**HOME VISITOR LOG**

***REGISTRO DE VISITAS AL DOMICILIO***

[ ]  Community Parenting Alternative*/Alternativa para Padres de Familia en la Comunidad*

 [ ]  Graduated Reentry/*Reingreso Graduado*

Name*/Nombre* DOC number*/Número de DOC* Case manager/Corrections Specialist*/*

 *Administrador de caso/Especialista Correccional*

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FECHA** | **NOMBRE**Apellido, Nombre, Inicial | **RELACIÓN CON USTED** | **FECHA DE NACIMIENTO** | **HORA DE****ENTRADA/****SALIDA** | **NÚMERO DE****CONTACTO** | **Antecedentes penales** |
| Sí | No |
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All visitors must be logged. A visitor is anyone who has not been reported to your case manager/Corrections Specialist as a resident of the home. I verify that this information is true and correct to the best of my knowledge.

*Todos los visitantes deben aparecer en el registro. Un visitante es cualquiera que no haya sido reportado a su administrador de caso/especialista correccional como residente de la casa. Verifico que esta información es verdadera y correcta a mi leal saber y entender.*

Signature*/Firma* Date*/Fecha*

Comments*/Comentarios*:

**The contents of this document may be eligible for public disclosure. Social Security Numbers are considered confidential information and will be redacted in the event of such a request. This form is governed by Executive Order 16-01, RCW 42.56, and RCW 40.14.**

***El contenido de este documento puede ser susceptible de ser divulgado públicamente. Los números de la Seguridad Social se consideran información confidencial y serán redactados en caso de que se solicite. Este formulario se rige por la Orden Ejecutiva 16-01, RCW 42.56, y RCW 40.14***

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