Refugee Resettlement Program Assessment

1. Client Information Full Name Date of Birth Date of Arrival Country of Origin Family Members Accompanying 2. Housing & Basic Needs **Current Housing Status** Comments **Unmet Basic Needs** 3. Health & Wellbeing Medical Issues

Mental Health Concerns

4. Education & Employment	
Highest Level of Education	
Highest Level of Education	
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Employment Status	
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Skills/Professional Background	
5. Language & Integration	
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Native Language	
English Proficiency	
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Integration Support Needed	
6. Additional Notes	