

First Name: _____ Last Name: _____
Project: _____ Case Worker: _____
Agency: _____

ENCOUNTER

Encounter Date* _____

Encounter Location Type* [] Place Not Meant for Habitation [] Service Setting: Non-Residential [] Service Setting: Residential

PIT Region Where Slept Last Night*

Maui County

- [] Maui R1: Central Maui [] Maui R2: Lower Waiehu [] Maui R3: Up Country [] Maui R4: Lahaina [] Maui R5: Kihei
[] Maui R6: Hana

Kauai County

- [] Kauai R1: West [] Kauai R2: South [] Kauai R3: South Central [] Kauai R4: East [] Kauai R5: North

Hawaii County

- [] HI R1: Kohala [] HI R2: Honokaa [] HI R3: Laupahoehoe [] HI R4: Hilo [] HI R5: Waiakea
[] HI R6: Keaau [] HI R7: Paho [] HI R8: Kau [] HI R9: Konawaena [] HI R10: Kealahou

Encounter Section A - PATH Services:

- [] Outreach [] Case Management [] Housing technical assistance
[] Screening/assessment [] Residential supportive services [] Security deposits
[] Habilitation/rehabilitation [] Housing minor innovation [] One time rent for eviction prevention
[] Community mental health - service [] Housing moving assistance [] Other PATH funded service
[] Substance use treatment - service

Encounter Section B – PATH Multi-Referral (HMIS defaults to General Referral, you may select a specific program):

- [] Community Mental Health Refer to: _____
[] Housing Placement assistance Refer to: _____
[] Educational services Refer to: _____
[] Employment assistance Refer to: _____
[] Income assistance Refer to: _____
[] Job training Refer to: _____
[] Primary health services Refer to: _____
[] Medical assistance Refer to: _____
[] Relevant housing services Refer to: _____
[] Substance use treatment Refer to: _____