

2021 ANNUAL HOMELESS POINT IN TIME SURVEY

* Required

1. Have you already completed one of these surveys this month? *

Mark only one oval.

Yes

No

2020 ANNUAL HOMELESS POINT IN TIME SURVEY

2. How old are you? *

Mark only one oval.

Under 13 *Skip to question 3*

13-17 *Skip to question 3*

18-24 *Skip to question 3*

25-54 *Skip to question 29*

55 or older *Skip to question 29*

HOUSING SURVEY FOR YOUTH UNDER 25

Unaccompanied and Parenting Youth

3. What are your initials *

4. What is your date of birth? *

Example: January 7, 2019

5. Where did you sleep last night? [CHECK ONE RESPONSE THAT BEST MATCHES THE ANSWER] *

Mark only one oval.

- Street or sidewalk (UNSHELTERED) Skip to question 6
- Vehicle (car, van, rv, truck) (UNSHELTERED) Skip to question 6
- Park or other public outdoor space (UNSHELTERED) Skip to question 6
- Abandoned or empty building/squatting (UNSHELTERED) Skip to question 6
- On a train/bus or in train/bus station or airport (UNSHELTERED) Skip to question 6
- Under bridge/overpass (UNSHELTERED) Skip to question 6
- 24-hour restaurant/laundromat or other business (UNSHELTERED)
Skip to question 6
- Outdoor encampment (UNSHELTERED) Skip to question 6
- Emergency Shelter (SHELTERED) Skip to question 6
- Transitional housing (SHELTERED) Skip to question 6
- Runaway Homeless Youth Program (TLP/MGH) (SHELTERED) Skip to question 6
- Youth Shelter (SHELTERED) Skip to question 6
- Hotel/Motel paid for by a non-profit (SHELTERED) Skip to question 6
- Hotel/Motel
- Friend's home Skip to question 6
- My own apartment or house Skip to question 9
- Parent's home Skip to question 9
- Other relative's home Skip to question 9
- Foster family home Skip to question 9
- Group home Skip to question 9
- Home of boyfriend/girlfriend Skip to question 9
- Hospital Skip to question 9
- Residential treatment facility Skip to question 9
- Juvenile detention center jail Skip to question 9
- On someone's couch who is not my parent or legal gaurdian
- Don't know Skip to question 9
- I'd rather not say Skip to question 9

HOUSING SURVEY FOR YOUTH UNDER 25

6. [If Sheltered or Unsheltered]: How long have you been living on the streets, in an emergency shelter or transitional housing program? *

Mark only one oval.

- One to six nights
- One week or more, but less than one month
- One month or more, but less than 90 days
- 90 days or more, but less than one year
- One year or longer
- Don't know
- I'd rather not say

7. Including this time, how many separate times have you been living on the streets or in a shelter in the past three years? *

Mark only one oval.

- Less than 4 times
- 4 or more times
- Don't know
- I'd rather not say

8. If you add up all the times you have been living on the street or in a shelter in the last 3 years, how long have you been living on the street or in a shelter? *

Mark only one oval.

- Less than 1 month
- 1 month
- 2 months
- 3 months
- 4 months
- 5 months
- 6 months
- 7 months
- 8 months
- 9 months
- 10 months
- 11 months
- 12 months
- More than 12 months
- Don't know
- I'd rather not say

HOUSING SURVEY FOR YOUTH UNDER 25

9. Was your parent or legal guardian with you where you stayed last night? *

Mark only one oval.

- Yes *Skip to question 11*
- No *Skip to question 10*
- I'd rather not say *Skip to question 11*

HOUSING SURVEY FOR YOUTH UNDER 25

10. [If no] If you are NOT staying with your parent(s) or legal guardians, what is the MAIN reason? *

Mark only one oval.

