

## The Neuropsychology of Complex Homelessness Study

### Demographics and Screening Questionnaire

If you would like to apply for a Neuropsychological Assessment on behalf of your client, please complete the following questionnaire and return it to [neuro.assessment@haymarket.org.au](mailto:neuro.assessment@haymarket.org.au) for review.

Questions	
1. Are you homeless or at risk of homelessness?	<input type="checkbox"/> Yes <input type="checkbox"/> No
2. Have you had more than one failed tenancy in the past?	<input type="checkbox"/> Yes <input type="checkbox"/> No
3. Have you ever been diagnosed with a mental illness, cognitive impairment (e.g., from a brain injury) or substance use disorder in the past?	<input type="checkbox"/> Yes <input type="checkbox"/> No
4. Have you ever been suspected of having a mental illness, cognitive impairment (e.g., from a brain injury) or substance use disorder?	<input type="checkbox"/> Yes <input type="checkbox"/> No
5. Have you had a neuropsychological assessment in the past year?	<input type="checkbox"/> Yes <input type="checkbox"/> No
6. Do you currently have a case manager or support worker?	<input type="checkbox"/> Yes <input type="checkbox"/> No
7. What is your age?	
8. What is your gender?	Prefer to describe self as:  _____ (e.g., Male, female, non-binary, gender-fluid, agender)
9. Are you an Aboriginal/Torres Strait Islander?	<input type="checkbox"/> Yes <input type="checkbox"/> No
10. In which country were you born?	
11. What is your first language?	
12. Are you comfortable communicating in the English language?	<input type="checkbox"/> Yes <input type="checkbox"/> No
13. Do you have a significant communication disorder?	<input type="checkbox"/> Yes <input type="checkbox"/> No
14. Are you currently employed?	Yes <input type="checkbox"/> No
15. What is your marital status?	<input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed <input type="checkbox"/> Never Married
16. How many children/dependents do you have?	
17. Do you have a guardian or advocate?	<input type="checkbox"/> Yes <input type="checkbox"/> No