



Working together to increase the number of CHWs in KY to improve health care access and positive health outcomes for all rural Kentuckians

## FORMS CATALOG

	FORM	TYPE/USE
1	AKHCAN Information Sheet	Informational
2	CHW Open Position Announcement	Template
3	CHW Job Description	Template
4	AKHCAN Training Log for CHWs	Template
5	Initial Referral Form	Template
6	General Consent Form	Template
7	New Client Questionnaire (English)	Data Collection
8	New Client Questionnaire (Spanish)	Data Collection
9	Client Care Plan (English)	Data Collection
10	Client Care Plan (Spanish)	Data Collection
11	Established Client Questionnaire (English)	Data Collection
12	Established Client Questionnaire (Spanish)	Data Collection
13	Quarterly Client Questionnaire (English)	Data Collection
14	Quarterly Client Questionnaire (Spanish)	Data Collection
15	Monthly CHW Practices Log	Data Collection
16	Recommended CHW Charting and Documentation Guidelines	Informational
17	CHW Notes	Template
18	CHW Program Discharge Letter Template	Template
19	CHW Education Record	Template
20	CHW Program Exit Form Template	Template
22	CHW Satisfaction Survey	Data Collection
23	KYACHW Membership application	Informational