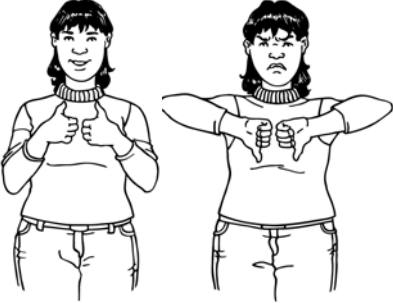





Supervision notes:

Area of work: _____

Date we met: _____



Workers name:	
How we are feeling about work: 	
What have you been doing: 	
What you need to do next: 	

<p>Any other things:</p> 	
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Action Plan:

Things that need to be done	Do by?	Done
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>

Signed by:	
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Supervised by:	
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Next Supervision:	
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