

Youth's Name:						
HOUSE OF NEW HOPE YOUTH CLOTHING INVENTORY	Date: <input type="checkbox"/> Admission <input type="checkbox"/> Annual <input type="checkbox"/> Other (Enter actual count; use 0 if none)	Rate condition: 0-doesn't fit 1- poor condition 2-fair condition 3-good condition 0 1 2 3	Date: New Items	Date: 6 month or seasonal inventory	Date: <input type="checkbox"/> Annual <input type="checkbox"/> Discharge <input type="checkbox"/> Other (Enter actual Count; use 0 if none)	Rate condition: 0-doesn't fit 1-poor condition 2-fair condition 3- good condition 0 1 2 3
OUTERWEAR						
Jeans/Pants						
T-Shirts/Short Sleeved						
Long Sleeved Shirts						
Dress Slacks						
Dress Shirts						
Dresses						
Skirts						
Shorts						
UNDERWEAR						
Bras						
Panties/Under shorts						
Socks						
Slips						
Pajamas						
Robe/Nightgown						
FOOTWEAR						
Dress Shoes						
Tennis/Athletic						
Slippers						
Boots						
OTHER						
Jacket						
Sweater/Sweatshirt						
Raincoat						
Belt						
Swimsuit						
Child and Foster Parent Date and Initials:						
Clinician Initials:						

