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<th>Future</th>
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**Daily Living**

**Financial Situation**

**Work Education**
### ST VINCENT’S MELBOURNE

**STRENGTHS ASSESSMENT**

**MENTAL HEALTH**

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### Social/Spiritual/Support

### Health

### Leisure/Recreation

### Personal Qualities

**What are my priorities?**

1.
2.
3.

**Start Date:**

**Consumer Signature** _______________________________ **Name:** _______________________________

**Case Manager:**

**Signature:** _______________________________ **Name:** _______________________________ **Designation:** _______________________________

**Review Date:**