



# FAMILY CHILD CARE HOME CHECKLIST FOR CHILD RECORDS

Child Name	Enrollment Form	Emergency Medical Permission	Authorized Released Permission	Transport Permission	Health Record Expiration Date <small>0-5 yrs: Annually School Age: as required by local authorities</small>	Immuniz. <small>Per DPH immuniz. schedule</small>	Flu Shot <small>Annually: 6 - 49 months Btw. 8/1 -12/31</small>	Incident Log	Individual Care Plan <small>(as applicable)</small>	Medication Auth. Form <small>Exp. Date as applicable</small>

SAMPLE