



Coordinated Entry Transfer to a new Local Continuum of Care (CoC)

Date _____

Client Name _____

Originating CoC _____

CE Lead Agency for Originating CoC _____

Staff Name & Contact Info _____

New CoC _____

CE Lead Agency for New CoC _____

Staff Name & Contact Info _____

Client requesting transfer signature (and date) _____

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1. Has a meeting of the individual requesting the transfer and the new Lead Agency taken place?
Y N
 2. Has the client completed a release for the new CoC CE Partnership? Y N
 3. Has the New Lead Agency accepted the transfer? Y N
 4. Has the originating Lead Agency transferred the Assessment (paper version) to the new Agency? Y N
 5. Does the client have a rental subsidy which requires a case management component? Y N
If Yes, what organization is providing that in the new CoC?
 6. Does the client have other supports in the new CoC (such as employment, children enrolled in school, familial supports, medical provider) that staff in the new CoC should be aware of? Y N
 7. In addition to being added to the new CoC's master list, does the client wish to remain on the master list of the originating CoC? Y N

Notes:

- A new HMIS entry into local Coordinated Entry should be completed using the original assessment date.
- This form should be included in the client file.
- The intention of this process is to allow for a client transfer without a client needing to physically present at one or both Lead Agencies in order to transfer.
- Client's have the choice about whether they stay on originating local Coordinated Entry list when they enter a new Coordinated Entry list. Clients may choose to be on both lists. Lead Agencies are responsible for coordination and identifying which agency is the point of contact.