



KCI Child File Check List

Home Base Program

Codes

- F = Filed the Form
- X = Missing Form
- N = Not Applicable
- O = Over Due
- ✓ = Reviewed Form
- I = Incomplete Form
- P = In Progress or Not Due

FAMILY SERVICES

FCP-600 or FCP-607 Head Start Application																			
Income Documentation																			
FCP-612 Change of Status (If applicable)																			
Custody Orders (If Applicable)																			
E-444 Parent Home Visitor Agreement																			
FCP-615 Strength Form																			
FCP-618 Family Goals and Services Plan Worksheet																			
FCP-617 Activity Service Form																			
Parent Interest Survey																			
E-327 Staffing Reports																			

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EDUCATION

E-400 1st Home Visits									
E-400 1st Parent Conferencs, Dated COR Family Report, & VKRP Reports									
E-400 2nd Home Visit & Dated COR Family Report									
E-400 2nd Parent Conferencs, Dated COR Family Report, & VKRP Reports									
E-427 Transition Plan									
ASQ:SE Questionnaire									
ASQ-3 Questionnaire									
ASQ-3 Developmental Screening Results									
PALS (Children transitioning to Kindergarten)									
PALS Summary Report (If applicable)									
E-422 Home Visit Reports									

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E-422 Home Visit Reports									



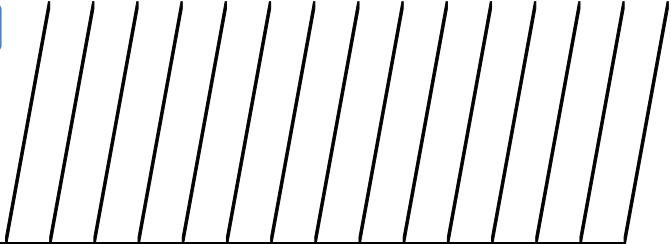
KCI Child File Check List

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E-436

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HEALTH

Physical	[] Hgb	[] Lead																			
Immunization Record (on Physical or Separate- Required)																					
H-314 Health Screenings [] Hearing [] Vision [] Hgb																					
Growth Charts [] 1st. [] 2nd.																					
H-328 Child Nutritional Assessment																					
H-331 Health History																					
H-311 Consents & Permissions																					
H-324 Dental Exam and Treatment Record																					
If Applicable																					
H-323 Consent to Exchange Information																					
H-303 Child Incident Report																					
H-332 Exposure Notice																					
H-302 Special Care Plan Children w/ Asthma																					
H-325 Food Allergy Action Plan																					
H-312 Seizure Care Plan																					
H-300 Authorization to Give Medication																					
H-338 Dietary Action Plan																					
H-306(b) Sign and Symptom Record																					
Follow-Up																					
H-308 Medical/Dental Reminder/Referral																					
Medical Correspondence																					



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DISABILITIES

IEP (If applicable)																			
D-505 IFSP/IEP Activity (If applicable)																			
Sign-In Sheet for providers (Monthly) (If applicable)																			
H-311 Referral to Mental Health Provider (If applicable)																			
Mental Health Treatment Plans (If applicable)																			
D-506 Referral to for Special Education (If applicable)																			

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FAMILY CONTACT

FCP-609 Contact Note or E420 Teacher Contact Notes										
Attendance Letter (If applicable)										
Visit Make-Up Schedule/Plan										
E-480 One Call Now Parent Sign-up Request										

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