Child Protection Follow-Up Assessment Form

General Information

Assessor Name	
Assessment Date	
Child's Name	
Child ID / Case Number	
Date of Birth	
Age	
Gender	
	<u> </u>
Location	
Follow Up Associated	
Follow-Up Assessment Details	
Review of Previous Actions	
Description of Current Situation	

Child's Well-being

Caregiver's Status/Response
Services Received Since Last Assessment
Outstanding Needs
Actions Taken During This Visit
Recommendations / Next Steps
Sign-off
Assessor's Signature
Date