ARIZONA BALANCE OF STATE

CONTINUUM OF CARE

Request for Access to Arizona Balance of State (BOS) HMIS for New Agencies

All requests for access to BOS Homeless Management Information Systems (HMIS) must be made through the Arizona Department of Housing; please send this form to Cristina.Benitez@azhousing.gov. First priority of limited licenses will go to:

- *BOS HUD CoC Housing Projects*
- *BOS Service Providers*
- *BOS COC Access Points*
- *Local Coalitions to End Homelessness (LCEHs)*

The additional requests will be addressed in the order they are received pending availability of licenses.

If approved, ADOH will invoice your agency annually for the HMIS access fee and the cost of the licenses (regular user= $230, ART license= $98). Along with the invoice, an HMIS Partnership Agreement will be sent and is required to be signed and returned before access will be granted.

Please complete the following information:

If approved, to whom should the invoice and Partnership Agreement be sent?

Agency: _____   Name: _____

Phone #: _____   Email Address: _____

Is your agency a participating member in the Local Coalition **and** their Coordinated Entry/Case Conferencing committee?   Yes   No   If yes, which County/Counties: _____

Depending upon the type of program, are referrals required (i.e. is your agency taking referrals from Coordinated Entry)?   Yes ☐ No

For what type of program/project is your Agency requesting HMIS access? (e.g. Permanent Supportive Housing, Rapid Rehousing, Shelter, Support Services, Outreach, etc.) (List all that apply)

_____

What are your funding source(s) (e.g. CoC, ESG, CDBG, etc.)? _____

What additional criteria does the program require for participation? _____

What is the timeframe for the grant/funding? (e.g. July 1, 2024 through June 30, 2025): _____

What is the Service Area? (e.g. Kingman): _____

Is the agency a non-profit or community-based organization? Yes   No

What is the target population for this program? (e.g. elderly, youth, veterans, etc.) _____