

HOAP – Homeless Outreach Access Program
 Email referral to hoap@encircle.org.au



Referring Agency:		Contact Name:
Date:	Phone:	Email:

- Would you like someone to sit with you during the consenting process?

If you do not consent to sharing your information with us or other services, this may affect the quality of service provided to you.

CONSENT

	Specialist Homeless Information Platform (SHIP) allows agency workers to record your information, case notes, case plans, and goals. SHIP is a Queensland Government secure and confidential database. Do you consent to have your information recorded here to enable us to continue supporting you?
	Queensland Homelessness Information Platform (QHIP) is a Queensland Government secure database that is used to record your personal information for the purpose of assessing your needs and referring to other housing and homelessness services. Do you consent to have your information recorded here to enable us to continue supporting you?
	Do you consent to allowing your support worker to discuss relevant information with other services to support your housing and support goals including the Department of Communities, Housing, and Digital Economy (Social Housing)?
	Do you consent to your information being depersonalised and used for service reviews and research?
Written Consent	Client Signature _____ Date: _____
Phone Referrals Only	Verbal Consent
	Witness Signature: _____ Date: _____

DETAILS

Client Name:	Date of Birth:
Where are you currently located (Suburb):	
Phone:	Email:
What gender do you identify as?	
What culture do you identify as?	
Country of Birth:	What year did you arrive in Australia?
First Language:	Interpreter Required:
Number of Adults:	Pets:
Number of Children:	CRN:

CURRENT SITUATION (HOUSING)

Open Space	<input type="checkbox"/>	Couch Surfing	<input type="checkbox"/>
Vehicle	<input type="checkbox"/>	Friends and Family	<input type="checkbox"/>
Improvised Dwelling / Squatting	<input type="checkbox"/>	Other:	
Social Housing Application:		Income Type:	

CURRENT SITUATION (SAFETY/HEALTH)

Are you in an unsafe environment?	Are you aware of any health issues
Can you tell us more about it?	
Are you engaged with any other supports?	
Details:	