

Money Follows the Person Personal History Form

Additional information necessary in making a determination: **(It is vitally important that all aspects and issues are considered in order to be successful in assisting participants to move to the community. If we have time to plan, we can manage the issues and complete a successful move. These issues are not used to screen individuals out of the transition process.)**

1. What is your reputation within community agencies? (For example, care agencies that refuse to serve you because of past conflicts.)

Poor Fair Good Excellent

What agencies have provided services for you in the past?

2. Do you have unpaid utility bills? (For example, electric, water, gas or phone bills from your last home or apartment)

Yes No

Please list the names of utility companies where you have unpaid bills:

3. Do you have credit history problems? (For example, rental history problems, credit card debts, etc.)

Yes No

Please indicate the circumstances:

4. Have you had any problems with the police? (For example DWI, outstanding warrants for your arrest, etc.)

Yes No

Please indicate the circumstances:

5. Do you have a history of family problems? (For example, domestic battery, etc.)

Yes No

Please indicate the circumstances:

6. Do you have a history of substance abuse? (For example, personal history with alcohol or illegal drugs that included job losses, legal problems, evictions, etc. or a history of associating with people that engage in substance abuse.)

Yes No

Please describe the circumstances:

Impressions of coordinator and areas of concern:

Client's Name:

Date

Client's Signature:

Date

ITM Signature:

Date