- Disagreement with parent(s)/legal guardian(s)
- I wanted to leave
- There was a physical, sexual or mental abuse at home
- I left foster care/group home and had no place to go
- I was released from jail/detention and had no place to go
- I turned 18 and was asked to leave my home
- My house was too small for everyone to live there
- Issues with my sexual orientation/gender identity
- My use of drugs or alcohol
- My parent's use of drugs or alcohol
- I was pregnant or got someone pregnant
- I left home to go to college/university or live independently
- I was released from jail/detention and had no place to go
- Other: _____

HOUSING SURVEY FOR YOUTH UNDER 25

11. At any point in the last 12 months have you stayed up all night (or slept) on streets, park, beach, bench or other place not meant for human habitation because you lacked a regular place to stay? *

Mark only one oval.

- No
- Yes
- Don't know
- I'd rather not say

12. At any point in the last 12 months have you "couch surfed", that is, moved around, sleeping at different people's homes? *

Mark only one oval.

- No
- Yes
- Don't know
- I'd rather not say

13. Are you going to school? *

Mark only one oval.

- No
- Yes
- Don't know
- I'd rather not say

14. Are you currently employed? *

Check all that apply.

- No
- Yes, in a full-time job
- Yes, in a part-time job
- I'd rather not say

15. Have you ever been placed in foster care or stayed in a group home? *

Mark only one oval.

- Yes
- No
- Don't know
- I'd rather not say

16. [If yes] Did you leave (foster care/group homes) in the past 3 years? *

Mark only one oval.

- Yes
- No
- Don't know
- I'd rather not say

17. [If Yes] If you left [foster care/group home] in the past 3 years, did anyone help you get housing? *

Mark only one oval.

- No
- Yes
- Not in the past 3 years
- Don't know
- I'd rather not say

HOUSING SURVEY FOR YOUTH UNDER 25

18. Are you pregnant or a parent?

Mark only one oval.

- No
- Yes
- Don't know
- I'd rather not say

19. [If Yes] Do you have custody of your child(ren)? In other words, are you responsible for caring for your child(ren) on a day-to-day basis?

Mark only one oval.

- No
- Yes
- Don't know
- I'd rather not say

HOUSING SURVEY FOR YOUTH UNDER 25

20. What is your race? You can select one or more races. *

Check all that apply.

- Black or African American
- White
- American Indian or Alaska Native
- Asian
- Native Hawaiian or other Pacific Islander
- Don't know
- I'd rather not say

Other: _____

21. Are you Hispanic or Latino/a? *

Mark only one oval.

- No
- Yes
- Don't know
- I'd rather not say

22. How would you define your gender? *

Mark only one oval.

- Male
- Female
- Transgender (F to M)
- Transgender (M to F)
- Don't identify as male, female, or transgender
- Don't know
- I'd rather not say

23. Which of the following best represents how you think of yourself? *

Mark only one oval.

- Straight
- Lesbian or Gay
- Bisexual
- Questioning
- Don't know
- I'd rather not say
- Other: _____

24. In the past year, what issues have you encountered in trying to get help or access services? [Select all that apply]: *

Check all that apply.

- Lack of transportation
- Did not have ID/personal documents
- Did not know where to go for help
- Did not qualify for service
- Placed on a waitlist and never heard back
- Could not get help because of a language barrier
- Could not access a service because of age
- No issues accessing services/assistance
- I'd rather not say

Other: _____

25. Where did you learn about this survey? *

Mark only one oval.

- Website
- Social Media
- Public Transit Ad
- Article
- Community Event
- Word of Mouth
- Youth Ambassador/Volunteer

26. How do you get news and information? *

Mark only one oval.

- I watch TV
- I listen to the radio
- I spend a lot of time reading Social Media
- I read the Newspaper
- I surf websites
- I'm not interested in news

27. When there is an approaching emergency, what is the best way to reach you? *

Mark only one oval.

