

Family Shelter Intake Interview

General Information

Family Name

Date

Primary Contact Name

Phone Number

Email

Number of family members

Relationship to Head of Family

Family Members

List all family members (Name, Age, Gender, Relationship):

Housing History

Previous Address

Reason for seeking shelter

Has the family used shelter services before?

If yes, when and where?

Additional Needs

Medical needs or disabilities

Dietary restrictions

Transportation needs

Other special considerations

Interviewer Notes