

**LOVE RESPECT AND CARE**

5907 PENN AVE.  
 PITTSBURGH, PA 15206  
 Phone 412-362-0657 Fax 412-362-1680

Emp. ID #: \_\_\_\_\_

PP: __/__/__ to __/__/__	SUN		MON		TUES		WED		THURS		FRI		SAT	
<b>DATE:</b>														
<b>**The second box is for split shift purposes only**</b> <b>TIME IN:</b>	AM / PM	AM / PM	AM / PM	AM / PM	AM / PM	AM / PM	AM / PM	AM / PM	AM / PM	AM / PM	AM / PM	AM / PM	AM / PM	AM / PM
<b>**The second box is for split shift purposes only**</b> <b>TIME OUT:</b>	AM / PM	AM / PM	AM / PM	AM / PM	AM / PM	AM / PM	AM / PM	AM / PM	AM / PM	AM / PM	AM / PM	AM / PM	AM / PM	AM / PM
<b>TOTAL HOURS:</b>														
<b>TASKS:</b>	<b>Please put an (x) in any box that applies to the tasks that you have performed that day</b>													
BATHING: SHOWER/ BED BATH														
DRESSING														
GROOMING: ELEC. SHAVE or NAIL CARE														
HAIR CARE														
ORAL CARE														
SKIN CARE														
TOILETING/BEDSIDE COMMODE/														
CHANGING CATHETER BAG														
TRANSFERRING														
WALKING/ CLIMBING STAIRS														
MEAL PREP. Or ASST. WITH EATING														
ASSIST WITH MEDICATION														
LAUNDRY														
CHANGE BED LINEN														
DUSTING														
VACUUMING/ SWEEPING														
CLEAN STOVE OR REFRIGERATOR														
DISHES														
ERRANDS/ SHOPPING														
COMPANIONSHIP														

Employee name: \_\_\_\_\_

Consumer Name \_\_\_\_\_

Employee Signature \_\_\_\_\_

Consumer Signature \_\_\_\_\_

Management Approval \_\_\_\_\_

Date: FOR MANAGEMENT ONLY \_\_\_\_\_

**PLEASE USE REVERSE SIDE TO ADD ANY ADDITIONAL COMMENTS/ NOTES**