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| Questionnaire for Elder Evacuee for Placement in a Volunteer Host Home |

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| Click or tap here to enter text. |

Senior Name:

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| Click or tap here to enter text. |

Phone Number:

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| Click or tap here to enter text. |

Current Location:

Who are we authorized to contact to get in touch with you:

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| Click or tap here to enter text. |

Name:

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| Click or tap here to enter text. |

Phone:

Your Age Range:

 55-64 [ ]  65-74 [ ]  75-84 [ ]  85-94 [ ]  95+ [ ]

Do you have a “high-priority” medical appointment? Yes [ ]  No [ ]

A “high-priority” medical appointment is a life-changing appointment scheduled months/weeks ago and rescheduling the appointment would negatively affect the medical condition.

What are your most important needs to be met in a host home environment?

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| Click or tap here to enter text. |
| Click or tap here to enter text. |
| Click or tap here to enter text. |

What are your transportation needs?

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| Click or tap here to enter text. |
| Click or tap here to enter text. |
| Click or tap here to enter text. |

As of now, what length of time do you feel you will need at a host home?

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| Click or tap here to enter text. |

Do you have regular in-home care assistance? Yes [ ]  No [ ]

 If yes, who provides your care?

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| Click or tap here to enter text. |

Are you comfortable with stairs in the home? Yes [ ]  No [ ]

 Do you prefer the use of a cane or walker? Yes [ ]  No [ ]

 Are you in need of one at this time? Yes [ ]  No [ ]

 [ ]  Cane

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| Click or tap here to enter text. |

 [ ]  Walker What size:

Would you prefer the use of a raised toilet seat? Yes [ ]  No [ ]

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| Questionnaire for Elder Evacuee for Placement in a Volunteer Host Home (page 2) |

Do you have vision impairment? Yes [ ]  No [ ]  If yes, what degree: [ ]  Mild [ ]  Severe

Do you have any allergies or sensitivities, such as pet allergies?

 Yes [ ]  No [ ]

If yes, describe below:

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| Click or tap here to enter text. |
| Click or tap here to enter text. |
| Click or tap here to enter text. |

Are you comfortable with a home host smoker? [ ]  Outside Yes [ ]  No [ ]

If you are a smoker, are you comfortable smoking outside? Yes [ ]  No [ ]

Do you have a pet that will be with you? Yes [ ]  No [ ]

 If yes, what type and how many?

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| Click or tap here to enter text. |
| Click or tap here to enter text. |
| Click or tap here to enter text. |

Do you prefer to be placed in Butte County? Yes [ ]  No [ ]

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| Questionnaire for Elder Evacuee for Placement in a Volunteer Host Home (page 3) |

Would you consider placement outside of Butte County, as far south as Sacramento, CA or as far north as Redding, CA? Yes [ ]  No [ ]

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| Click or tap here to enter text. |

If yes, which would be your preference (keep in mind, we may not guarantee a preference):