

Daily Report

Child: _____ Arrival: _____

Date: _____

Meals

Type	Food	Qty:
Breakfast		None Some Lots
AM Snack		None Some Lots
Lunch		None Some Lots
PM Snack		None Some Lots
Dinner		None Some Lots
Fluids		None Some Lots
Other		None Some Lots

Rest

Start	End
Notes	

Toilet

Time	Type	Dry Wet BM	Notes
	Diaper Potty	Dry Wet BM	
	Diaper Potty	Dry Wet BM	
	Diaper Potty	Dry Wet BM	
	Diaper Potty	Dry Wet BM	

Comments

Learning

- Social
- Emotional
- Physical
- Communication
- _____

Items I Need:

- Diapers
- Wipes
- Cream
- Clothes
- _____