We just need a few basics to get started — a staff member will fill in the rest with you.

## Your Information

Full Name:

Date of Birth: Phone Number:

Email (optional):

Current Address / Where to reach you:

Emergency Contact Name: Their Phone Number:

## Military Service

**Branch of Service:**

☐ Army ☐ Navy ☐ Air Force

☐ Marine Corps ☐ Coast Guard ☐ Space Force

Service Dates — From: To:

**Discharge Type:**

☐ Honorable ☐ Other ☐ Not sure

**Do you have your DD-214 (discharge papers)?**

☐ Yes ☐ No ☐ Not sure

*No worries if you don't have it on hand — we can help you request a copy.*

## Current Housing

**Where are you staying right now?**

☐ No stable housing ☐ Staying with family/friends

☐ Shelter ☐ Motel/hotel

☐ Renting ☐ Own home

☐ Transitional housing

How long have you been there?:

What's bringing you in today?:

## VA Health Care & Benefits

**Enrolled in VA health care?**

☐ Yes ☐ No ☐ Not sure

**Currently receiving any VA benefits?**

☐ Yes ☐ No ☐ Not sure

Case Manager Name & Phone (if you have one):

Signature: Date:

*We'll go over the details of your benefits together — you don't need paperwork for this step.*