Partners Ending Homelessness
Rochester/Monroe County Homeless Continuum of Care NY-500
Homeless Management Information Systems (HMIS)
277 Alexander Street, Suite 208-210
Rochester, NY 14607
(585) 319-5091 Fax: (585) 319-5488

HMIS Data Sharing OPT-OUT Form

_____ (Agency Name) will be entering your information in the Homeless Management Information System (HMIS) data collection website. Only statistical information is uploaded to HUD and the New York State Data Warehouse in order to obtain funding for the community programs. The data will also be shared with other programs in the community to better serve your needs.

Your information will still be in the HMIS system, but other agencies will not have access to your information if you sign this opt-out form. This will not affect your ability to receive services.

If you do not want other agencies to view your data, please sign this form.

Signature _____

Date _____

Revised 8/24/2026 (Name and address changes only.)