



HIPAA RELEASE OF INFORMATION AND DISCLOSURE FORM

The Colorado Interagency Council on the Homeless is conducting a statewide “Count” of individuals and families who are homeless across Colorado. The purpose of the study is to learn more about the needs of persons who are homeless or may soon be homeless, so that the state can develop appropriate programs and services. We are asking people to complete surveys about issues that relate to their homelessness; the survey is completely optional.

The data collected for this “Count” will be housed and analyzed by researchers at the University of Colorado at Denver, and then given to the Colorado Interagency Council on the Homeless. A report will be prepared based on the collected surveys. Information that could be used to tell who you are will never be used for these reports. We will not turn your information over to a national database. We must have your consent to use or disclose your information beyond these purposes.

- You have the right to get services even if you choose NOT to participate in the study.
- You have the right to ask for information about who will see your information.

By signing below you agree to release your information for the purpose of this study.

Signature

Date