transportation services	0 = No
		1 = Yes
	11 = Other TANF-funded services	0 = No
		1 = Yes
	12 = Section 8, public housing, or other ongoing rental assistance	0 = No
		1 = Yes
	13 = Other source	0 = No
		1 = Yes
	14 = Temporary rental assistance	0 = No
		1 = Yes

4.3 Physical Disability	Response Categories
Physical disability	0 = No
	1 = Yes
	8 = Don't Know
	9 = Refused
(If yes)	
[At entry] **Currently receiving services or treatment for this condition?** **[At annual assessment and at exit]: Received services/treatment while in the program?**	0 = No
	1 = Yes
	8 = Don't Know
	9 = Refused

4.4 Developmental Disability	Response Categories
Developmental disability	0 = No
	1 = Yes
	8 = Don't Know
	9 = Refused
(If yes)	
[At entry] **Currently receiving services or treatment for this condition?** **[At annual assessment and at exit]: Received services/treatment while in the program?**	0 = No
	1 = Yes
	8 = Don't Know
	9 = Refused

4.5 Chronic Health Condition	Response Categories
Chronic Health Condition	0 = No
	1 = Yes
	8 = Don't Know
	9 = Refused
(If yes)	
[At entry] **Currently receiving services or treatment for this condition?** **[At annual assessment and at exit]: Received services/treatment while in the program?**	0 = No
	1 = Yes
	8 = Don't Know
	9 = Refused

4.6 HIV/AIDS	Response Categories
HIV / AIDS	0 = No
	1 = Yes
	8 = Don't Know
	9 = Refused
(If yes)	
[At entry] **Currently receiving services or treatment for this condition?**	0 = No
	1 = Yes
	8 = Don't Know
	9 = Refused

4.7 Mental Health	Response Categories
Mental health problem	0 = No
	1 = Yes
	8 = Don't Know
	9 = Refused
(If client has a mental health problem)	
Expected to be of long-continued and indefinite duration and substantially impairs ability to live independently	0 = No
	1 = Yes
	8 = Don't Know
	9 = Refused
(If client has a mental health problem)	
[At entry] **Currently receiving services or treatment for this condition?** [At annual assessment and at exit]: Received services/treatment while in the program?	0 = No
	1 = Yes
	8 = Don't Know
	9 = Refused

4.8 Substance Abuse	Response Categories
Substance abuse problem	0 = No
	1 = Alcohol abuse
	2 = Drug abuse
	3 = Both alcohol and drug abuse
	8 = Don't Know
	9 = Refused
(If client has a substance abuse problem)	
Expected to be of long-continued and indefinite duration and substantially impairs ability to live independently	0 = No
	1 = Yes
	8 = Don't Know
	9 = Refused
(If client has a substance abuse problem)	
[At entry] **Currently receiving services or treatment for this condition?** [At annual assessment and at exit]: Received services/treatment while in the program?	0 = No
	1 = Yes
	8 = Don't Know
	9 = Refused

4.10 Destination	Response Categories
Destination Type	1 = Emergency shelter, including hotel or motel paid for
	2 = Transitional housing for homeless persons (including
	3 = Permanent supportive housing for formerly homeless
	4 = Psychiatric hospital or other psychiatric facility
	5 = Substance abuse treatment facility or detox center
	6 = Hospital (non-psychiatric)
	7 = Jail, prison or juvenile detention facility
	10 = Rental by client, no ongoing housing subsidy
	11 = Owned by client, no ongoing housing subsidy
	12 = Staying or living with family, temporary tenure (e.g.,
	13 = Staying or living with friends, temporary tenure (.e.g.,
	14 = Hotel or motel paid for without emergency shelter
	15 = Foster care home or foster care group home
	16 = Place not meant for habitation (e.g., a vehicle, an
	17 = Other
	18 = Safe Haven
	19 = Rental by client, VASH Subsidy
	20 = Rental by client, other (non-VASH) ongoing housing
	21 = Owned by client, with ongoing housing subsidy:
	22 = Staying or living with family, permanent tenure
	23 = Staying or living with friends, permanent tenure
	24 = Deceased
	8 = Don't Know
	9 = Refused

