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| --- | --- | --- | --- | --- | --- |
| **Date of meeting:** |  | | | **File number(s):** |  |
| **Client name(s):** | |  | | | |
| **Name of supervisor:** | |  | | | |
| **Students present at the meeting:**  *(if different from the client meeting please note under the responsibility section)* | |  | | | |
| **THE FOLLOWING SHOULD BE ANSWERED BY MEMBERS OF THE SLF COLLECTIVELY** | | | | | |
| **Summary of discussion** | | |  | | |
| **What was agreed in terms of action necessary on each case and who will carry out that action?**  *(if more than one SLF member is undertaking a task this should be clearly stated with a description of how you propose to conduct events)* | | **Case Action Person(s) responsible** | | | |