

House Meeting held on _____ (Date)

Leader Name: _____
(Consumer/ Staff Name)

and we started at _____ AM/PM

House Meeting

TOPIC IDEAS

CONFLICT RESOLUTION
Personal Hygiene
BULLYING
Cell phone & Social Media safety
Hygiene
Vacations/ Outings
Grievance complaint process
OTHER

Meal Planning & Healthy eating habits
Hand washing
 Household Skills
 Training
 Rights

CONSUMER SIGN IN

STAFF SIGN IN

Topic Discussion

Topic 1: _____

Explain: _____

Topic 2: _____

Explain: _____

Topic 3: _____

Explain: _____

Topic 4: _____

Explain: _____

How do you feel about your house?

How do you feel about your house mates?

If you could change something, what would it be?

Who will volunteer to lead the next meeting?

(Write Name)

Our House Meeting ended at _____ AM/PM