

Forms Tracking Sheet Building Blocks

| #3, 1204 10 th Street SE |
|-------------------------------------|
| High River, AB |
| T1V 2B9 |

Phone: 403.652.5090Fax: 403.601.2389

<u>www.litforlife.com</u>

| Family Last Name: | |
|-------------------|--|
| | |

| Form | Personal Responsible | When | Date Completed | Staff Initials |
|---|----------------------|---|----------------|-------------------|
| Intake Form | Coordinator | At Intake | | |
| Permission for Evaluation (two copies, one stays with family) | Coordinator | At Intake | | |
| Permission for Participation (two copies, one stays with family) | Coordinator | At Intake | | |
| Goal Setting Sheet | Coordinator | At Intake Coordinator will work with family to identify at least one goal to start the program. Goals will change as the family progresses. Expectation is to identify at least one goal under each of main umbrella goals (3) They can set more. Remember to use the concept SMART GOALS – Simple, measurable, attainable, realistic and trackable | | |
| Daily Log/Essential Skills Sheet | Builder | On-going Hard copy form for keeping case notes on family. Reminder to focus on the essential skills | | |
| Goal Setting Sheet | Builder | Throughout the sessions and at follow up. Do the rating at the second last or last visit. Try to have at least one family goal (objective) under each larger goal of the program | | |
| Final Evaluation Form | Builder/Family | Fill out at end of sessions | | |
| Donation Request | Builder | Present to family at last session | | |
| Builder 2 Month Follow Up Tip Sheet | Builder/Family | Fill out at 2 month follow up | | |
| Goal Sheet (2 month follow up section) | Builder/Family | Fill out at 2 month follow up | | |
| Goal Sheet (Builder Self-Evaluation section) | Builder | Fill out at 2 month follow up | | |
| Follow Up Sheet | Coordinator | Fill out at 6 month follow up | | |

Resources given by Coordinator: