

HEAD START FORMS REQUEST

*These as well as additional forms available at www.eastmoaa.org

Center: _____

Date: _____

EDUCATION

_____ Weekly Plan

_____ Weekly Reading Homework (also Spanish)

FILES

_____ Blank (Enrollment)

_____ Green (Education)

_____ Parent Handbook

_____ Purple (Disabilities)

GENERAL

_____ Board/Advisory Expense

_____ Change of Status

_____ Check Out Sheet

_____ Eligibility Priority Grid

_____ Enroll Your Child In HS Brochure

_____ Head Start Application

_____ Mileage Sheet

_____ Monthly Calendar

_____ Parent Child Sign In/Out

_____ Purchase Order (not CACFP)

HEALTH AND SAFETY

_____ Accident Report

_____ Child's Physical Form

_____ Emergency Medical Form (Staff/Vol Only)

_____ Fluoride Rinse

_____ Head Lice Letter

_____ Medication Authorization

_____ VASC Audiometry Screening Record

_____ Vision Results

MENTAL HEALTH

_____ Mental Health Screening Follow-Up

NUTRITION

_____ CACFP Purchase Notice

_____ Food Production Worksheet

SOCIAL SERVICES

_____ Consent for Release of Information

_____ Contact Sheet

_____ Group Contact Sheet

_____ Family Contact/Transaction Form

TRAINING

_____ Meeting/Participation/Training Report

TRANSPORTATION

_____ Parent Permission Slip: Field Trip

_____ Parent Permission Slip for Child on Bus

VOLUNTEER

_____ In-Kind

_____ Volunteer Handbook

OTHER FORMS NOT LISTED

Order Filled: ____/____/____ Initials: _____