

Boston Homeless Assistance Network (HAN) Release: Client Authorization for Coordinating Services

I, _____ (name), hereby authorize each *Homeless Assistance Network (the "Network")* member (see attached) to share any and all of my personal information with any other member of the Network as may be necessary to provide and coordinate services I have requested or may from time to time request. I specifically consent to the release to any other member of the Network of my case notes, substance abuse records, mental health records, domestic violence records, HIV status, and criminal records information. I also authorize each member of the Network to share this information electronically, orally or otherwise. I understand that a photocopy or digital copy of this authorization is as valid as the original.

**If this person is not 18 years of age, a parent or guardian must sign for them.*

Date

Signature of Applicant (or of parent/guardian if under 18)

Print Full Name:

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- This authorization will expire after 24 months since last contact with any member of the Network.
 - I understand that I may withdraw this authorization at any time by informing any member of the Network in writing that I no longer want my information shared among them.
 - I understand that members of the Network will not deny service provision or payments based on whether I sign this authorization. However, I understand coordination among the members of the Network for services that I have requested may be impacted.
 - By signing this form, I am allowing Member organizations to share my information as may be necessary to provide services I have requested or may from time to time request. However, I understand that my information may be redisclosed by the recipient and may no longer be protected by the Member's privacy policies or by applicable state or

federal law or regulation.

- Additional agencies may join the Network and will have access and permission to share to your information. The list of agencies in the Network is attached. An updated list of agencies is posted online at boston.gov/han-providers. The list may also be requested at any time from any member agency.

Boston Homeless Assistance Network (HAN) Providers

Below is a list of the member agencies of the Boston Homeless Assistance Network. Additional agencies may join the network at any time. An updated list of agencies is posted online at boston.gov/han-providers and may also be requested from any of the participating agencies.

Action for Boston Community

Development

BayCove

Boston EMS

Boston Healthcare for the Homeless

Boston Housing Authority

Boston Medical Center

Boston Public Health Commission

Boston Rescue Mission

Bridge Over Troubled Waters

ESAC

Eliot Human Services

FamilyAid Boston

HEARTH

Home for Little Wanderers

HomeStart

Justice Resource Institute

Massachusetts Housing and Shelter Alliance

Metro Housing | Boston

New England Center and Home for Veterans

Pine Street Inn

St. Francis House

US Department of Veteran Affairs

Volunteers of America

Victory Programs

Women's Lunch Place