**Building Full Lives Monthly Service Report**

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| Participant name:  | Reporting month and year: |
| Date initial assessment was completed:  | 6-month review date:  |
| Submitted by: (name, title, agency, contact information) |

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| Summary of member’s schedule and activity for the month:  |

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| Summary of member’s progress toward specific goals:  |
| Goal 1: [Write in member’s goal] |  |
| Goal 2: [Write in member’s goal] |  |
| Goal 3: [Write in member’s goal] |  |

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| Additional information added to the member’s Positive Personal Profile: [Include information about newly developed interests and emerging skills] |

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| Changes and progress with level of independence, meaningful connections, natural supports, and fading paid supports:  |

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| Upcoming changes (if any) to member’s schedule or activities for the next month: (explain reason for change) |