BTG VI-SPDAT V3 (Family)

Add Family Member – Continued

First Name*: | **Last Name *:** | **Birth Date*:** | **Age:** | **Gender*:**

5) _____ _____ _____ _____ _____

Relationship to Head of Household*
☐ Spouse ☐ Other Relative
☐ Child ☐ Other Non-Relative
☐ Step-Child ☐ Unknown
☐ Grandparent ☐ Grandchild
☐ Guardian ☐ Foster-Child

Social Security#*:
☐ Full ☐ Partial
☐ Client doesn't know
☐ Refused
☐ Data Not Collected

☐ Full DOB
☐ Partial (MM/YY)
☐ Partial (DD/YY)
☐ Client doesn't know
☐ Client refused
☐ Data Not Collected

☐ Male
☐ Female
☐Trans M-F
☐Trans F-M
☐ Refused
☐ Other

Veteran ☐ Yes ☐ No ☐ Refused

First Name*: | **Last Name *:** | **Birth Date*:** | **Age:** | **Gender*:**

6) _____ _____ _____ _____ _____

Relationship to Head of Household*
☐ Spouse ☐ Other Relative
☐ Child ☐ Other Non-Relative
☐ Step-Child ☐ Unknown
☐ Grandparent ☐ Grandchild
☐ Guardian ☐ Foster-Child

Social Security#*:
☐ Full ☐ Partial
☐ Client doesn't know
☐ Refused
☐ Data Not Collected

☐ Full DOB
☐ Partial (MM/YY)
☐ Partial (DD/YY)
☐ Client doesn't know
☐ Client refused
☐ Data Not Collected

☐ Male
☐ Female
☐Trans M-F
☐Trans F-M
☐ Refused
☐ Other

Veteran ☐ Yes ☐ No ☐ Refused

First Name*: | **Last Name *:** | **Birth Date*:** | **Age:** | **Gender*:**

7) _____ _____ _____ _____ _____

Relationship to Head of Household*
☐ Spouse ☐ Other Relative
☐ Child ☐ Other Non-Relative
☐ Step-Child ☐ Unknown
☐ Grandparent ☐ Grandchild
☐ Guardian ☐ Foster-Child

Social Security#*:
☐ Full ☐ Partial
☐ Client doesn't know
☐ Refused
☐ Data Not Collected

☐ Full DOB
☐ Partial (MM/YY)
☐ Partial (DD/YY)
☐ Client doesn't know
☐ Client refused
☐ Data Not Collected

☐ Male
☐ Female
☐Trans M-F
☐Trans F-M
☐ Refused
☐ Other

Veteran ☐ Yes ☐ No ☐ Refused

First Name*: | **Last Name *:** | **Birth Date*:** | **Age:** | **Gender*:**

8) _____ _____ _____ _____ _____

Relationship to Head of Household*
☐ Spouse ☐ Other Relative
☐ Child ☐ Other Non-Relative
☐ Step-Child ☐ Unknown
☐ Grandparent ☐ Grandchild
☐ Guardian ☐ Foster-Child

Social Security#*:
☐ Full ☐ Partial
☐ Client doesn't know
☐ Refused
☐ Data Not Collected

☐ Full DOB
☐ Partial (MM/YY)
☐ Partial (DD/YY)
☐ Client doesn't know
☐ Client refused
☐ Data Not Collected

☐ Male
☐ Female
☐Trans M-F
☐Trans F-M
☐ Refused
☐ Other

Veteran ☐ Yes ☐ No ☐ Refused