

WFF Client Exit Survey

Survey Instructions

Please complete this survey within 30 days of a client family's exit from the program. In order to complete this survey you will need to interview the head of household of the outgoing client family. To conduct the interview you may wish to use this [printable version of the survey](#) to ensure you collect all necessary information. For more detailed instructions and definitions of terms used in this survey, please refer to these [guidelines](#). For questions, please contact Margaret Hennings, Performance Measurement Specialist, at Building Changes: Margaret.Hennings@BuildingChanges.org or 206-805-6163. After you click the "Done" button on the last page, you will be taken to a "thank you" page. Your survey has not been submitted until you see this page.

WFF Project Identification

- * 1. In which WFF project was this family enrolled?

- * 2. Who is entering the data in to this survey?

Note: This should be the name of the case manager or data entry staff person, NOT the name of the client.

Family Identification

- * 1. Unique Household Identification Number

Note: This may be the household's HMIS number or some other project-specific identifier that you use for this family within your programs.

Please make sure you use the same number that was used on this family's intake survey.

2. On what date did or will the client family exit from the WFF program?

Note: This may or may not be the same date as when the family exited from housing.

Service end date: MM / DD / YYYY
 / /

3. How many people are currently living in this household?

Adults (all persons age 18 or older living in the household):

Children (all persons under age 18 living in the household):

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Exit Information

1. What is the primary reason for this family's exit from the WFF program?

Left for a housing opportunity before completing program

Completed program

Non-payment of rent/occupancy charge

Non-compliance with program

Criminal activity/destruction of property/violence

Reached maximum time allowed in program

Needs could not be met by program

Disagreement with rules/persons

Death

Unknown/disappeared

Other (please specify)

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2. Where will this family be living after program exit?

- Rental house or apartment (no subsidy)
- Public Housing
- Section 8
- Shelter Plus Care
- HOME subsidized house or apartment
- Homeownership
- Moved in with family or friends (permanent)
- Transitional housing for homeless persons
- Temporarily moved in with family or friends
- Psychiatric hospital
- Inpatient alcohol or other drug treatment facility
- Jail/prison
- Emergency shelter
- Other supportive housing
- Places not meant for human habitation (eg. street)
- Unknown
- Other (please specify)

Education and Employment

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1. What is the highest level of school completed by the head of household?

- None
- 4th grade or less
- 5th or 6th grade
- 7th or 8th grade
- 9th grade
- 10th grade
- 11th grade
- 12th grade (no diploma)
- High school diploma
- GED
- Post-secondary degree

2. Is the head of household currently in school?

- Yes
- No

3. Is the head of household currently enrolled in a job training or job search program?

- Yes
- No

4. Is the head of household currently employed?

- Yes
- No

Currently Employed

Answer these questions only if the head of household is currently employed.

If they are working more than one job, answer all questions for the job at which they work the most hours.

If the head of household is not working, please do not answer any of the questions and skip directly to the next page.

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1. If the head of household is currently employed, what type of job is it?

Permanent

Temporary

Seasonal

Don't Know

2. If the head of household is currently employed, what is their monthly income from working?

Monthly income:

3. If the head of household is currently employed, do they receive any health insurance coverage from their job?

Yes

No

4. If the head of household is currently employed, do they receive any other benefits (transportation, childcare, sick time, short- or long-term disability insurance, life insurance, etc) from their job?

Yes

No

Income and Benefits

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1. Does the household have any income? If so, how much do they receive each month from each source?

Employment	<input type="text"/>
Unemployment	<input type="text"/>
SSI	<input type="text"/>
SSDI	<input type="text"/>
Veteran's Disability	<input type="text"/>
Private Disability	<input type="text"/>
Workers Compensation	<input type="text"/>
TANF	<input type="text"/>
GA	<input type="text"/>
Social Security	<input type="text"/>
Veteran's Pension	<input type="text"/>
Pension or Retirement	<input type="text"/>
Child Support	<input type="text"/>
Alimony or spousal support	<input type="text"/>
Other	<input type="text"/>

2. Is the household receiving any state or federal benefits? If so, which ones? (select all that apply)

- Food stamps
- Medicaid
- Medicare
- SCHIP (State Children's Health Insurance Program)
- WIC
- Veterans Administration Medical Services
- TANF Child Care services
- TANF transportation services
- Other TANF-funded services
- Other (please specify)

Savings

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1. Does the head of household have a savings account?

Yes

No

2. If yes, is there a regular contribution to this savings account?

Note: If the client answers no to the first question, leave this question blank.

Yes

No

Children

Please answer these questions as they relate to the oldest child in the household.

If there are no children living in the household at this time (client is pregnant or children have been temporarily removed), leave these questions blank and select "Done" at the bottom of the page.

If no children in the household are enrolled in daycare or school, leave these questions blank and select "Done" at the bottom of the page.

1. If enrolled in daycare or school, how many times has the oldest child in the household changed schools in the past year?

Number of changes:

2. If enrolled in daycare or school, how often was the oldest child in the household usually absent in the past 6 months? This includes excused as well as unexcused absences.

Less than 1 day per month

About 1 day per month

About 1 day every 2 weeks

2 days per week

3 or more days per week