**Support Activities Record Sheet**

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| --- | --- | --- | --- |
| Participant name |  | Shift date |  |
|  |  |  |  |
| Staff name |  | Shift time |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| What occurred on shift today? | | | | | |
| Home-based Supports | | Community and Social Participation Supports | | Capacity Building and Skill Development | |
| Domestic Assistance / Cleaning |  | Social Outing |  | Public Transport Training |  |
| Yard Maintenance |  | Details: | | Independent Living Skills |  |
| Personal Care |  |  | | Cooking Skills |  |
| Cooking |  |  | | Employment/Work Experience |  |
| Play/Respite |  | Attending Appointment/s |  | Attending Community Groups |  |
|  |  | Please provide details below: | | Please provide details below: | |
|  |  |  | |  | |
|  |  |  | |  | |

|  |
| --- |
| Please provide brief comments, concerns or issues |
|  |

|  |  |
| --- | --- |
| Staff signature |  |
|  |  |
| Date complete |  |

Once complete, please return completed form to [admin@allaboutyou.org.au](mailto:admin@allaboutyou.org.au)