

**ENROLLMENT CHECKLIST – PART YEAR HEAD START
(New Enrollee)**

CHILD'S NAME: _____ **PROGRAM:** _____

Reach Dane Staff Name: _____ **Today's Date:** _____

RIGHT SIDE	COMMENTS:	Follow Up Date
<input type="checkbox"/> Enrollment Agreement (194.1)		
<input type="checkbox"/> Child Release Authorization (Emergency Card)(208)		
<input type="checkbox"/> Health & Developmental History(2 pages) (161)		
<input type="checkbox"/> Nutrition History Interview(323)		
<input type="checkbox"/> Health Condition Alert Form (102)		
<input type="checkbox"/> Health Risk Ed. Sheet (give to all families) (161A)		
<input type="checkbox"/> Health Risk Questionnaire (122)		
<input type="checkbox"/> Authorization for Release Medical Information (325) (2 of these)		
<input type="checkbox"/> Authorization for Release Lead Info (325a)		
LEFT SIDE		
<input type="checkbox"/> Transportation Policy Parent Agreement (118) <i>Part Year Head Start, GB SP programs only</i>		
<input type="checkbox"/> County Confidential Information Release		
<input type="checkbox"/> Family Profile (211)		
<input type="checkbox"/> Child Profile (2 pages) (154)		
<input type="checkbox"/> Head Start Screenings (give to all families)		
<input type="checkbox"/> Celebration Food Letter (give to all families)		
<input type="checkbox"/> Childcare Checklist (required by licensing) (give to all families, available in English and Spanish)		
<input type="checkbox"/> DPI Statement Letter (Must be given to parent - required by state)		
<input type="checkbox"/> Measles Information Letter		
<input type="checkbox"/> HR Letter		
<input type="checkbox"/> ASQ SE and ASQ 3 <i>Completed by parent. Make sure it is for the correct age!</i>		

Staff completing enrollments should turn in this form with the enrollment paperwork.