

## RESIDENCE CLOTHING LIST

Name.....

Date.....

Items in case	Number	Description of items (colour, make, size etc.)
Socks		
Vest/Bras		
Pants/Knickers		
Nightwear		
T.Shirts		
Jumpers / Sweatshirts		
Trousers		
Other		

Items wearing	Description of items (colour, make, size etc.)
Socks	
Vest/Bra	
Pants/Knickers	
T.Shirt	
Jumper/S.Shirt	
Trousers	
Coat	
Shoes	

**ITEMS NOT NAMED WILL BE INITIALLED BY RESIDENCE STAFF**

**Residence staff to complete - Checked IN.....Checked OUT.....**