HMIS Program/Grant Setup

Instructions: Fill out this form to add/modify HMIS Program Information. All sections – Agency, Program, Funding, Program Type, Population, & Inventory need to be completely filled out. If you have any questions, please contact HMIS Support at https://mis@homelesshouston.org. Fax completed forms to (713) 739-8038, or scan and email to https://mis@homelesshouston.org.

Agency Information		
Organization Name:		
Organization Mailing Address:		
Contact Name:		
Contact Number:		
Contact Email:		
Project/Program Setup		
Program Name:		
Program Start Date:	Program End Date:	
Program Type:		
List the organizations that require access to this program:		
<u>Grant Setup</u>		
Grant Name:		
Grantee Agency:		
Federal Grant Program:		
Grant Program Component:		
Grant Start Date:	Grant End Date:	
List the organizations that require to access this program:		
Service & Unit Setup		
On the HMIS Standard Service	Code list, check the boxes next to the serv	rices that will be funded and
provided through the program a	nd grant listed above.	
Project/Program Authorization I authorize that the above inform named project.	<u>n</u> nation is a true and accurate statement of t	he characteristics of the above-
Completed By:	Signature:	Date: