



Share4Rare

Template

Personal Storytelling

ABOUT ME

Name:

Street, City, State, Zip:

Phone:

Email:

1. Name of agencies your family member works with:
2. The challenges my family member faces:
3. How their supports assist them on a daily/weekly basis:
4. How staff turnover affects my family member and our family unit:
5. How I see staff turnover/staff shortages affecting the employees:
6. Without consistent and quality services his/her life would...