- Send me an email
- Leave a message on my phone
- Text my phone
- Signs at the Government Center
- Police/social worker
- Church leaders who know me
- Tell me through radio or TV
- Other
- Other: _____

28. When there is an approaching emergency, what is the second best way to reach you? *

Mark only one oval.

- Send me an email
- Leave a message on my phone
- Text my phone
- Signs at the Government Center
- Police/social worker
- Church leaders who know me
- Tell me through radio or TV
- Other
- Other: _____

2020 ANNUAL HOMELESS POINT IN TIME SURVEY

29. Please give us your initials *

30. Interview Location:

Mark only one oval.

- Emergency housing
- Hotel/Motel
- Transitional Housing
- Safe Haven
- Drop in center/feeding site
- Supportive services program
- Street

31. Where did you sleep last night? *

Mark only one oval.

- Emergency housing, including hotel voucher *Skip to question 33*
- Hotel/Motel paid for by self *Skip to question 33*
- Transitional housing *Skip to question 33*
- Safe Haven *Skip to question 33*
- Detox/Substance abuse treatment facility *Skip to question 32*
- Hospital *Skip to question 32*
- Mental health treatment facility *Skip to question 32*
- Domestic Violence shelter *Skip to question 33*
- Rental, no subsidy *Skip to question 33*
- Staying with family *Skip to question 33*
- Street, sidewalk or doorway *Skip to question 33*
- Vehicle (car, van ,rv ,truck) *Skip to question 33*
- Park or beach *Skip to question 33*
- Abandoned building *Skip to question 33*
- Bus/train, or bus/train station *Skip to question 33*
- Under bridge/overpass *Skip to question 33*
- Woods/outdoor encampment *Skip to question 33*
- Jail/prison *Skip to question 32*
- Staying with friends *Skip to question 33*
- Foster care *Skip to question 33*
- Homeowner *Skip to question 33*
- Permanent housing for homeless persons *Skip to question 33*
- Other *Skip to question 33*
- Don't know *Skip to question 33*
- Refused to answer *Skip to question 33*

2020 ANNUAL HOMELESS POINT IN TIME SURVEY

32. If answered Jail/prison, Hospital, or Treatment facility for last question, where did you stay BEFORE you came to that place? *

Mark only one oval.

- Emergency housing, including hotel voucher
- Hotel/motel paid for by self
- Transitional housing
- Safe Haven
- Domestic Violence Shelter
- Rental, no subsidy
- Staying with family
- Street or sidewalk or doorway
- Vehicle (car, van, rv, truck)
- Park or beach
- Abandoned building
- Bus or train station
- Under bridge/overpass
- Woods/outdoor encampment
- Staying with friends
- Permanent housing for homeless
- Homeowner
- Don't know
- Refused to answer

2020 ANNUAL HOMELESS POINT IN TIME SURVEY

33. What caused you to become homeless this time? *

Mark only one oval.

- Employment/financial reasons
- Housing issues/eviction NOT related to COVID-19
- Housing issues/eviction related to COVID-19
- Medical/substance abuse/disability problems
- Family problems
- Natural/other disasters
- Recent immigration
- Refused to answer

34. Where did you live PRIOR to becoming homeless? *

Mark only one oval.

- Miami-Dade County
- Another part of Florida
- Another state
- Another country
- Refused to answer

35. If you chose option 1 above: How long did you live in Miami-Dade County PRIOR to becoming homeless? *

Mark only one oval.

- 1 week or less
- More than 1 week but less than 1 month
- 1-3 months
- 4-12 months
- greater than 1 year
- Refused to answer

36. If you chose option 2, 3 or 4 above: What brought you to Miami-Dade County? *

Mark only one oval.

- Weather
- Family or friends
- Employment opportunity
- cultural diversity
- reputation of homeless services in the community
- Refused to answer

37. Is this the first time you have been homeless? *

Mark only one oval.

- Yes
- No
- Refused to answer

38. During the past three years, what is the total length of time you have lived on the streets or in shelters? *

Mark only one oval.

