



Chart Review

Participant: _____

Date Reviewed: _____ **Initials:** _____

Contract Year(s): _____

Program: COC ESG HAP H4G PHARE

<u>Documentation:</u>	<u>Yes:</u>	<u>No:</u>	<u>N/A:</u>	<u>Comment:</u>
Case Notes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Chronic Status	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
DCED Housing Status Checklist	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Disability Status	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Exit Form	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Financial Subsidy Plan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Fair Market Rent (FMR)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Goal Plan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
HMIS Client Consent	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Homeless Status	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Income Verification	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Income Elig. Worksheet	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Inspection	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Intake(s)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Lease	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Landlord Agency Agreement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Recertification	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Releases	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Rent Reasonableness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
VI-SPDAT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____

