PRESCHOOL DAILY REPORT

NAME: _____   **DATE:**_____

MEALS

TYPE	FOOD	QUANTITY		
AM SNACK		❑NONE	❑SOME	❑LOTS
LUNCH		❑NONE	❑SOME	❑LOTS
PM SNACK		❑NONE	❑SOME	❑LOTS
OTHER		❑NONE	❑SOME	❑LOTS

REST

START	END

NOTES:

COMMENTS

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