Balance of State CoC VESTA Homeless Management Information System (HMIS) New User Form

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| **New User Information** | | | |
|  | | | |
| Name: |  |  |  |
|  | *Last* | *First* | *M.I.* |
|  | | | |
| Organization: | What CHO does the user work for? | | |
|  | | | |
| Work Location: |  | | |
|  | | | |
| Email Address: |  | | |
|  | | | |
| Work Phone: | User’s Work Phone | | |
|  | | | |
| Title: |  | | |
| User’s Schedule\*: |  | | |
|  | | | |
| **Project Access Information** | | | |

| Project | User Role |
| --- | --- |
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\***Training sessions are typically scheduled on Monday – Friday at either 9:30am or 1:30pm. The session duration depends on the project types. We need to know when the user will be available for training.**