**Client**

**Client Notes** (e.g., diagnoses, medications, service providers)

Appendix: Templates and Checklists

**Quick Time Tracker**

**Case-File Insert**

**Key Case Information**

Children with Partner B

Children with Partner A

Other Relatives

Parent(s)

Date

Time spent

Work performed

File number

Client’s name

Client’s address

Client’s telephone

Client’s date of birth

Social worker’s name and contact

Guardian ad litem’s name and contact

Hearing date(s)