

Name of Facility / Residence			
Location			
Type of housing	<input type="checkbox"/> Continuing Care <input type="checkbox"/> Assisted Living <input type="checkbox"/> Residential Care Home <input type="checkbox"/> Nursing Home	<input type="checkbox"/> Continuing Care <input type="checkbox"/> Assisted Living <input type="checkbox"/> Residential Care Home <input type="checkbox"/> Nursing Home	<input type="checkbox"/> Continuing Care <input type="checkbox"/> Assisted Living <input type="checkbox"/> Residential Care Home <input type="checkbox"/> Nursing Home
Current total occupancy #? Max total occupancy #?			
Type of room available	<input type="checkbox"/> Shared Room <input type="checkbox"/> Shared Bath <input type="checkbox"/> Private Room <input type="checkbox"/> Private Bath	<input type="checkbox"/> Shared Room <input type="checkbox"/> Shared Bath <input type="checkbox"/> Private Room <input type="checkbox"/> Private Bath	<input type="checkbox"/> Shared Room <input type="checkbox"/> Shared Bath <input type="checkbox"/> Private Room <input type="checkbox"/> Private Bath
Is there an entrance fee? Can that be waived?			
Is there a contract? If so, what are the main contract terms?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Terms:	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Terms:	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Terms:
What are the monthly costs?			

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What do the monthly costs not include?			
When and how often would the cost change?			
Is Medicaid (Medical) accepted? If yes, is there a wait time?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is there a RN or CNA licensed staff member? If so, when are they available?	<input type="checkbox"/> RN <input type="checkbox"/> CNA <input type="checkbox"/> On-call <input type="checkbox"/> Part-time <input type="checkbox"/> Full-time	<input type="checkbox"/> RN <input type="checkbox"/> CNA <input type="checkbox"/> On-call <input type="checkbox"/> Part-time <input type="checkbox"/> Full-time	<input type="checkbox"/> RN <input type="checkbox"/> CNA <input type="checkbox"/> On-call <input type="checkbox"/> Part-time <input type="checkbox"/> Full-time
Is a physician available? If so, when are they available?	<input type="checkbox"/> Physician is available <input type="checkbox"/> Physician is not available <input type="checkbox"/> On-call <input type="checkbox"/> Part-time <input type="checkbox"/> Full-time	<input type="checkbox"/> Physician is available <input type="checkbox"/> Physician is not available <input type="checkbox"/> On-call <input type="checkbox"/> Part-time <input type="checkbox"/> Full-time	<input type="checkbox"/> Physician is available <input type="checkbox"/> Physician is not available <input type="checkbox"/> On-call <input type="checkbox"/> Part-time <input type="checkbox"/> Full-time
What social events & activities are available?			

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Is transportation available?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is staff working overnight?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Notes:			

For a comprehensive list of suggested questions to ask, see our [Facility/Residence: Suggested Questions](#).