



Federal Government
Ministry of Social Development
 National Secretariat of Citizenship Income
 Unified Registry Department

**Supplementary form 2
 Homeless Person
 F1.02**

1 - IDENTIFICATION AND CONTROL

1.01 - Family Code <input type="text"/>	1.02 - FU <input type="text"/>	1.03 - Municipality <input type="text"/>	1.04 - District <input type="text"/>	1.05 - Sub-District <input type="text"/>	1.06 - Census Sector <input type="text"/>
1.07 - Registry Operation: <input type="checkbox"/> 1 - Inclusion <input type="checkbox"/> 2 - Alteration	1.08 - Data Collection Method: <input type="checkbox"/> 1 - Without Home Visit <input type="checkbox"/> 2 - With Home Visit	1.09 - Form(S) Completed <input type="checkbox"/> 0 - Main <input type="checkbox"/> 2 - Separate 2 <input type="checkbox"/> 1 - Separate 1 <input type="checkbox"/> 3 - Supplementary		1.10 - DATE OF INTERVIEW <input type="text"/> / <input type="text"/> / <input type="text"/> 20 <input type="text"/> Day Month Year	

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INTERVIEWER

1.11 - Name

1.12 - Interviewer's id number - **Interviewer's signature**

1.13 - Observations

Signature of the representative from city hall / organ responsible for registration

2 - IDENTIFICATION OF HOMELESS PERSON

2.01 - Order Number **2.02 - Complete name**

2.03 - Identification number (NIS/PIS/PASEP)

2.04 - Where (name) usually sleeps?

1 - Street
 How many times a week?

2 - Hostel/Refuge
 How many times a week?

3 - Private Household
 How many times a week?

4 - Other
 How many times a week?

2.05 - How long (name) has been living on the street?

1 - Less than six months

2 - Between six months and one year

3 - Between one and two years

4 - Between two and five years

5 - Between five and ten years

6 - More than ten years



2.06 - What are the main reasons why (name) moved to the street / hostel / other?

This item admits multiple markup.

- 1 - Loss of housing
- 2 - Threats/violence
- 3 - Family problems
- 4 - Alcoholism/drugs
- 5 - Unemployment
- 6 - Work
- 7 - Health treatment
- 8 - Preference/option
- 9 - Other
- 10 - Does not know / remember
- 11 - Did not answer

2.07 - How long has (name) lived in this city?

- 1 - Less than six months
- 2 - Between six months and one year
- 3 - Between one and two years
- 4 - Between two and five years
- 5 - Between five and ten years
- 6 - More than ten years

2.08 - Do you live with your family on the street?

- 1 - Yes (Use the list of family components in Block 3 of the Main Form)
- 2 - No

2.09 - (Name) has contact with relatives not living on the streets ?

- 1 - Every day
- 2 - Every week
- 3 - Every month
- 4 - Every year
- 5 - Almost never
- 6 - Never

2.10 - In the past six months has (name) attended or joined any community activity?

This item admits multiple markup.

- 1 - School
- 2 - Association
- 3 - Cooperative
- 4 - Social movement
- 5 - Does not know / remember
- 6 - Did not answer

2.11 - In the past six months, has (name) attended any of the places listed below?

This item admits multiple markup.

- 1 - Reference Center for Social Assistance - CRAS
- 2 - Specialized Social Assistance Reference Center - CREAS
- 3 - Specialized Reference Center for the Homeless Population
- 4 - Government host institution (shelter / refuge / other)
- 5 - Non-governmental host institution (private charity / other)
- 6 - Hospital / General Practice
- 7 - None

2.12 - Has (name) been employed with a formal contract?

- 1 - Yes
- 2 - No
- 3 - Does not know

2.13 - What does (name) do to make money?

This item admits multiple markup.

- 1 - Construction
- 2 - Car Keeper
- 3 - Lumper
- 4 - Recyclable material picker
- 5 - General services / cleaning /other
- 6 - Asks for money
- 7 - Sales
- 8 - Other
- 9 - Did not answer

HEAD OF HOUSEHOLD - HF

I declare, under the penalties of law (art. 299 of the Criminal Code) that the statements contained in this form are accurate and I commit to update them, at the municipal level, whenever there are any changes in the information provided by me in this interview, or in the maximum of two years from the date of this interview.

Head of Household Signature

Receipt of proof of information

I, _____ / _____ / _____
hereby state that I have received a receipt stating that I have provided the information required in this form.
_____ / _____ / _____
place _____ date

signature

RECEIPT OF INFORMATION GIVEN	
Federal Government Ministry of Social Development National Secretariat of Citizenship Income Unified Registry Department	Supplementary form 2 Homeless Person F1.02
I declare, under the penalties of law (art. 299 of the Criminal Code) that the statements contained in this form are accurate and I commit to update them, at the municipal level, whenever there are any changes in the information provided by me in this interview, or in the maximum of two years from the date of this interview	
Name: _____ _____	_____
Identification (CPF) _____ - _____	Identification (Voter ID) _____ - _____
_____	Signature of the Head of the Family – (HF) _____
Name of the municipality _____	_____
Family code _____	Interviewer _____
Date of interview _____ / _____ / 20____ Day Month Year	Identification (CPF) _____ - _____
Mode of operation: <input type="checkbox"/> Inclusion <input type="checkbox"/> Change	Phone number of entity in charge _____ Interviewer signature _____



Ministry of Social Development