

# 特殊需要儿童情况反馈表

## FEED-BACK TABLE OF SPECIAL NEED CHILD

儿童姓名: Child's Name:	性别: Sex:	出生日期: DOB:
收养时健康状况: Health Status of Child When Joining Family: <i>Swedish or English</i>		
医疗康复与抚育计划实施情况: Rehabilitation and Nurture Process: <i>Swedish or English</i>		
目前生长发育情况: Recent Developmental Status: <i>Swedish or English</i>		

组织名称:

填表日期:

FFIA, Family association for intercountry adoption, Sweden

Name of Organization:

Filling Date: