

Child Monitoring Form

- 1. Name of the child:
- 2. Child code:
- 3. Is the child present in the program? Yes/No
- 4. Is the child active in the program? Yes/No
- 5. If the child is active, in which way and how often?

Frequency	Once per week	Every two weeks	Once per month	Once every 6 months	Once per year
Activities					
1					
2					
3					
4					
5					

- 6. Is the family active in the program? Yes/No
- 7. If the family is active, in which way and how often?

Frequency	Once per week	Every two weeks	Once per month	Once every 6 months	Once per year
Activities					
1					
2					
3					
4					
5					

- 8. How is the school attendance?
 - A. The child goes to school most of the time
 - B. The child goes to school now and then
 - C. The child is not attending the school at all

- 9. How is the child doing in school?
 - A. The child is doing very well in school
 - B. The child has difficulties with certain topics
 - C. The child has difficulties with most topics
- 10. What is the child's favorite...

Game?			
Topic on school?			
Color?			
Animal?			
Food?			

- 11. Has the child access to any of these child-friendly services (more answers are possible):
 - A. Health and mental services
 - B. Family support
 - C. Social care
 - D. Other, namely...
- 12. What is the health status of the child?
- A. Healthy
- B. Sometimes sick (flu, cold, etc.)
- C. Falls sick on a regular basis
- D. Serious health issues
- E. Is recovering from serious health issues in the past
- 13. Are there any significant changes in the life of the child or family? If yes, please describe them.
- 14. Are there any child protection issues? If yes, please describe them.
- 15. What is the number of home visits in the last 3 months?
- 16. Any additional information?

Visit done by:

Date visit: