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| **REVIEW and SIGN** | | | **COMPLETE** | |
| Early Head Start Parent Handbook | | |  | |
| Parent/Guardian Release | | |  | |
| Early Head Start Orientation and Family Partnership Agreement | | |  | |
| Child Information Record (“Initial Date of Admission” is first date of attendance) | | |  | |
| In-kind Tracking (For medical appointments time and mileage, etc.) For required meetings such as family engagements, PTC, and home visits, use the Parent Contacts Tracking Sheet. | | |  | |
| Parent Pick Up Policy and Authorization for Releasing an Enrolled Child to a Minor form (when applicable) | | |  | |
| Participant Enrollment Form (CACFP) | | |  | |
| MDE Parent Release | | |  | |
|  | | | | |
| **SEND HOME with PARENT (review and place in binder for family to keep)** | | | | |
| My Child’s Journey to School Readiness |  | Learning Genie flyer | |  |
| Attendance Poster - Attend Today, Achieve Tomorrow! |  | Policy Council-An Important Role for Head Start Parents | |  |
| School Readiness Begins with Health |  | Policy Council Information | |  |
| When is sick too sick? |  | Family Partnership Agreement Goals w talking points | |  |
| Health Requirement Handout |  | Home Safety Checklist (Possible Support for Goal Setting) | |  |
| Pedestrian Safety |  | Resource Directory | |  |
| Staff and Volunteer Mandated Reporting Policy |  | Parent Handbook | |  |
| What is In Kind? |  | Program calendar | |  |
|  | | | | |
| **DISCUSS** | | | | |
| What is in-kind | | | |  |
| Drop off and pick up procedures | | | |  |
| Family Engagements and Policy Council opportunities (we need one per classroom) | | | |  |
| Learning Genie App | | | |  |

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| **IF NOT IN FILE** |  | **REQUIRED ITEMS TO BE REVIEWED IN EHS PARENT HANDBOOK** | |
| Child’s Health History |  | Program Safety |  |
| Disclosure with Parental Consent |
| **AS NEEDED** |  | Medication Guidance |  |
| Other Parent Contact Information |  | Active Supervision |  |
| Emergency Care Plan and Medication Authorization |  | Guidance Policy |  |
| Special Diet Statement, EHS Parent Request to Provide Food (See nutrition tab in weebly) |  | NMCAA Lockdown/Active Shooter Notification |  |
| Change of Status for any changes |  | Weather Policy |  |
| EHS CB Child Comfort Survey |  | Releasing Children to Authorized and Unauthorized Adults |  |
| Community Resources Directory |  | Volunteer Screening and Supervision Policy |  |
| Family Photo taken |  | NMCAA Health Plan |  |

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| **FOR RETURNING CHILDREN** | |
| Check the Disclosure with Parental Consent expire date and sign new one if expired |  |
| Check the Release of Health expire date and sign new one if expired |  |
| Check the Release of Oral Health expire date and sign new one if expired |  |
| Parent review Child Information Card, add date reviewed and initial. Ensure no sections are left blank. |  |
| Review and Sign new Early Head Start Orientation Training and Family Partnership Agreement |  |
| Complete new Participant Enrollment Form (CACFP) |  |
|  | |
| **FOT/Home Practice Survey/Family Partnership Agreement and Goals** | |
| FOT will be sent to parents through the Learning Genie app and will be due by December 1st. |  |
| Family Goals due December 1 or no more than 3 months after their date of enrollment. |  |