

# Surveys of People Experiencing Homelessness

## FORM 3: Observation of Unsheltered Site

County: \_\_\_\_\_

Date: January 27, 2005

Completed by (Name) : \_\_\_\_\_  Staff  Volunteer  Other Time: \_\_: \_\_ am / pm

Please supply the following information about your observation. Supply as much detail as possible.  
Complete the blanks or put a? by the appropriate choices.

1) Please describe the site.

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> Vacant house  | <input type="checkbox"/> Empty building | <input type="checkbox"/> Automobile         |
| <input type="checkbox"/> Library       | <input type="checkbox"/> Street         | <input type="checkbox"/> Campsite           |
| <input type="checkbox"/> Motel         | <input type="checkbox"/> Woods          | <input type="checkbox"/> 24-hour Laundromat |
| <input type="checkbox"/> Open business | <input type="checkbox"/> Under a bridge | <input type="checkbox"/> Other: _____       |

2) Did it appear that this was a permanent site? (i.e., individuals had lived here for a month or more)

Yes  No  Can't Tell

3) How many people in total did you observe at this site? \_\_\_\_\_ #

4) How many appeared to be adults? \_\_\_\_\_ # 4a) Of those how many were Female? \_\_\_\_\_ #

5) What did their race/ethnic background appear to be? (provide numbers for all that apply)

African American: \_\_\_\_\_ Asian: \_\_\_\_\_ White: \_\_\_\_\_ Other: \_\_\_\_\_ Can't Tell \_\_\_\_\_

6) How many appeared to be of Hispanic, Latino or Chicano? Total number \_\_\_\_\_ # Can't Tell \_\_\_\_\_

7) How many appeared to be children? \_\_\_\_\_ # 7a) Of those how many appeared to be Female? \_\_\_\_\_ #

8) How many families did there appear to be? Total number \_\_\_\_\_ #  Can't Tell

9) How many individuals appeared to be part of a family group? Total number \_\_\_\_\_ #  Can't Tell

10) Did any individual(s) appear to be under the influence of drugs or alcohol?  Yes  No  Can't Tell

11) Did any individual(s) appear to be mentally ill?  Yes  No  Can't Tell

12) Did any individual(s) appear to be disabled?  Yes  No  Can't Tell

13) Did individuals appear to have sufficient clothing?  Yes  No  Can't Tell

14) Did you observe any ...

14a) Automobiles in the group?  Yes  No #: \_\_\_\_\_

14b) Bicycles in the group?  Yes  No #: \_\_\_\_\_

14c) Other transportation in the group?  Yes  No Type: \_\_\_\_\_

14d) Access to public transportation?  Yes  No  Can't Tell

THANK YOU FOR YOUR HELP!