4.15A Employment	Response Categories	
Employed	0 = No	
	1 = Yes	
	8 = Don't Know	
	9 = Refused	
If currently working, number of hours worked in the past week		_____ hours
Employment tenure	1 = Permanent	
	2 = Temporary	
	3 = Seasonal	
	8 = Don't Know	
	9 = Refused	
[If unemployed] Is the client looking for work? [If employed] Is the client looking for additional employment or increased hours at their current job?	0 = No	
	1 = Yes	
	8 = Don't Know	
	9 = Refused	

4.15B Education	Response Categories
Currently in school or working on any degree or certificate	0 = No
	1 = Yes
	8 = Don't Know
	9 = Refused
Received vocational training or apprenticeship certificates	0 = No
	1 = Yes
	8 = Don't Know
	9 = Refused
Highest level of school completed	0 = No schooling completed
	1 = Nursery school to 4th grade
	2 = 5th grade or 6th grade
	3 = 7th grade or 8th grade
	4 = 9th grade
	5 = 10th grade
	6 = 11th grade
	7 = 12th grade, No diploma
	10 = High school diploma
	11 = GED
	12 = Post-secondary school
	8 = Don't Know
	9 = Refused
	0 = None

4.15B Education	Response Categories
If client has received a high school diploma, GED or enrolled in post-secondary education, what degree(s) has the client earned	1 = Associates Degree
	2 = Bachelors Degree
	3 = Masters Degree
	4 = Doctorate Degree
	5 = Other graduate/professional degree
	6 = Certificate of advanced training or skilled artisan
	8 = Don't Know
	9 = Refused

4.15C General Health	Response Categories
	1 = Excellent
	2 = Very good
	3 = Good
	4 = Fair
	5 = Poor
	8 = Don't Know
	9 = Refused

4.15F Children's Education	Response Categories
Current enrollment status	0 = No
	1 = Yes
	8 = Don't know
	9 = Refused
If yes, name of child's school	_____
	(Example: Lone Pine Elementary School)
If yes, was/is the child connected to the McKinney-Vento Homeless Assistance Act school liaison?	0 = No
	1 = Yes
	8 = Don't know
	9 = Refused
If yes, type of school	1 = Public school
	2 = Parochial or other private school
	8 = Don't know
	9 = Refused
If not enrolled, last date of enrollment	__ __/__ __ __ __ (Month) (Year)

4.15F Children's Education	Response Categories
If not enrolled, identify problems in enrolling child	1 = None
	2 = Residency requirements
	3 = Availability of school records
	4 = Birth certificates
	5 = Legal guardianship requirements
	6 = Transportation
	7 = Lack of available preschool programs
	10 = Immunization requirements
	11 = Physical examination records
	12 = Other
	8 = Don't know
	9 = Refused

4.15G Reason for Leaving	Response Categories
Reason for leaving	1 = Left for a housing opportunity before completing progra
	2 = Completed program
	3 = Non-payment of rent/occupancy charge
	4 = Non-compliance with program
	5 = Criminal activity/destruction of property/violence
	6 = Reached maximum time allowed by program
	7 = Needs could not be met by program
	8 = Disagreement with rules/persons
	9 = Death
	10 = Unknown/disappeared
	11 = Other

4.15H Services Provided	Response Categories	Examples
Date of Service	__ __/__ __/__ __ __ __ (Month) (Day) (Year)	(08/31/2009)
Type(s) of Service	1 = Food	Emergency food programs
	2 = Housing placement	Housing search
	3 = Material goods	Clothing and personal
	4 = Temporary housing and	Rent payment or deposit
	5 = Transportation	Bus passes and mass transit
	6 = Consumer assistance and	Money management
	7 = Criminal justice/legal	Legal counseling and
	10 = Education	GED instruction, bilingual
	11 = HIV/AIDS-related	HIV testing, AIDS treatment,
	12 = Mental health	Telephone crisis hotlines and
	13 = Other health care	Disability screening, health
	14 = Substance abuse	Detoxification and
	15 = Employment	Job development and job
	16 = Case/care management	Development of plans for the
	17 = Day care	Child care centers and infant
	18 = Personal enrichment	Life skills education, social
	19 = Referral to other	Street outreach referral, intra
	20 = Outreach	Street outreach
	21 = Other	Other service