

# HMIS Data Collection VA Supplemental Form – Veteran Assessment

**CLIENT** (name or other identifier)

**BRANCH OF THE MILITARY**

<input type="checkbox"/> Army
<input checked="" type="checkbox"/> Air Force
<input type="checkbox"/> Navy
<input checked="" type="checkbox"/> Marines

<input type="checkbox"/> Coast Guard
<input checked="" type="checkbox"/> Client doesn't know
<input type="checkbox"/> Client refused

**DISCHARGE STATUS**

<input type="checkbox"/> Honorable
<input checked="" type="checkbox"/> General under honorable conditions
<input type="checkbox"/> Under other than honorable conditions (OTH)
<input checked="" type="checkbox"/> Bad Conduct

<input type="checkbox"/> Dishonorable
<input checked="" type="checkbox"/> Uncharacterized
<input type="checkbox"/> Client doesn't know
<input checked="" type="checkbox"/> Client refused

**SERVICE ENTRY DATE**

		/			/				
Month		Day		Year					

**SERVICE EXIT DATE**

		/			/				
Month		Day		Year					

**Select Theatre(s) of Operation(s)**

**Status**

Theatre of Operations: World War II	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	Client doesn't know	<input type="checkbox"/>	Client refused
Theatre of Operations: Vietnam War	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	Client doesn't know	<input type="checkbox"/>	Client refused
Theatre of Operations: Persian Gulf War (Operation Desert Storm)	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	Client doesn't know	<input type="checkbox"/>	Client refused
Theatre of Operations: Afghanistan (Operation Enduring Freedom)	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	Client doesn't know	<input type="checkbox"/>	Client refused
Theatre of Operations: Iraq (Operation Iraqi Freedom)	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	Client doesn't know	<input type="checkbox"/>	Client refused
Theatre of Operations: Iraq (Operation New Dawn)	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	Client doesn't know	<input type="checkbox"/>	Client refused
Theatre of Operations: Other Peace-keeping Operations or Military Interventions (such as Lebanon, Panama, Somalia, Bosnia, Kosovo)	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	Client doesn't know	<input type="checkbox"/>	Client refused
Theatre of Operations: Korean War	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	Client doesn't know	<input type="checkbox"/>	Client refused