- 1 week or less
- > 1 week/< 1 month
- 1-3 months
- > 3 months/< 12 months
- 1-2 year(s)
- > 2 years
- Refused to answer

39. In the past three years, how many times have you been housed and then become homeless again? (separate times stayed on the streets or shelters) *

Mark only one oval.

- This is first time
- 2 times
- 3 times
- 4 or more times

40. Why are you not in shelter? *

Mark only one oval.

- I chose not to be in shelter
- I am trying to access shelter, but they are full
- I think people get sick in shelter
- Shelters are too crowded
- Shelters have too many rules
- I am banned from one or more shelter
- I am a registered sex offender
- I had a bad experience in shelter
- I have been in shelter and they did nothing to house me
- I have, or someone in my family has a condition that prevents us from living in shared housing
- I need a shelter that will accept my pet(s)
- I only want to be in a selected shelter
- Refused to answer
- Other: _____

41. Will you be forced to leave the place you are staying in now within the next week? *

Mark only one oval.

- Yes
- No
- Refused to answer

42. Will you have a place to stay or money to get a place to stay once you leave? *

Mark only one oval.

- Yes
- No
- Refused to answer

43. What is your gender? *

Mark only one oval.

- Male
- Female
- Transgender M to F
- Transgender F to M
- Don't know
- Refused

44. Which of the following best describes your sexual orientation?

Mark only one oval.

- Straight
- Lesbian or Gay
- Bisexual
- Questioning
- Don't Know
- Refused

45. Are you Hispanic or Latino *

Mark only one oval.

- Yes
- No
- Don't know
- Refused to answer

46. What is your race? (you can select more than one) *

Check all that apply.

- America Indian or Alaska Native
- Asian
- Black or African American
- Native Hawaiian or Other Pacific Islander
- White
- Don't know
- Refused to answer

47. Have you ever served in the US Military (Armed Forces) or been called into active duty as a member of the National Guard or reservist? *

Mark only one oval.

- Yes
- No *Skip to question 48*

2020 ANNUAL HOMELESS POINT IN TIME SURVEY

48. What type of transportation do you currently use? *

Mark only one oval.

- Bicycle
- Own car
- Family/friends
- Dial-a-ride
- Taxi
- Public transportation
- Walk/none

49. What is your immigration status? *

Mark only one oval.

- Citizen
- Permanent resident
- Asylee/Refugee
- Parolee
- Undocumented
- Don't know
- Refused

50. What is your marital status? *

Mark only one oval.

- Single/not currently legally married
- Legally married
- Divorced
- Separated
- Widowed
- Don't know
- Refused to answer

51. Do you have any family members who are homeless and staying with you now? *

Mark only one oval.

- Yes *Skip to question 52*
- No *Skip to question 54*
- Refused *Skip to question 54*

2020 ANNUAL HOMELESS POINT IN TIME SURVEY

52. Including yourself, how many adults and how many children are homeless and staying with you? *

Mark only one oval per row.

	None	1	2	3	4	5	6	7	8
Males 55 and over	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Males 25-54	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Males 18-24	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Males under 18	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Females 55 and over	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Females 25-54	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Females 18-24	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Females under 18	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

53. Are any of the household members, other than you, a Veteran? *

Mark only one oval.

- Yes
- No Skip to question 54
- Don't know Skip to question 54
- Refused to answer Skip to question 54

2020 ANNUAL HOMELESS POINT IN TIME SURVEY

54. What kind of household is it? *

Mark only one oval.

- Household without children - adult(s) 25 or older
- Household with at least 1 adult 25 or older & 1 child under 18 years old
- Household with ONLY children (no members older than 24 years old)

2020 ANNUAL HOMELESS POINT IN TIME SURVEY

55. Have you ever been in foster care? *

Mark only one oval.

- Yes
- No
- Don't know
- Refused to answer

56. Are you a survivor of, or fleeing, domestic violence, human or sex trafficking? *

Mark only one oval.

- Yes
- No
- Don't know
- Refused to answer

57. Have you ever been in jail or prison? *

Mark only one oval.

- Yes
- No
- Don't know
- Refused to answer

58. Do you have a disabling condition? *

Mark only one oval.

- Yes *Skip to question 59*
- No *Skip to question 61*
- Don't know *Skip to question 61*
- Refused to answer *Skip to question 61*

2020 ANNUAL HOMELESS POINT IN TIME SURVEY

59. Please indicate which one *

Check all that apply.

- Physical/medical problems (besides HIV/AIDS)
- Mental health
- Drugs or alcohol addiction
- Developmental
- HIV/AIDS
- Other: (Specify below)

60. Specify if Other disabling condition:

2020 ANNUAL HOMELESS POINT IN TIME SURVEY

61. What is the highest level of education you have completed *

Mark only one oval.

- No schooling
- K to 4th grade
- 5th or 6th grade
- 7th or 8th grade
- 9th grade
- 10th grade
- 11th grade
- 12th grade, no diploma
- High School Diploma
- GED
- Post-secondary
- Other

62. What kind of income/benefits do you have? (Check all that apply) *

Check all that apply.

- Employment
- Alimony
- Child Support
- SSDI
- SSI
- VA Disability
- Private Disability Insurance
- SSA Retirement
- VA Pension
- Pension or other Retirement
- Workers Comp
- Unemployment Benefits
- TANF
- Food Stamps
- None

Other: _____

63. Do you or your family need any of these services right now? (Check all that apply) *

Check all that apply.

- Health Care
- Mental Health Treatment
- Substance Abuse Treatment
- HIV/Aids testing
- Housing Placement
- Short Term Rental Assistance
- Getting High School Diploma
- Vocational Training
- Child Care
- Employment
- Accessing Benefits
- Outreach
- Identification
- Legal Services
- Immigration Services
- Domestic Violence Services
- Case Management
- Food
- Transportation
- Relocation
- Storage
- Material Goods

64. In the past year, what issues have you encountered in trying to get help or access services? [Select all that apply]: *

Check all that apply.

- Lack of transportation
- Did not have ID/personal documents
- Did not know where to go for help
- Did not qualify for service
- Placed on a waitlist and never heard back
- Could not get help because of a language barrier
- Could not access a service because of age
- No issues accessing services/assistance
- I'd rather not say

Other: _____

65. How do you get news and information? *

Mark only one oval.

- I watch TV
- I listen to the radio
- I spend a lot of time reading Social Media
- I read the Newspaper
- I surf websites
- I'm not interested in news

66. When there is an approaching emergency, what is the best way to reach you? *

Mark only one oval.

- Send me an email
- Leave a message on my phone
- Text my phone
- Signs at the Government Center
- Police/social worker
- Church leaders who know me
- Tell me through radio or TV
- Other: _____

67. When there is an approaching emergency, what is the second best way to reach you? *

Mark only one oval.

- Send me an email
- Leave a message on my phone
- Text my phone
- Signs at the Government Center
- Police/social worker
- Church leaders who know me
- Tell me through radio or TV
- Other: _____

68. Person assisting in completing survey: *

Mark only one oval.

- Agency Employee
- Volunteer

69. Observations *

Mark only one oval.

- Did client present intoxicated
- Did client present with visible mental health symptoms
- Did client present with a hospital bracelet or gown
- Did client present with open wounds
- Was the client missing any limbs
- Did client present with a service animal or pet
- Did client present in a wheelchair
- N/A

70. Name of agency *

71. Type of program *

Mark only one oval.

- Emergency Shelter
- Transitional program
- Youth Shelter
- Drop in Center/feeding site
- Supportive Services program (not including street outreach or access points)
- Safe Haven
- Street Outreach or other access point

72. Program Name: *

This content is neither created nor endorsed by Google.

Google Forms