

CNY HMIS Client Consent Form

Client Name: _____ Date of Birth: _____

Household members: (if applicable)

Name _____ Date of Birth: _____

Name _____ Date of Birth: _____

Name _____ Date of Birth: _____

Name _____ Date of Birth: _____

I know that this agency is part of the CNY HMIS (Homeless Management information System). The CNY HMIS is a system that uses computers to collect information about homelessness in order to help plan and pay for services to people who are homeless or requiring services to prevent homelessness

With this written consent, CNY HMIS agencies that offer me services may enter, see, and update basic information about me and/or my children including name, gender, race, ethnicity, birth date, veteran status, proof of homelessness, income, insurance, disabilities (including HIV/AIDS status) and service transactions related to housing, food, and material goods.

The Agency shall only release client records to non-partner agencies with proper written consent by the client unless otherwise permitted by relevant laws or regulations.

Decisions to deny outreach, shelter, or housing will not be based solely on information in this system. My decision to sign or not sign this consent document will not be used to deny outreach, shelter, or housing services. I may withdraw the consent except for information that has already been given out or actions already taken, by informing the agency in writing that I want to withdraw my consent. This consent will **end one year** from the date signed.

I have a right to see my CNY HMIS record, ask for changes, and to have a copy of my record from this agency upon written request.

CNY HMIS Agencies Participating:

ACR Health, Auburn Housing Authority, Catholic Charities, Cayuga/Seneca Community Action, Center for Community Alternatives, Circare, Chadwick Residence, Chapel House Inc., CNY Services, Contact Community Services, Dept of Veteran Affairs, Easter Seals NY, Greater Syracuse Tenants Network, Hiscock Legal Aid, Housing & Homeless Coalition of CNY (HHC CNY), In My Father's Kitchen, InterFaith Works, Legal Aid Society of Mid-York, Liberty Resources, Onondaga County DSS, Onondaga County Department of Adult and Long Term Care, Onondaga County Justice Center/Jamesville Correctional Facility, Oswego County Opportunities, Oswego County DSS, Rescue Mission, Soldier On, St Joseph's Care Coordination Network, The Salvation Army, Samaritan Center, Helio Health, Syracuse Housing Authority, Visions for Change, Volunteer Lawyers Project of Onondaga County, Inc., YMCA, YWCA, The New York State Office of Temporary and Disability Assistance (OTDA), and Last House on the Block.

Client Signature

Date

Agency Witness

Date