CHILD FILE CHECKLIST



Child Information (Emergency Card)

- □ Name, birth date, address, date of admission
- Derents/guardians' names, addresses, and phone numbers
- Derents/guardians' employment contact information
- Emergency contacts
- □ Persons who are authorized to pick up the child (other than the parent)
- D Physician's name and contact information
- Special medical information (if any)
- Days/hours scheduled to attend care

Current physical and immunization record

Parent's Right to Know Form

Parent Permissions

- □ Screen time usage
- □ Sleep on a mat when child is12-18 months able to walk
- Sleep in another area when child is under age two
- □ Transportation
- Routine outing

Medication Log

Accident/Injury reports

□ Infant feeding schedule (provided by parent/guardian)