

ASPIRANET RESOURCE FAMILY PROGRAM

Child's Name DOB			DOB Home	Home Name			DOP			
П	INFANT TO 2 YEARS	П	3 TO 5 YEARS	<u>Has</u>	CONDITION	<u>Needs</u>		6-12 YEARS	П	13-18 YEARS
_ 2-4	receiving blankets	8	training pants/underwear				1	set of gym clothes	8	underpants/shorts
1	large blanket	4-6	undershirts	1 —			1-2	belts (optional)	5-6	undershirts/bras
3-4 doz.	cloth or disposable diapers	8-10	pants/shorts/skirts (seasonal)				2-4	pajamas/nightgowns/ nightshirts	3-6	pajamas/nightgowns/ nightshirts
8	underwear (if potty trained)	1-2	jacket/coat				4-6	undershirts	10	pants/shorts/skirts (seasona
8	pair of socks	1-2	dress outfits				8	pairs underwear	2-4	dress outfits
8-10	shirts/blouses	1-2	sweater/sweatshirt				8	pair of socks	2-3	sweater/sweatshirt
8-10	pants/shorts/skirts (seasonal)	8-10	shirts/blouses (seasonal)				10	pants/shorts/skirts (seasonal)	1-2	jacket/coat
1-2	dress outfits	3-6	gowns/sleepers/pajamas				10	shirts/blouses	10	shirts/blouses (seasonal)
1-2	sweaters/sweatshirts	1	bathrobe				2-4	dress outfits	1	bathrobe
4-6	undershirts	1-3	pair play shoes				2-3	sweaters/sweatshirts	2-3	pair school/tennis shoes
3-6	blanket sleepers	1	pair dress shoes				1	bathrobe	1	pair dress shoes
8	pair of socks	6-8	pairs of socks				1-3	stockings/tights (if desired)	8	pairs of socks
1	pair booties/play shoes	1	pair of slippers				2	training bras (if applicable)	1	pair of slippers
1	pair dress shoes	1	swimsuit (if applicable)				2-3	pairs play/school shoes	1	swimsuit/trunks (if applicable
8	bibs	1	belt				1	pair dress shoes	2	belt
1	swimsuit	1-2	hats				1-2	jacket/coat	1-2	hats
1-2	hats	1	slip/tie (optional)				1-2	swimsuit/trunks	6	pairs stockings/tights
1-2	buntings/jackets	other					1-2	hats	1	set gym clothes
6-8	water proof pants (optional)	other					1	pair slippers	1	slip/tie (optional)
other		other					1	slip/tie (if desired)	other	
other		other					othe	г	other	
month purch	A minimum of 8 sets of clothes of placement. A full completes ased by the 7 th month in place are clothing needs, list below	ment of ment.	clothing as listed above	must be	the n (EXA date they will be	umber of MPLE: L purchase	items I -2 – sch ed by .	tem is lost, on the "CONDITIO lost, along with a brief explana nool; home visit) he above plan.		
Foster Parent Signature Date Com			 Date Comple	ted	As	Aspiranet Social Worker Signature				Date Reviewed

RF-20LA: 04/01/05 Page 1 of 2

