





Child File Checklist

WVEIS # \_\_\_\_\_  HS  HS O.I.  PK HS Ranking # \_\_\_\_\_

K Eligible?  Yes  No

Can the child be photographed?  Yes  No

Child's Name \_\_\_\_\_ DOB \_\_\_\_/\_\_\_\_/\_\_\_\_ Age \_\_\_\_\_ Home Language \_\_\_\_\_

Site/Classroom \_\_\_\_\_ Family Advocate \_\_\_\_\_

Teacher \_\_\_\_\_ Assistant Teacher \_\_\_\_\_

Enrollment Date

Screening Timelines (calendar days from enrollment date)

1st day attended \_\_\_\_/\_\_\_\_/\_\_\_\_

30 \_\_\_\_/\_\_\_\_/\_\_\_\_

45 \_\_\_\_/\_\_\_\_/\_\_\_\_

90 \_\_\_\_/\_\_\_\_/\_\_\_\_

New Information for Internal County Transfer: Transfer Date \_\_\_\_/\_\_\_\_/\_\_\_\_ County \_\_\_\_\_ Classroom \_\_\_\_\_
FA \_\_\_\_\_ Teacher \_\_\_\_\_ Asst. Teacher \_\_\_\_\_

EL -- Eligibility Section

- Emergency Release
 (Court Order/FPO, etc.)
 (EHS/HS/PK Drop/Add/Transfer)
 (EHS Transition documents)
 Application/Enrollment documents
 Birth Certificate
 (Social Security Card/Number)
 (Medical Card/Number)
 Income and Eligibility Verification
 Supporting Income Documents
 Selection Criteria
 (Summer Acceptance/Eligibility Letters)
 Parent-Staff Contract
 Internet Safety Permission
 Emergency Relocation
 Pesticide Notification
 (Other documents/Contact Notes, etc.)

FS -- Family Services Section

- Family Demographics
 FS other documents/Contact Notes, etc.
 (Social Services Referral)
 HV Checklists/Documentation
 Family Goal Divider
 Goal Setting and Service Plan
 Goal other documents/Contact Notes, etc.
 Outcomes  1st  2nd

AT -- Attendance Section

- Attendance Referral
 Attendance Plan
 Contact Notes/Logs/Other Notes
 Staff/Parent/Doctor Notes
 Attendance Records
 (Bus Records/Contacts)
 (Other documents/Contact Notes, etc.)

DS -- Disabilities Section

- (IEP Amendment)
 (IEP)
 (IEP Progress Report)
 (IEP Addendum)
 (Evacuation Plans  Bus  Center)
 (Screening/Evaluation copies for IEP)
 (Assessments/Medical Documents)
 (Release of Information)
 (Other documents/Contact Notes, etc.)

CD - Child Development Section

- Home Visit/Parent Conference
 1st HV  2nd HV  1st PC  2nd PC  Other
 Home Visit/Parent Conference Confirmation
 1st HV  2nd HV  1st PC  2nd PC  Other
 School Readiness Individualized Learning Plan
 Initial  1st PC  2nd PC  Final
 ELRS Reports
 Initial  Mid  Final
 Parent Interview
 Initial  Final
 Staffing Focus
 Field Trip Permission
 (Incident Reports)
 (Other documents/Contact Notes, etc.)

End of Year Review:

Teaching Staff \_\_\_\_\_

Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Family Advocate \_\_\_\_\_

Date \_\_\_\_/\_\_\_\_/\_\_\_\_

FA/Health Specialist \_\_\_\_\_

Date \_\_\_\_/\_\_\_\_/\_\_\_\_

CD Manager/Specialist \_\_\_\_\_

Date \_\_\_\_/\_\_\_\_/\_\_\_\_

MH Specialist \_\_\_\_\_

Date \_\_\_\_/\_\_\_\_/\_\_\_\_

### Child File Checklist

Child's Name \_\_\_\_\_ DOB \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Age \_\_\_\_\_

Enrollment Date \_\_\_\_\_

Screening Timelines (calendar days from enrollment date)

1st day attended \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

30 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ 45 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ 90 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

**PH – Physical Section**

- Physical Exam
- (Referral/follow-up)
- Birth History
- (Communicable Conditions Letter)
- Height/Weight Growth Chart  1<sup>st</sup>  2<sup>nd</sup>  3<sup>rd</sup>
- (Individualized Health Plan)
- (Release of Information)
- (Other documents/Contact Notes, etc.)

**MD – Medication Section**

- (Medication Administration Forms)
- (Doctors' notes/scripts/medication info.)
- (Special Dietary Needs Form)
- (Asthma Emergency Plan)
- (Allergy Health Care Plan)
- (Referral/follow-up)
- (Release of Information)
- (Other documents/Contact Notes, etc.)

**MH – Mental Health Section**

- (Mental Health Communication Log)
- (MH Referral)
- (Permission to Observe/Work with Child)
- (Informed Consent)
- (Observation)
- (Child/Family Support Plan)
- (DAP Notes)
- (Treatment Plan)
- (Mental Health Discharge Summary)
- (Release of Information)
- (Other documents/Contact Notes, etc.)

**DN – Dental Section**

- Dental Exam (Oral Health)
- (Dental Follow-up Plans)
- (Referral/follow-up)
- (Release of Information)
- (Other documents/Contact Notes, etc.)

**SC – Screening Section**

- Screening Summary
- Screening Permission Pamphlet
- Vision Screening
- (Vision referral/follow-up)
- Hearing Screening
- (Hearing referral/follow-up)
- Speech Screening
- (Speech referral/follow-up)
- Developmental Screening
- (Developmental referral/follow-up)
- Self Help/Social Emotional Screening
- (SH/SE referral/follow-up)
- Nutritional Screening
- Lead Risk Screening
- (Release of Information)
- (Other documents/Contact Notes, etc.)

**FR – File Review Section**

- (Returning Child File Review forms)
- (File Review)
- (Registration Check Off Sheet)
- (Other documents/Contact Notes, etc.)

**IM – Immunizations Section**

- myHeadStart Immunization report
- Immunization records
- (Referral/follow-up)
- (HCT/HBG)
- (Lead Blood Level Results)
- (TB information)
- (Release of Information)
- (Other documents/Contact Notes, etc.)

**Child File Checklist Instructions:**

1. In the child's file Place page 1 in front of the EL section and page 2 in front of the PH section.
2. Ensure all forms/documents, etc. are completed thoroughly, including using first/last names.
  - a. Use **BLUE INK** only and neat/legible handwriting/signatures.
  - b. Leave nothing blank. Place a single line through field for no information unless noted. **DO NOT** write "None" or "N/A".
3. File paperwork by **MOST RECENT** first and check corresponding box on this checklist. ( ) Items in parenthesis may not be in all files.
  - a. Use dividers to separate program years in **ALL** sections. If document is current, leave in current program year.
4. **Update and review files at minimum every other week** for accuracy and to address any needs.