



U.S. Department of Veterans Affairs

National Center on Homelessness Among Veterans
Research-driven solutions to prevent and end homelessness

Application for the Homeless Veterans Research Engagement Panel

Contact Information

Full Name _____

Address _____

City/State/Zip _____

Phone _____

Email _____

Demographic Information

Age: _____

Sex:

- Male
- Female
- Prefer not to say

Race:

- White
- Black
- Asian/Pacific Islander
- Native American/Alaskan Native
- Other
- Prefer not to say

Ethnicity:

- Hispanic
- Non-Hispanic
- Prefer not to say

Military Background

In which branch of the military did you serve:

- Air Force
- Army
- Coast Guard
- Marines
- Navy
- Space Force

Were you ever deployed?

- Yes
If yes, please list location(s) of any deployments:
- No

Availability

As a member of the panel, would you be able to attend scheduled meetings by video conference (no more than once every two months)?

- Yes
- No

As a member of the panel, would you be able to fulfill the commitment of serving a one-year term?

- Yes
- No

Have you ever been homeless?

We define homelessness as not having a fixed, regular, and adequate nighttime residence (e.g., shelter, public park, vehicle, on streets).

Yes

No

In total, how much time have you been homeless in your life?

Less than 6 months

6 months-1 year

1-2 years

2-3 years

3-4 years

4+ years

Are you currently homeless?

Yes

No

If not, when was the last time you were homeless?

By typing your name or signing below, you agree that you have responded to this form truthfully and are interested in serving on the Homeless Veterans Research Engagement Panel.

(Signature)

(Date)

Make sure to save this form once you are done filling it out otherwise changes might be lost.

Completed forms and/or any questions should be directed to NCHAV at: vanchav@va.gov