

Doña Ana County Head Start
Home Visit Form #1



Date _____ Center _____ Location Home Center Other _____

Child's Name _____ Parent/Guardian's Name _____

Goals: Welcome Family to Head Start and establish rapport.

Child's Interests: _____

Child's Strengths: _____

Any Concerns: _____

Shared/Discussed the following:

- Strategies for easing the transition for children into Head Start.
- Programs approach to child development and education (DAP).
- Parents' role as primary educator of their child/children.
- Interest in reviewing and/or providing feedback to weekly lesson plans (location posted)
- Invitation extended to parents to participate in curriculum planning @ monthly parent meetings.
- Home activities identified that support child's development and education.
- Ways to use home materials, family routines, and conversations to help children learn concepts, develop language and other skills: **Ready Rosie**
- Child's behavior at home and school.
- DAP responses utilized in the Head Start classroom, concerning DACHS Guidance/Discipline Policy.
- Effects of attendance on child's school readiness.
- IEP (if applicable) Yes _____ No _____

Parent(s) questions/comments/suggestions:

Follow-up Needed: _____

- Sent Redi-letter to: _____ Date _____

Teacher's Signature

Date

Date entered into ChildPlus

Translator needed and provided.

I understand and agree with the content of this form

Parent / Guardian Signature

Date

Necesito traductor y se le proporcionó.

Yo entiendo y estoy de acuerdo con el contenido de esta forma

Firma del Padre/Guardian

Fecha