

**Migrant Seasonal Head Start Child File Checklist**

Site: \_\_\_\_\_ Room # \_\_\_\_\_ FA Name: \_\_\_\_\_

Last, First Middle Name: \_\_\_\_\_

Enrollment Date (1st day child attended): \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Service timelines: 30 days: \_\_\_\_\_ 60 days: \_\_\_\_\_ 90 days: \_\_\_\_\_

Reviewed by: \_\_\_\_\_ Date(s): \_\_\_\_\_

*Instructions: Determine 45, 60 and 90-day time frames by adding 45, 60 and 90 calendar days to the entry date. Review the child's file with the employee responsible for the file to identify and mark forms in the "complete" column or missing/incomplete forms in the "in-complete" column. Make comments in the "comment" column. Review the file later to verify completion of incomplete forms.*

Archive Key	Item	Form #	Due By	Location	In File	Complete	In-complete
*	1	Family Cover Sheet	Child File 3	1st Day			
*	2	Binder Spine	Child File 6	1st Day			
*	3	File Log In	Child File 7	1st Day			
*	4	Child File Check List MSHS	Child File 8 MSHS	1st Day			
	5	Restraining Orders, Parenting Plans etc.	Court Copy	1st Day			
*	6	Emergency Information Form	Child File 9	1st Day			
*	7	Picture of Parent/Guardian ID	Copy	1st Day			
	8	<b>ENROLLMENT</b>	<b>1st Tab</b>	1st Day			
	9	Enrollment Cover Sheet	Enrollment 35	1st Day			
	10	Enrollment Form Checklist	Enrollment 36	1st Day			
	11	Basic Information Form/Eligibility Comment Sheet	Enrollment 1	1st Day			
	12	Getting to Know My Child	In ChildPlus child profile	1st Day			
	13	ERSEA Checklist	In ChildPlus Enrollment tab	1st Day			
	14	Enrollment Verification Checklist	In ChildPlus Enrollment tab	1st Day			
	15	Birth Certificate (Copy)	Copy	1st Day			
	16	ChildPlus Online Applications (Family Information, Income & Contacts, Applicant & Family Member Information, Applicant Eligibility & Enrollment Information, Eligibility Criteria, and Eligibility Verification)	ChildPlus Application Printout	1st Day			
	17	Income Story	In ChildPlus	1st Day			
	18	Income Cover Sheet in Pink (placed in plastic page protector)	Cover Sheet (Pink)	1st Day			

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	19	Income Calculation Worksheet A/B (Placed in plastic page protector)	Enrollment 8/9	only if used if not enough room in CP				
	20	Proof of income (placed in the plastic page protector)	Enrollment 11	1st Day				
	21	Self-Declaration of family income	In ChildPlus Enrollment tab	Applicabl e				
	22	Statement of no income	In ChildPlus Enrollment tab	Applicabl e				
	23	Migrant/Seasonal Verification	In ChildPlus	1st Day				
	24	Copies to prove migrant move	In ChildPlus under Migrant/Seasonal verification	1st Day				
	25	Over Income Special Needs Referral	In ChildPlus Enrollment tab	1st Day				
	26	Applicant of a Staff Person Referral	In ChildPlus Enrollment tab	1st Day				
*	27	Enrollment Agreement	In ChildPlus Enrollment tab	1st Day				
*	28	Permission Form	In ChildPlus Enrollment tab	1st Day				
*	29	Code of Conduct for Parents and Visitors	In ChildPlus Enrollment tab	1st Day				
	30	<b>FAMILY SUPPORT</b>	<b>2nd Tab</b>	1st Day				
*	31	Family Staff Contact Log Cover Sheet (Pink)	Family Support 13	As Needed				
*	32	Family Staff Contact Log	Family Support 1	Needed				
**	33	Referral Forms Related to Family Support	Child File 16	As Needed				
**	34	Attendance Action Plan	Family Support 8	Upload under Attendance tab in				
**	35	Family Leave Of Absence Agreement	Family Support 10	Upload under Attendance tab in				
	36	Records Request	Family Support 11	Needed				
**	37	Any other correspondance in regards to family support	Copies	As Needed				
	38	<b>CHILD DEVELOPMENT</b>	<b>3rd Tab</b>	1st Day				
*	39	Home Language Survey	In TS Gold					
*	40	VIP Letter	Child Develop. 13	3 days after visit (30 days)				
*	41	ASQ 3 Questionnaire (only the one the parent/adult completes)	In ASQ online	30 Day Timeline				

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	42	Kinder Transition Plan	Child Develop. #9	As needed for kinder children				
	43	Kinder Assessment Form	Child Develop. # 28	AS needed for kinder children				
*	44	TS Gold Report Card	In TS Gold Online	and 3rd Visit				
	45	Individual Child Profile Report	In TS Gold Online	After the last visit or when a child withdraws				
	46	TS Gold Observations (all Checkpoints)	In TS Gold Online					
*	47	Toileting Action Plan	Child Develop. 4	Needed				
*	48	Transition Plan	In ChildPlus	Needed				
*	49	Field Trip Permission Form	In ChildPlus	Needed				
*	50	Child Protection Unit Letter	In ChildPlus	As Needed				
*	51	Infant/Toddler Daily Record Activity	Child Develop. 14	When Child Withdraws or last				
	52	<b>SPECIAL SERVICES</b>	<b>4th Tab</b>	1st Day				
	53	IEP/IFSP	Copy	Applicable	Child Plus			
	54	Evaluations	Copy	Needed	Child			
	55	IEP/IFSP Information-Guidance Sheet	Special Services 13	As Needed	Child Plus			
	56	Intervention Plan	Special Services 14	As Needed	Upload in Child			
**	57	Referral Form	Child File 16	As Needed	Upload in Child			
**	58	Original Speech and Language Checklist Birth-3 En/Sp (Parent and Teacher Checklist)	Special Services 5	As Needed	Upload in Child Plus			
**	59	Original Speech and Language Checklist Preschool (Parent and Teacher Checklist)	Special Services 6	As Needed	Upload in Child Plus			
**	60	Observation Permission Form	Special Services 7	As Needed	Child Plus			
**	61	Staffing Notes	Special Services 8	As Needed	Child Plus			
**	62	Consent to Release or Exchange Information	Child File 15	As Needed	Child Plus			
	63	<b>MENTAL HEALTH</b>	<b>5th Tab</b>	1st Day				
**	64	Referral Form	Child File 16	Needed				
**	65	Referral Packet Checklist	Mental Health 2	Needed				

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**	66	Observation Permission Form	Mental Health 3	Needed				
**	67	Consent to Release or Exchange Information	Child File 15	As Needed				
	68	Plan or Notes	Copies/print out	Needed				
**	69	Infant/Toddler Observation Checklist	Mental Health 9	As Needed				
**	70	Preschool Observation Checklist	Mental Health 10	Needed				
	71	Seedlings Positive Behavior Support Plan	Mental Health 17	As Needed				
*	72	ASQ-SE 2 Screening Questionnaire (only the one the parent/adult completes)	ASQ - SE 2	Within 45 Days				
	73	Staffing Notes	Special Service 8	Needed				
	74	Frequency Chart	Mental Health 11	Needed				
	75	<b>HEALTH/DENTAL/NUTRITION</b>	<b>6th Tab</b>	1st Day				
*	76	Physical Health Status	ChildPlus Event	90 Day Timeline	ChildPlus			
	77	Dental Health Status	ChildPlus Event	91 Day Timeline	ChildPlus			
*	78	Health History	ChildPlus Event	1st Day	ChildPlus			
*	79	Nutrition Assessment For Preschool	ChildPlus Event	1st Day	ChildPlus			
	80	Nutrition Assessment For Infant	ChildPlus Event	1st day	ChildPlus			
***	81	Certificate of Immunization Status (CIS) Signed by HNCS	Print out	1st Day	ChildPlus			
*	82	Other Immunization Information	Print out or Copy	Needed	ChildPlus			
*	83	Notice of Child's Conditional Immunization Status	Print out	As Needed	ChildPlus			
*	84	Notice of Exclusion for Immunization Non-compliance	Print out	As Needed	ChildPlus			
	85	Certificate of exemption	Print Out	Needed	ChildPlus			
*	86	Letter to Parent Immunizations Needed	HDN 34	As Needed	ChildPlus			
***	87	Well Child Exam (Most recent first)	Copy	90 Day Timeline	ChildPlus			
**	88	Follow-up documentation regarding Medical	Copy	As Needed	ChildPlus			
***	89	Dental Exam (Most recent first)	Copy	90 Day Timeline	ChildPlus			
*	90	3rd party permission form	Copy	Needed	ChildPlus			
*	91	3rd party results	Copy	Needed	ChildPlus			
**	92	Follow-up documentation regarding Dental	Copy	As Needed	ChildPlus			
*	93	Vision Documentation/Results	Copy	30 Day Timeline	ChildPlus			

