Parent Child Communication On SRH

Group and Training Register

Name of Mentor:	·
District:	
Wards Covered:	

Key fo	or the Topics
<u>Unit</u>	<u>Topic</u>
1	Yourself, your family and your culture
2	Human and Sexual Development
3	Relationships
4	Conflicts
5	Talking together

Key

- 1. Group Name: Enter the Group Name
- 2. Village/Location: Enter the name of the village or location
- 3. Ward: Enter the Ward name and number
- 4. First Name and Surname: Enter Name and Surname of Household Member
- 5. HH No.: Enter the household number as recorded in the PCC Household and Members Register
- 6. Date: Enter the dates when the training was conducted
- 7. Indicate with a tick if the participant attended the training session and X if the participant did not attend the training
- 8. IndivSes: Enter the number of individual sessions that were conducted with that participant

Group Name		Village/Location	
Date Formed	dd / mm / yyyy	Ward	

No.	First name and Surname		Unit					
			Date	Date	Date	Date	Date	es
		HH No.	1	2	3	4	5	IndivSes
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