

**New York State Office of Alcoholism and Substance Abuse Services
Waiting List Applicant Data Report PAS-51N Instructions**

1. **PLACEMENT** – an applicant who has been determined to be eligible for admission into the program but a bed is not available or additional patients cannot be added to counselor caseloads.
2. **REMOVAL** – it has been determined that the applicant is no longer interested in being admitted into the program.

COMPLETE FOR PLACEMENT AND REMOVAL

Program Select the program (PRU) for which a Waiting List entry is to be made.

Client ID Enter a Waiting List Client ID consisting of up to 20 alpha or numeric characters. **Do not use the client's name or Social Security Number.** This ID does not have to be the same Client ID used if the person is admitted.

Sex Select "Male" or "Female."

Birth Date Enter the applicant's date of birth (MM/DD/YY).

Last 4 SSN Enter the last four digits of the applicant's Social Security Number (SS #). If the applicant does not have a SS #, or if the SS # is unknown at this time, enter four zeros (i.e., "0000").

Last Name

2 Char Enter the first two letters of the applicant's last name at birth.

COMPLETE FOR PLACEMENT

Client Receiving

Treatment Select "Yes" or "No" as to whether the applicant is currently active (on census) in another chemical dependence or gambling treatment program.

Pregnant Select "Yes" or "No" as to whether the applicant is currently pregnant.

Injector Select "Yes" or "No" as to whether it has been determined that the applicant injects his/her substance(s) of abuse.

MICA Select "Yes" or "No" as to whether the applicant currently has, or has a history of, mental illness.

Zip Code of

Residence Enter the five digit zip code for the applicant's county residence. If the applicant is homeless and does not live in a shelter, use the program's

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zip code. If the applicant is homeless and lives in a shelter, use the shelter's zip code. For Canada use "88888."

County of

Residence From the drop down list, click on the applicant's NY county code or the values for any of the listed border states. If the zip code for Canada was entered ("88888"), click on "90 Canada." If the applicant's zip code is outside of these geographic areas, the user should click on "80 Other" from the drop down list.

70 Connecticut	CT
71 New Jersey	NJ
72 Pennsylvania	PA
73 Massachusetts	MA
74 Vermont	VT
80 Other	OTHER
90 Canada	CANADA

Date Placed

On List Enter the date that the applicant was placed on the Waiting List (MM/DD/YY).

COMPLETE FOR REMOVAL

Removal Date Enter the date that the applicant was removed for the Waiting List (MM/DD/YY).

Removal Reason

Select from the drop down list, the reason that most accurately reflects the circumstances leading to the applicant's removal from the Waiting List.

Chemical Dependence (CD) Programs:

Admitted into this program (automatically performed by the system)

Admitted into another program within this provider (i.e., another CD treatment program)

Admitted into another chemical dependence treatment program (in another provider)

Admitted into another type of program (a non-CD program)

Refused treatment

Lost to contact

Other

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Gambling Programs:

Admitted into this program (automatically performed by the system)

Admitted into another program within this provider (i.e., another gambling program)

Admitted into another type of program (a non-gambling program)

Refused treatment

Lost to contact

Other

Admitted into another gambling program (in another provider)

Other