



EHS TRANSITION RECAP MEETING

Child:

Date:

CFS:

Teacher/FES:

Site:

<u>COMMENTS</u>	
<p><u>1. FAMILY WELL-BEING</u></p> <ul style="list-style-type: none"> - Needs Assessment - FOT - Strengths - Concerns - Family Culture - Goals - Needs Identified 	
<p><u>2. HEALTH REQUIREMENTS</u></p> <ul style="list-style-type: none"> -Physical -Height & Weight (BMI) -Immunizations -Dental -Stengths/Concerns 	
<p><u>3. CHILD DEVELOPMENT</u></p> <ul style="list-style-type: none"> - GOLD Individual Profile Report -Strengths/Concerns -eDECA -Latest ASQ (optional) 	

4. <u>IFSP</u> - Most recent IFSP/IEP/ISP evaluation or review if applicable	
5. <u>OTHER</u> -Involvement with other programs or agencies -Important events	
6. <u>STAFF FOLLOW UP</u>	

The below forms can be found on Child Plus, Teaching Strategies Gold, DECA or Learning Genie

- Needs Assessment & Home practices
- Copy of 36 month or most recent physical
- IFSP/IEP/ISP *(if applicable)*
- Transition Activities Log
- Latest GOLD Individual Profile Report
- Getting to Know Your Child and Family
- eDECA and ASQ (optional)