Willow Bend Learning Center

Ph: 972-867-1871; Fax: 972-964-7097; E-mail: willowbendlc@aol.com; www.willowbendlearningcenter.com

INFANTS DAILY REPORT

Stage 2 Meals:

For Babies on Formula/Breast Milk AND Baby Foods/Cereals

Child's Name: _____

Date:

Arrival Information: To be filled in by Parents			
Arrival Time:: Last Diaper Change:: Last Feeding::			
Last Nap:: How did your baby sleep last night?			
How can we reach you today? 🛛 Work 🔅 Home 🖓 Other			
Any Medication to be dispensed today? () Yes () No (Pl record medications at Front Desk)			
Any bumps, injuries, symptoms or illness?			

Feeding Times	Diaper Changing Times
Estimated Actual Time Time Type Amount Initials Breakfast (7:45 am - 8:45 am) :: :: Lunch (11:00 am - 11:45 am) ::	Time Initial Time Initials 7: 1: 8: 2: 9: 3: 10: 4: 11: 5: 12: 6:
: PM Snack (2:30 pm - 3:15 pm) :	My clothes were changed today because:

Nap Times	My mood today was:	Items Needed:
Start:: Finish::	Нарру	(on Monday)
Start:: Finish::	Quiet	<u>28</u> Diapers
Start:: Finish::	Content	<u>80</u> Wipes
Start:: Finish::	Active	Ointment
	Tired	Extra Clothing

* If your child is hungry, sleeping, or waiting their turn, the feeding time may be adjusted +25 minutes. * *Milk/Formula will be given after solids.

Activities and/or Special Notes:

Parents: Please make copies of this form, and bring in daily. The top portion needs to be filled out at home, and handed to the teacher daily. This form can be downloaded at: www.willowbendlearningcenter.com>Parent Forum>Forms>Infant B Daily Report

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