

## AGENCY LETTERHEAD

<DATE>

RE: Coordinated Entry Referral for <HEAD of HH NAME> Household , <HMIS ID #>

To: VCRHYP/ Youth Homelessness Demonstration Program

<Name of Organization> is the Lead Agency for the <AREA NAME> Coordinated Entry Partnership.

This letter serves to verify the referral of the <HEAD OF HH NAME> Household to the following program:

- |   |  |
|---|--|
| <input type="checkbox"/> YHDP Rapid Rehousing Project           | <input type="checkbox"/> YHDP Housing Navigation |
| <input type="checkbox"/> YHDP Transitional Housing> RRH Project | <input type="checkbox"/> YHDP Diversion          |

This household participated in the VCEH Housing Assessment process and was placed on the Master List for Coordinated Entry according to VCEH Coordinated Entry Policies and Procedures.

The Housing Assessment identified this client as a good candidate for *(check one)*:

- Long-term assistance (Permanent Supportive Housing and Transitional Housing)
- Medium-term assistance (Rapid Re-housing and Transitional Housing)
- Short-term assistance (Rapid Re-housing <3months)

Does the household have a documented housing stability plan?

- Yes  No

This household was ranked #\_\_\_\_\_ for the program identified above.

For referrals to YHDP Rapid Re-housing or Transitional Housing Projects– If not the highest priority (rank) for this referral, please identify the reason(s) below: *(Check all that apply)*

- Households with a higher rank for this program were also referred
- Households with a higher rank for this program were not eligible for the program
- Households with a higher rank for this program were not eligible for available or required services
- Households with a higher rank for this program declined to enroll in this program

**Additional information regarding this household** *(Include any of the below that is available)*:

Contact information (phone #, email address, alternative contact, etc.):

Name of person who assessed household:

Organization where household was assessed:

Sincerely,

<SIGNATURE- (Electronic acceptable )>

Coordinated Entry List Manager *(or appropriate title)*