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*	94	Vision Screening Birth to Three	HDN 25, If used	30 Day Timeline	ChildPlus			
*	95	Hearing Documentation/Results	Copy, if used	30 Day Timeline	ChildPlus			
*	96	Hearing Screening Birth to Three	HDN 26, If used	30 Day Timeline	ChildPlus			
*	97	Parent Request to Provider Capillary Finger Stick Lead Screening/Test	HDN 38	As Needed	ChildPlus			
*	98	Lead Documentation/Results (Most recent first)	Copy	As Received	ChildPlus			
*	99	Parent Notification of Lead Screening Results	HDN 31	As Needed	ChildPlus			
	100	Iron Screening Documentation	Copy	Received	ChildPlus			
*	101	Follow-up documentation regarding Health Screenings	Copy	As Needed	ChildPlus			
	102	USDA/CACFP Cover Sheet (on pink paper)	Cover Sheet (Pink)	1st Day	Child File			
*	103	Food Substitution Letter to Provider	Health Nutrition #4 Diet Order	Applicable	Child File			
*	104	Request for Special Dietary Accommodations	OSPI CNS October 2017	Applicable	Child File			
*	105	Copy of Infant Meal Form (Original in USDA binder)	OSPI CNS August 2017	Applicable	Child File			
*	106	Copy Request for Fluid Milk Substitution - Child Care (Original in USDA Binder)	OSPI CNS August 2016	1st Day, If Applicable	Child File			
*	107	Health Care Plan Generic	HDN 14	Applicable	ChildPlus			
*	108	Health Care Plan Asthma	HDN 15	Applicable	ChildPlus			
*	109	Health Care Plan Severe Allergy	HDN 16	Applicable	ChildPlus			
*	110	Health Care Plan Seizure	HDN 17	Applicable	ChildPlus			
*	111	Medical Alert History Seizure	HDN 41	Applicable	ChildPlus			
	112	Medical Alert	HDN 42	Applicable	ChildPlus			
**	113	Referrals for Growth Assessment	Child File 16	Needed	ChildPlus			
**	114	Referral for Hearing	Child File 16	Needed	ChildPlus			
**	115	Referral for Vision	Child File 16	Needed	ChildPlus			
**	116	Referral for Dental	Child File 16	Needed	ChildPlus			
**	117	Referral for Physical	Child File 16	Needed	ChildPlus			
**	118	Referral for Lead	Child File 16	Needed	ChildPlus			
**	119	Referral to Health Care Provider	HDN 7	Needed	ChildPlus			

*	120	Medication Consent and Chart	HDN 10	Applicable	ChildPlus			
**	121	Medication Log	HDN 11	Applicable	ChildPlus			
	122	Accident/Injury Report		Needed	ChildPlus			
**	123	Consent to Release or Exchange Information For any Health/Nutrition	Child File 15	As Needed	ChildPlus			
***	124	Health Letters and Education	Copy	As Needed	ChildPlus			
***	125	Other health information (ex: covid test results)	Copy	As Needed	ChildPlus			
**	126	Dr's notes, Return to school, other diagnosis letters (including COVID-19 test results)	Copy	As Needed	ChildPlus			
	127	<b>Transportation</b>	<b>7th Tab</b>	1st Day				
*	128	Transportation Procedures for Parents	Transportation 1	Applicable				
**	129	Child Returned to School Report (1,2,3,4)	Transportation 2	As Needed				
**	130	Final 3rd Return Transportation Letter	Transportation 3	As Needed				

<b>Archiving Key</b>	
No * means do not archive, leave original in the file.	
* means archive and obtain a new/updated one.	
** means archive only if you are completely done with the item, including there is an outcome. For example if you have a referral for vision and the family is still pending a visit with the eye doctor, you would not archive. But you can archive if the family already went to the eye doctor and has the results in the file.	
*** means archive everything but the most recent one. For example if the family has more than one family goal, keep the most recent one in the file and archive all the other ones.	

<b>Comments</b>	