
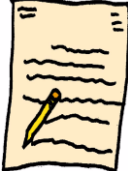


My feelings and wishes sheet



Completed in the presence of: _____(name & role)

Name of child: _____

Age: _____

	Feelings	Wishes
<p>Home</p> 	<p>Always happy <input type="checkbox"/> Usually happy <input type="checkbox"/> Sometimes happy <input type="checkbox"/> Never happy <input type="checkbox"/></p>	
<p>School</p> 	<p>Always happy <input type="checkbox"/> Usually happy <input type="checkbox"/> Sometimes happy <input type="checkbox"/> Never happy <input type="checkbox"/></p>	

Note: the child should complete this form with the assistance of a known & trusted adult if necessary (eg. class teacher). Please record all those present at the time of completing the form. You must explain to the child that this form will be shared with their parents and those at the Family Support meeting. In addition, you must explain that details will be shared with others if you feel there is a risk of harm.

	Feelings	Wishes
<p>Friends</p> 	<p>Always happy <input type="checkbox"/> Usually happy <input type="checkbox"/> Sometimes happy <input type="checkbox"/> Never happy <input type="checkbox"/></p>	
<p>Family Support Process</p> 	<p>Always happy <input type="checkbox"/> Usually happy <input type="checkbox"/> Sometimes happy <input type="checkbox"/> Never happy <input type="checkbox"/></p>	

To be completed after discussion about the Family Support process with young person (with reference to information leaflet).

I understand that my feelings and wishes are a very important part of the Family Support Process and will be shared with my parents/carers and the people at the Family Support meeting. I also know that if the people helping me think I might be in danger, they might need to share this with other people without my permission.

Signature (of child, young person): _____

Name (of child, young person): _____ Date _____