

WHEN RESIDENT LEAVES FORM

Date arrived: _____ Name: _____

Date leaving: _____ Shelter: _____

Reason for leaving: _____

Problems while with us: _____

Attitude:	Cooperative	Uncooperative	Rebellious
Spiritual Growth:	Born again	Rededicated life	Water baptism

Additional Notes:

Forwarding Address:

Street: _____

City: _____ Zip: _____ Phone: _____

Check List:

Sheets _____	Mirror _____	Waste basket _____
Blankets _____	Clock _____	Hangers _____
Bedspreads _____	Pictures _____	Blow dryer _____
Pillows _____	Lamp _____	Curling iron _____
Crib linens _____	Clothes hamper _____	File box _____
Towels & washcloths _____	Sheepfold notebook _____	Curtains _____
