FREE DOWNLOAD

CHECKLIST TEMPLATE

PRINTABLE CAREGIVER DAILY CHECKLIST

CAREGIVER NAME	LOCATION
NAME OF PERSON BEING CARED FOR	DAY/DATE

TASK CATEGORY	TASK DESCRIPTION	✓	NOTES
Personal Care	Bathing/Showering	☐	
	Oral Hygiene	☐	
	Dressing/Grooming	☐	
		☐	
Medication Management	Morning Medications	☐	
	Afternoon Medications	☐	
	Evening Medications	☐	
		☐	
Mobility/Exercise	Morning Walk	☐	