

# Refugee Resettlement Follow-Up Visit Form

## Household Information

Date of Visit

Name of Visitor

Case Number

Head of Household

Address

Phone Number

Primary Language Spoken

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## Present Household Members

Name

Age

Relationship

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<input type="text"/>	<input type="text"/>	<input type="text"/>
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## Current Situation

Housing Condition

Employment Status

Children Attending School

Medical or Health Concerns

Community Integration & Support

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## Needs or Issues Identified

## Actions/Referrals

## Additional Comments