**TOOL 3.2.6** SAMPLE CASE CLOSURE FORM

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| **Reference Code:** | **Caseworker Code:** | **Date of Case Opening**  **(DD/MM/YY):** | **Date of Case Closure**  **(DD/MM/YY):** |
| **CASE CLOSURE** | | | |
| Summarise the reasons why the case is being closed. Comment on the progress make towards goals in the case plan. Where necessary, include provisions for continued services, listing agencies and contact persons.  **Reasons for closure:**  **Services provided and progress towards goals:** | | | |
| CASE CLOSURE CHECKLIST | | | |
| Person has been informed she or he can resume services at anytime:  \_\_\_\_Yes No\_\_\_\_\_(explain why):  (For SGBV and human trafficking cases only) Safety plan has been reviewed and is in place:  \_\_\_\_Yes No\_\_\_\_\_(explain why):  Supervisor has reviewed case closure/exit plan  \_\_\_\_Yes No\_\_\_\_\_(explain why):  Explanation notes:  Caseworker Signature/Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Supervisor Signature/Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | |