

Reach Dane
Head Start

Label Here
 Child's Name _____
 Program _____
 PY _____

**ENROLLMENT CHECKLIST – HEAD START FULL DAY
(ETR Enrollee)**

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

RIGHT SIDE	COMMENTS:	Date Completed
<input type="checkbox"/> Welcome to Head Start Letter		
<input type="checkbox"/> Full Day Enrollment Agreement (194)		
<input type="checkbox"/> Enrollment Agreement-CC Funding and Late Fee Policies (194.5a)		
<input type="checkbox"/> Child Care Contract		
<input type="checkbox"/> CACFP Enrollment Form		
<input type="checkbox"/> Child Release Authorization (<i>Emergency Card</i>) (208)		
<input type="checkbox"/> Health and Development History (2 nd Year) (312)		
<input type="checkbox"/> Health Condition Alert Form (102) <i>Be sure to add telephone number to reach parent/guardian</i>		
<input type="checkbox"/> Health Risk Education Sheet (<i>give to all families</i>) (161A)		
<input type="checkbox"/> Health Risk Questionnaire (122 rev)		
<input type="checkbox"/> Measles Information Letter		
<input type="checkbox"/> Authorization for Release of Medical Information (325) 2 of these		
<input type="checkbox"/> Authorization for Release of Lead Info (325a)		
<input type="checkbox"/> Family Profile (211)		
LEFT SIDE		
<input type="checkbox"/> County Confidential Information Release		
<input type="checkbox"/> Head Start Screenings (<i>give to all families</i>)		
<input type="checkbox"/> Celebration Food Letter (<i>give to all families</i>)		
<input type="checkbox"/> DPI Statement Letter <i>Must be given to parent – required by state</i>		
<input type="checkbox"/> HR Letter		
<input type="checkbox"/> Parent Handbook Orientation		
<input type="checkbox"/> ASQ SE Completed by parent. <i>Make sure it is for the correct age</i>		

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