world relief

Revised 7/10/2024

FY24 Material Needs Support Form

Case Number: _____

1st Residence: Temporary / Permanent (Circle one)		**2nd Residence: Temporary / Permanent (Circle One)**	
Date of move-in: _____		**Date of move-in:** _____	
The following should be provided and/or present upon arrival.	**Circle Yes / No**	**The following should be provided and/or present upon move-in.**	**Circle Yes / No**
Beds (1 per person) appropriate for age and gender (Only married couples or small children of the same gender may be expected to share beds)	Y / N	Beds (1 per person) appropriate for age and gender (Only married couples or small children of the same gender may be expected to share beds)	Y / N
Sheets and blankets – 1 set per bed	Y / N	Sheets and blankets – 1 set per bed	Y / N
Pillow and pillowcase - 1 per person	Y / N	Pillow and pillowcase - 1 per person	Y / N
Personal hygiene items, incl. bath towels (1 per person) and toiletry items	Y / N	Personal hygiene items, incl. bath towels (1 per person) and toiletry items	Y / N
Kitchen items to meet the family's basic needs, including cookware and cooking and eating utensils	Y / N	Kitchen items to meet the family's basic needs, including cookware and cooking and eating utensils	Y / N
Baby items, including diapers, as needed	Y / N N/A	Baby items, including diapers, as needed	Y / N N/A

_____ Adult Member of Refugee Case Signature Date

_____ WR Staff/Volunteer/Co-sponsor (GNT) Signature Date

Interpretation Metod Provided: _____

Name of interpreter: _____

_____ Adult Member of Refugee Case Signature Date

_____ WR Staff/Volunteer/Co-sponsor (GNT) Signature Date

Interpretation Metod Provided: _____

Name of interpreter: _____

The following should be provided and/or present, as needed, w/in 30 days of moving into permanent housing	**Circle Yes / No**	**The following should be provided and/or present, as needed, w/in 30 days of moving into permanent housing**	**Circle Yes / No**
A set of drawers, closet shelves, or other clothing storage	Y / N	A set of drawers, closet shelves, or other clothing storage	Y / N
One kitchen table per family	Y / N	One kitchen table per family	Y / N
One kitchen chair per person	Y / N	One kitchen chair per person	Y / N
One couch, or equivalent seating, per family, in addition to kitchen chairs	Y / N	One couch, or equivalent seating, per family, in addition to kitchen chairs	Y / N
One lamp per room, unless installed lighting is adequate	Y / N	One lamp per room, unless installed lighting is adequate	Y / N
Light bulbs	Y / N	Light bulbs	Y / N
Household cleaning supplies	Y / N	Household cleaning supplies	Y / N

_____ Adult Member of Refugee Case Signature Date

_____ WR Staff/Volunteer/Co-sponsor (GNT) Signature Date

Interpretation Method Provided: _____

Name of interpreter: _____

_____ Adult Member of Refugee Case Signature Date

_____ WR Staff/Volunteer/Co-sponsor (GNT) Signature Date

Interpretation Method Provided: _____

Name of interpreter: _____