

Fortnightly Carer Reporting Form:

Reporting Period Dates

Childs Name:

Carer's Name:

Good News Story: Something special that happened this fortnight

Independent achievement: e.g driving license, employment, holiday, can dress independently, learned to ride a bike etc. showed respect/kindness, helped out around the house.

Health:

Please circle

Doctor appointment:

Yes

No

If Yes:

Name of G.P./Specialist/Address	Date	Time	Reason for visit

Follow up appointment:

Yes

No

Please specify

Appointment made Yes details	Appointment made Not Yet details

Medication required:

Yes

No

If Yes:

Name of medication	Dosage	Times per day <i>e.g. 2 tablets morning/evening</i>

Any other comments on health:

Yes

No

Subject: *e.g. Special dietary requirements/allergies*

Hygiene:

Poor

Good

Excellent

Overall wellness during reporting period:

Poor

Good

Excellent

Access:

Please circle

Attended

Cancellations

Yes

Date	Time	Supervised <i>Please Tick</i>	Unsupervised <i>Please Tick</i>	Place/address <i>If this does not change write once only</i>

If cancellations during reporting period

Date	Reason provided Yes <i>Please Tick</i>	By whom and reason <i>e.g. Child Safety or LWB CM</i>	No <i>Please Tick</i>

If Known Face-to-Face visits by Child Safety officer with Child/Young person

Date occurred

Respite

[illegible]**Relationship with carer/s**

Please circle

Difficult

Good

Excellent

Comments

Education:

Academic achievements	Sporting achievements	Other <i>May include excursions, relationships, school involved community work</i>	Attendance <i>e.g. Poor, good, excellent</i>

Financial:

Has the child/ young person been provided with weekly pocket money?

(Please note a young person receiving youth Allowance is not required to be provided with pocket money)

\$1.00 per year of age

Yes

If No reason being:

Interests/Hobbies

Consent form completed and approved

Yes

No

If yes by whom:

e.g. Parents, CSO

Activity 1.	Times per week

Activity 2.	Times per week

Cultural Support:

Does the child/ren/young person identify as Aboriginal or Torres Strait Islander

Yes

No

If Yes

Have any cultural events/activities been attended?

Yes

No

School	Family	Other

