



DATE _____ INTAKE _____ TRANSFER _____ DISCHARGE _____ UPDATE _____

CHILD'S NAME _____

CERTIFIED FAMILY HOME _____

Shirt Size _____ Dress Size _____ Pant Size _____ Shoe Size _____

ITEM	BASIC MINIMUM REQUIREMENT	# OF WEARABLE ITEMS	PLAN TO GET	COMMENTS
UNDERWEAR	6 SETS			
SOCKS	6 PAIR			
PANTS	2			
SHIRTS	2			
DRESSES				
SWEATER OR LIGHT JACKET	1			
HEAVY COAT OR JACKET	1			
DRESS UP OUTFIT				
SLEEPWEAR	2			
SLIPPERS	1			
SHOES	2			
TOILET ARTICLES: COMB/BRUSH	1			
TOOTHBRUSH	1			
DIAPERS	2 dozen			
BOTTLES	2			
OTHER ITEMS:				

CHILD SIGNATURE _____ DATE _____

CERTIFIED PARENT SIGNATURE _____ DATE _____

AGENCY SOCIAL WORKER _____ DATE _____