

## HOLIDAY MONITORING FORM

<b>Office use only</b>	<input type="text"/>	<b>Date received</b>	<input type="text"/>
------------------------	----------------------	----------------------	----------------------

Childs full name	<input type="text"/>		
Age	<input type="text"/>	Date of birth	<input type="text"/>

Parent's or Guardian's full name	<input type="text"/>		
Address	<input type="text"/>		
Telephone No. Home	<input type="text"/>	Work	<input type="text"/>
Fax No.	<input type="text"/>	E-mail Address	<input type="text"/>

Childs diagnosis	<input type="text"/>
------------------	----------------------

Details of Immediate Family who also went on the holiday						Self-Funding (SF) Funded by Happy Days (F) <small>Please enter relevant code</small>
Full name	Age	D.O.B.	Relationship to Applicant	Benefits Working/School		
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

**Please attach another sheet if you wish to add some more people**

Please let us know your ethnic origin (tick which applies)

People of Indian Origin	<input type="checkbox"/>	People of African Origin	<input type="checkbox"/>	White	<input type="checkbox"/>
People of Bangladeshi Origin	<input type="checkbox"/>	People of Chinese Origin	<input type="checkbox"/>	Other	<input type="text"/>
People of African Caribbean Origin	<input type="checkbox"/>	Irish Travellers	<input type="checkbox"/>	<small>(please tell us which)</small>	
People of Pakistani Origin	<input type="checkbox"/>	Irish People living outside Northern Ireland	<input type="checkbox"/>		

Destination	<input type="text"/>
Date of Holiday	<input type="text"/>



Please let us know the following by inserting:

**1** Excellent

**2** Very Good

**3** Good

**4** Average

**5** Poor

**6** Very Poor

**A** The Accommodation

**B** Our organisation of your holiday

**C** The Resort

**D** Facilities for disabled

**E** The Activities

**F** Food

Please let us know if you thought some aspects of the trip were particularly good or if certain things could be improved.

Due to your holiday being funded by Happy Days Children's Charity, do you feel that this has alleviated financial concerns with regards to this?

When you were on holiday did you feel that you were able to enjoy yourselves as a family and have some fun together? (Please give us some examples)

Were you able to relax and get some rest on your holiday?

Have you noticed any difference in your child as a result of having this holiday? (Please give us some examples)

**Thank you for completing the monitoring form. We would be very grateful to receive any photos of your holiday and if possible a letter from your child.**

Thank you for taking the time and trouble to complete this form. This assists us in improving our activity.

Signed

Name

Date

