

All About: _____

(Child's first name or nickname)

Child's Full Name: _____ Birthdate: _____

Things My Child Does Well

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What My Child Likes And Dislikes

--

Things I Am Working On With My Child

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My Child Enjoys These Physical Activities

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My Child Has Difficulty With These Activities
My Child Will Need The Following Equipment And/Or Routines
Things My Child Might Need Help With
What Special Adaptations Will The Program Make At This Time (For Use Of The Child Care Facility When Needed)

This information is intended for use by the child care provider, developed in cooperation with the parents. **THIS IS NOT INTENDED TO BE A LEGALLY BINDING CONTRACT.**

Parent/Guardian: _____ Date: _____

Parent/Guardian: _____ Date: _____