

CHILD RECORD CHECKLIST – CHILD CARE CENTERS  
CONFIDENTIAL – DO NOT POST

**Use of form:** Use of this form is voluntary. However, use as a review document by child care centers will help ensure compliance with DCF 250.04(6)(a) and DCF 251.04(6)(a). Licensing Specialists may also use this form during monitoring visits to document compliance with these rules. Personal information you provide may be used for secondary purposes [Privacy Law, s.15.04(1)(m), Wisconsin Statutes].

**Instructions:** A check mark indicates the required information is in the child's file. First day of attendance, birthdate, and physical exam date must be entered. If additional space is needed, attach a separate sheet. Family Child Care Centers must use the department-provided forms *Child Care Enrollment* and *Intake for Child Under 2 Years*.

Name – Child Care Center

Address – (Street, City, Zip Code)

Facility ID Number

Grand Central Kids Station LLC 402 Spring Street, Fox Lake 53933 1009571

Enrollment Information

Parental Authorizations

Health

Under 2 Intake

| Name – Child       | Birthdate<br>(mm/dd/yyyy) | Date – First day<br>of attendance<br>(mm/dd/yyyy) | Parent / guardian contact information | Child home address and telephone | Persons authorized to call for / receive child | Emergency contact information | Physician / medical facility | Emergency medical care / treatment | Field trip / other off-site activity participation / transportation | Acknowledgement of the presence of pets or animals | Center-provided transportation to and from the center | Alternate arrival / release agreement | Health History and Emergency Care Plan | Immunization history | Date – Child Health Report | Initial (Family Child Care Centers must use department form) | 3-month updates (Group Child Care Centers only) |
|--------------------|---------------------------|---|---------------------------------------|----------------------------------|--|-------------------------------|------------------------------|------------------------------------|---|--|---|---------------------------------------|--|----------------------|----------------------------|--|---|
| 1. JOYCE Adelmeyer | 02/05/2020                | 2/10/2020   | ✓                                     | ✓                                | ✓  | ✓                             | ✓                            | ✓                                  | ✓   | NA   | ✓   |                                       | ✓                                      | ✓                    | 2/08/2020                  |  |   |
| 2. LOUIS Adelmeyer | 06/09/2020                | 2/06/2020   | ✓                                     | ✓                                | ✓  | ✓                             | ✓                            | ✓                                  | ✓   | NA   | ✓   |                                       | ✓                                      | ✓                    | 8/28/2020                  |  |   |
| 3.                 |                           |   |                                       |                                  |  |                               |                              |                                    |   |  |   |                                       |  |                      |                            |  |   |
| 4.                 |                           |   |                                       |                                  |  |                               |                              |                                    |   |  |   |                                       |  |                      |                            |  |   |
| 5.                 |                           |   |                                       |                                  |  |                               |                              |                                    |   |  |   |                                       |  |                      |                            |  |   |
| 6.                 |                           |   |                                       |                                  |  |                               |                              |                                    |   |  |   |                                       |  |                      |                            |  |   |
| 7.                 |                           |   |                                       |                                  |  |                               |                              |                                    |   |  |   |                                       |  |                      |                            |  |   |
| 8.                 |                           |   |                                       |                                  |  |                               |                              |                                    |   |  |   |                                       |  |                      |                            |  |   |
| 9.                 |                           |   |                                       |                                  |  |                               |                              |                                    |   |  |   |                                       |  |                      |                            |  |   |
| 10.                |                           |   |                                       |                                  |  |                               |                              |                                    |   |  |   |                                       |  |                      |                            |  |   |

SIGNATURE – Person Completing Form

Vernice Schubert

Date Signed

7/20/2023