様式第2号(第3条関係)

知的障害者更生援護台帳

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | | | | | | | | | | | | | | | | 第　　　　　　号 | | | |
|  | | | | | | | | | | 年　　　月　　　日 | | | | | | | | | |
| 本人 | 氏名(ふりがな)  年　　月　　日生　男・女 | | | | | | | | | | | | | | | | | | |
| 住所 | | | | | | | | | | | | | | | | | | |
| 学歴 | | | | | | | | | | | | | | | | | | |
| 未就学 | | | | | | 学校  年在学中(普・特殊) | | | | | | | 学校  年修了・卒業(普・特殊) | | | | | |
| 原因 | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | |
| 知能 | IQ(SS) | | | 式 | | | 検査年月日 | | | | | 検査機関名 | | | | IQ不明の場合 | | |
| 社会生活能力 | | | | | | | | | | | | | | | | | | |
| 心身の状況 | 視覚障害 | | | | | | | | | 聴覚障害 | | | | | | | | |
| 言語障害 | | | | | | | | | 精神神経疾患 | | | | | | | | |
| 形態異常 | | | | | | | | | 運動障害 | | | | | | | | |
| 性格異常 | | | | | | | | | その他 | | | | | | | | |
| 職業的適性 | | | | | | | | | 就労事業 | | | | | | | | | |
| 現況及び問題点 | | | | | | | | | | | | | | | | | | |
| 家族 | 氏名 | | | 続柄 | | 生年月日 | | | 同居  別居 | | | 職業 | | | 月(年)収 | | | | 参考事項 |
|  | | |  | |  | | |  | | |  | | |  | | | |  |
| 家庭環境 | | | | | | | | | | | | | | | | | | | |
| 家計の状況 | | | | | | | | | | | | | | | | | | | |
| 援護方針 | | | | | | | | | | | | | | | | | | | |
| 指導記録 | | | | | | | | | | | | | | | | | | | |
| 年月日 | | | 訪問・来訪 | | | | 援護内容 | | | | | | | | | | | 担当者名 | |
|  | | |  | | | |  | | | | | | | | | | |  | |