

WI BOSCOC Coordinated Entry Waiver Application

This Coordinated Entry Waiver Application is intended for agencies seeking a temporary, emergency exemption to the WI BOSCOC Coordinated Entry policies and procedures in order best serve a client or coalitions efforts to further the mission of ending homelessness.

This form must be filled out completely and submitted to [wiboscoc@gmail.com](mailto:wiboscoc@gmail.com). The WIBOSCOC will provide correspondence to this request within 2 business days of receiving the waiver application. Included in the correspondence will be a guided check list of the requirements needed to receive a Coordinated Entry waiver.

\* Agency requesting waiver: Click or tap here to enter text.

\* Agency contact name: Click or tap here to enter text.

\* Agency contact email address: Click or tap here to enter text.

\* Agency contact phone number: Click or tap here to enter text.

\* Reason for waiver request: Click or tap here to enter text.

Please provide a detailed description of the efforts made by your agency to avoid the need for this waiver: Click or tap here to enter text.

Please provide a detailed description of the efforts made by your agency to work with your coalition to avoid the need for this waiver: Click or tap here to enter text.

\* Signature: Click or tap here to enter text.

\* Date: Click or tap here to enter text.

\* Required