	POIN North Carolin Ask the he	IT-IN-TIME C na Point-in-Time	OUNT SURVE		us
	<b>North Carolin</b> Ask the he	a Point-in-Time	e Count – January		
		ead of household			
1 Identifier (use later for de			the following quest information about	ions. hem in the chart on page 2.	
1. Identifier (use later for de-c First two letters of Firs First two letters of Las	st Name:		Date of Birth: _	// OR Age:	_
2. Gender 🗌 Male	Eemale	Transgend	der: male to fema	e 📃 Transgender: female to n	nale
3. Race (check all that apply)	Caucasian,	/White waiian/Pacific Is	Asian lander	African-American/Black American Indian/Alaska Native	
4. Ethnicity 🗌 Non-Hispa	nic/Non-Latino	Hispanic/	Latino		
5. Have you ever served in the duty as a member of the Natio	•	•	arine Corps, or Co	past Guard, OR were you called to a	ctiv
6. Are you a survivor of dome	stic violence?	Yes	No		
<ul> <li>Serious mental illness</li> <li>Chronic physical illness</li> <li>8. Which of the following best</li> <li>Single adult, without childr</li> <li>Adult couple, without child</li> <li>Adult(s) with adult son(s)/c</li> </ul>	Developm t <b>describes your</b> ren Or Iren Dr	use disorder ental disability <b>family/househ</b> ne parent with c vo parents with	hildren 🗌 Un children 🗌 Ho	Physical disability Traumatic brain injury <b>ou tonight?</b> accompanied child (17 or younger) usehold of only children (all membe or younger)	rs a
9. Where did you sleep on the	night of Wedne	esdav. Januarv	28 <sup>th</sup> ?		
In a place not mean Emergency shelter MELESS Transitional housir	nt for human ha (Name: ng (Name: neless immediat	bitation (streets	s/sidewalk, park, t ring transitional h	ent, abandoned building, car, etc.)	
Hotel/motel paid f Jail/prison Hospital or treatme Were you hom Rapid re-housing p	or with your ow ent facility (deto neless immediat program (Name: tive housing pro	n funds ox, substance ab ely before enter ogram (Name:	use, mental healt ring this facility?	<u> </u>	
<ul> <li>Home/apartment t</li> <li>With a friend or far</li> <li>In a place you are b</li> </ul>	nily in their hom being evicted fro	ne/apartment om within two w		housing? 🗌 Yes 🗌 No	

## 12. Please fill out for each *additional* member of the household:

				Ger	nder			Race (a	all that	apply			
Relation to head of household (child, spouse, sibling, etc.)	(child, letter of	tter of first	Male	Female	Trans . M-F	Trans. F-M	White	Black	Asian	Pac. Is.	Am. Ind.	Latino? (Y/N)	Veteran? (Y/N)

## 13. What is the main reason that you're homeless/unstably housed? (check all that apply) Aged out of foster care

Unable to pay rent
Unemployment

- Physical/mental disability
- Mental illness
- Domestic violence
- Substance use
- Release from prison
- Family/personal illness
- Natural disaster Other:

Runaway

## 14. Were you discharged from any facility/institution in the last 30 days?

Jail or prison Hospital

Mental health residential facility Substance abuse residential facility Military service Other: \_\_\_\_\_

## 15. Have you received any of the following services in the past 18 months OR do you need these services?

Substance abuse/addiction treatment	Received	Needed
Mental health services	Received	Needed
Medical treatment	Received	Needed
Health insurance	Received	Needed
Disability services	Received	Needed
Housing assistance	Received	Needed
Food assistance	Received	Needed
Job training/employment services	Received	Needed
Legal services	Received	Needed
Identification/ID card assistance	Received	Needed
Child care	Received	Needed

16. Where was the last place you were housed for 90 days or more?
This town/county Another state:
Another town/county in NC: Another country:
<b>17. What is your job status?</b> Image: Full time job       Image: Part time job         Image: Full timage: Full time job
18. Do you receive income from any of the following sources?
Employment Social Security/pension Child support
Disability (SSI/SSDI) TANF Friends and family
Veteran's benefits Food stamps Other:
19. How much school did you complete?
Less than high school       Some college or vocational training         Some high school, no diploma       College or vocational degree         High school diploma or GED       Graduate degree