

## **CSI Periodic Data**

NAME/MRN		

Facility Name:	ID:	Program Name:	ID:		
Provider:	ID:	Date Completed			
	Edu	cation Level			
☐ Kindergarten [00]	☐ Grade 9 [09]	☐ Postgraduate 1 [17]	☐ Other Postsecondary		
☐ Grade 1 [01]	☐ Grade 10 [10]	☐ Postgraduate 2 [18]	Education Program [20]		
☐ Grade 2 [02]	☐ Grade 11 [11]	☐ Postgraduate 3 [19]	☐ Other-includes vocational		
☐ Grade 3 [03]	☐ Grade 12 [12]	☐ Postgraduate 4 [20]	education and training [98]		
	☐ College Freshman [13]	☐ GED [12]	☐ Unknown/Not Reported [99]		
☐ Grade 5 [05]	☐ College Sophomore [14]	☐ Bachelors [20]	□ None [00]		
☐ Grade 6 [06]	☐ College Junior [15]	☐ Masters [20]	☐ Alt Education (HS Degree)		
☐ Grade 7 [07]	☐ College Senior [16]	☐ Doctorate [20]	[12]		
☐ Grade 8 [08]			☐ Vocational Training [98]		
	Emplo	yment Status			
☐ Full Time: 35 Hrs or More [A]	☐ Retired [I]		Disabled [K]		
☐ Part Time: Less than 35 Hrs [B	B] ☐ Self Employe	ed [K]	Not Employed [U]		
☐ Student – Full-Time [G]	□ On Active Mil	litary Duty [K] □	Unknown [U]		
☐ Student – Part-Time [G]					
	Living	Arrangement			
☐ House or apartment (includes the barracks, etc.) [A]	trailers, hotels, dorms,	□ Adult Residential Faci [J]	lity, Social Rehabilitation Facility, Crisis		
☐ House or apartment and requiring some support with daily		☐ Mental Health Rehabil	☐ Mental Health Rehabilitation Center (24-Hour) [K]		
living activities (applies to adults only) [B]		☐ Skilled Nursing Facility	☐ Skilled Nursing Facility/Intermediate Care Facility/Institute of		
$\square$ House or apartment and requiring daily support and		,	Mental Disease (IMD) [L]		
supervision (applies to adults only) [C]		•	☐ Inpatient Psychiatric Hospital, Psychiatric Health Facility		
☐ Supported housing (applies to adults only) [D]		, , <del>, =</del> =	(PHF) [M]		
☐ Foster family home [E]		• • •	☐ State Hospital [N]		
☐ Group Home (includes Levels 1-12 for children) [F]			☐ Justice-related (Juvenile Hall, Department of Corrections and		
☐ Residential Treatment Center (includes Levels 13-14 for			Rehabilitation Youth Facility, correctional facility, jail, etc.) [O]  Homeless, no identifiable residence [P]		
children) [G]	ru1	☐ Other [Q]	ible residence [F]		
☐ Community Treatment Facility	[П]	☐ Unknown/Not Reporte	od [11]		
☐ Board and Care [I]	Conservato	rship / Court Status	eu [O]		
☐Temporary Conservatorship (W		•	dent of the Court (W&I Code, Section		
□Lanterman-Petris-Short (W&I C	,	300) [G]	dent of the Gourt (War Gode, Geetion		
☐Murphy (W&I Code, Section 50	,	,	Status Offender (W&I Code, Section		
□Probate (Probate Code, Divisio	/ • •	601) [H]	1.1.1.2.2. (1.1.4.1.2.2.2.4.)		
•	,	,	☐ Juvenile Court, Ward - Juvenile Offender (W&I Code, Section		
□PC 2974 (Penal Code, Section 2974) [E] □Representative Payee Without Conservatorship (W&I Code,		603) [1]	,		
Section 5686) [F]	Conscivatorship (vvai Code	¬, □Not Applicable [J]			
[ ]		□Unknown/Not Reported	d [U]		

NAME/MRN		

Caregiver				
Is the client a Caregiver? ☐ Yes ☐ No				
Caregiver (under 18 years) How many dependents does consumer care for at least 50% of the time who are under 18 years of age?				
Caregiver (18 years and over) How many dependents does consumer care for at least 50% of the time who are 18 years of age and over?				