**DEPARTMENT OF CHILDREN AND FAMILIES**
Division of Early Care and Education

dcf.wisconsin.gov

# CHILD RECORD CHECKLIST – CHILD CARE CENTERS

**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 |
|---|---|---|
| Jesus Lambs of Grace | | 1014550 |

| | | | Enrollment Information | | | | | Parental Authorizations | | | | | Health | | | Under 2 Intake | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Name – Child | Birthdate (mm/dd/yyyy) | Date – First day of attendance (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 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. Mila Stuckmann | 8/13/20 | 9/6/23 | OK | OK | | | | → | OK | | | | OK | OK | 8/14/23 | | |
| 2. Wyatt Rohde | 4/5/19 | 9/6/23 | OK | OK | | | | → | OK | | | | OK | OK | 4/8/22 | | |
| 3. Griffin Richards | 6/18/20 | 9/6/23 | OK | OK | | | | → | OK | | | | OK | OK | 6/20/23 | | |
| 4. Kara Bryant | 9/3/19 | 9/6/23 | OK | OK | | | | → | OK | | | | OK | OK | 12/14/22 | | |
| 5. Aryah Ewers | 10/8/19 | 9/6/23 | OK | OK | | | | → | OK | | | | OK | OK | 10/12/22 | | |
| 6. Kailey Frema | 10/19/18 | 9/7/21 | OK | OK | | | | → | OK | | | | OK | OK | 11/11/22 | | |
| 7. | | | | | | | | | | | | | | | | | |
| 8. | | | | | | | | | | | | | | | | | |
| 9. | | | | | | | | | | | | | | | | | |
| 10. | | | | | | | | | | | | | | | | | |

**SIGNATURE** – Person Completing Form

Date Signed 2/12/2024

DCF-F-CFS1675 (R. 12/2012)