

SERVICES REUQUESTED:

Column A: Client requests these services

Column B: Case Manager requests these services

SELF CARE SKILLS		
A	B	
___	___	Hygiene
___	___	Health and Wellness
___	___	Diet and Nutrition
___	___	Laundry and Clothing
___	___	Medication Assistance
___	___	Clean and Sober Living

HOUSING RETENTION SKILLS		
A	B	
___	___	Maintaining Housing
___	___	Housekeeping and Home Maintenance

COMMUNITY LIFE SKILLS		
A	B	
___	___	Social Skills
___	___	Community Mobility
___	___	Recreation and Leisure

AUTONOMY SKILLS		
A	B	
___	___	Linkage to Services
___	___	Budget and Money Management
___	___	Smart Shopping
___	___	Managing Appointments
___	___	Education/Employment

ADDITIONAL INFORMATION THAT WILL ASSIST IN SERVING THIS INDIVIDUAL: