

"Community-based Organization (CBO) Monitoring and Evaluation  
Project of WILLOW (CMEP-WILLOW)"

**Attachment 3**

**Eligibility Screener**

### CMEP-WILLOW Eligibility Screener

This form should be completed by staff (not the client) for each individual enrolled into WILLOW.

<b>1. Recruitment site</b> _____
<b>2. Staff ID</b> _____
<b>3. Today's date:</b> ___/___/____ (MM/DD/YYYY)
<b>4. How old are you?</b> _____ (Client must be at least 18 years old to be eligible for CMEP.)
<b>5. What was your sex at birth?</b> <input type="checkbox"/> Male <input type="checkbox"/> Female
<b>6. What is your gender?</b> <input type="checkbox"/> Male (Not eligible for CMEP) <input type="checkbox"/> Female <input type="checkbox"/> Transgender – Male to Female <input type="checkbox"/> Transgender – Female to Male
<b>7. Have you tested positive for HIV?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No (Not eligible for CMEP)
<b>8. When did you first test positive for HIV?</b> ___/___/____ (MM/DD/YYYY) (Client must have known about her positive HIV status for at least 6 months.)
<b>9. If enrolled (client is eligible AND agrees to participate), enter client ID here:</b> _____

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