

Child Daily Schedule

*This is to be used as a guide and NOT to replace following each child's individual cues for what they need. To be updated every 3 months.

*Children go outside 2 times daily, once in the morning, and once in the afternoon, weather permitting.

Child's Name: _____ Date: _____

Updates (date & initial): _____

Feeding and Activities

Foods to Avoid: _____

If applicable, how do you plan to introduce solid foods:

What type of activities does your child enjoy:

Typical Sleeping Routine:

When my child is tired, he/she will usually let you know by: _____

Sleeping Tips: _____

Other Information: _____

Parent Signature: _____ Teacher Signature: _____