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| **CTI Caseload Review Form** Present: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** Absent: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_ Date of meeting: \_\_\_\_\_ /\_\_\_\_\_ / \_\_\_\_\_**INSTRUCTIONS:1. This form is filled out by the fieldwork coordinator every two weeks during his/her meeting with the CTI-TS workers to quickly go over all the active CTI clients.
2. Before the meeting, the fieldwork coordinator lists all the currently active clients.
3. The coordinator places a **√** mark in the far right column next to each client who has been discussed.
4. If meeting discussion does not cover all active clients, the coordinator may finish collecting information by phone to fill out this form within the two-week period (e.g., if not enough time or a worker couldn’t attend).
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| **Client’s name** | **CTI worker’s name** | Place √ in box after client is discussed |  |
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Case Review form date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| **Client’s name** | **CTI worker’s name** | Place √ in box after client is discussed |  |
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