

about me

name:

address:



phone:

email:

I have (tick) completed a budgeting course

completed a parenting course

I am (tick) enrolled with a doctor (who is your doctor?)



enrolled with a dentist (who is your dentist?)

(tick) my dental checks are up to date

my reminders

I need (tick) a drivers licence (what type? driving status? add below)

(e.g. learners, restricted, full, not allowed to drive, I would like a licence)

identification, e.g. birth certificate

an ird number a bank account

my career

I am (tick) still at school, year

studying at correspondence school

(provide details)

in tertiary/training

(provide details)

in work-based learning

(provide details)

looking for/in work

(provide details)

about baby



I have (tick) enrolled baby with a doctor (is this the same doctor as yours?)

a birth certificate for baby

enough clothes for baby

a separate bed for baby

what I've achieved so far



things baby has achieved so far...



baby's next well child check is...

what I want to do next




my personal goals 

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my barriers 

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 my parenting challenges...

my solutions 

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things I need to do 

Empty box for writing tasks.

by date

Date input field.

Empty box for writing tasks.

by date

Date input field.

Empty box for writing tasks.

by date

Date input field.

things my youth coach needs to do 

Empty box for writing tasks for youth coach.

by date

Date input field.

Empty box for writing tasks for youth coach.

by date

Date input field.

Empty box for writing tasks for youth coach.

by date

Date input field.

NOTES

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**SIGN
HERE**



Signature line for young person.

young person

Date line for young person.

date

Signature line for youth coach.

youth coach

Date line for youth coach.

date