Agency Name:	
Program Name:	

2025 CoC Program Monitoring

ATTACHMENT D: HMIS ID REQUEST FORM

Please complete this form and send to nv500monitoring@gmail.com no later than May 30. Please also use this email address for any questions or issues.

As part of the 2025 Monitoring Site Visits, the consulting team will review a selection of program participant files to assess key elements of CoC compliance, including (but not limited to) program eligibility, service provision, income certification/rent calculation, and other compliance topics.

☐ Attached to this form is a list of HMIS IDs for all participant heads of household who have been enrolled in this program, including those currently enrolled as well as those who have exited the program.

Do not include any personally identifiable information (names, addresses, SSN, contact information, etc.) for program participants in this document. Please only include the requested information (HMIS ID, entry date, exit date if applicable).

Additional Instructions and Information:

- Please include the HMIS IDs for all heads of household served by the program in the last 12 months (May 1, 2024 – April 30, 2025), including those who have exited as well as those still enrolled.
- Please ensure that the list indicates each participant's HMIS ID, entry date, and (if applicable) exit date.
- The consulting team will randomly select 3-5 HMIS IDs from the list, which they will review during their in-person site visit.
- In early June, the consulting team will follow up with your Monitoring Point of Contact with the list of selected files and additional information about preparing for the site visit.