

Shasta Head Start Child Development, Inc. Parent / Child Home Activity Record

Child's Name: _____ **Site:** _____ **Mo/Yr:** _____

Check off the time spent on an activity you completed using the Parent-Child Activity sheet, or on any additional special activities you did with your child. We are unable to count daily care giving tasks.

ACTIVITY	SUN			MON			TUES			WED			THUR			FRI			SAT		
	15	30	60	15	30	60	15	30	60	15	30	60	15	30	60	15	30	60	15	30	60
FLD- Foundational and Language Development																					
Reading																					
Story Telling																					
Visit Library																					
Writing																					
M - Math and SCI - Science																					
Counting																					
Shapes																					
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Problem Solving																					
PD – Physical Development and HLTH - Health																					
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Small Motor (cut paper,write,color)																					
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Child Goals																					
Child Observation																					
Total																					

In order for teachers to truly understand your child's strengths, interests, and goal areas, it is helpful for parents to write observations of their child participating in suggested activities. See the reverse side. Thank you for your help!

Parent Signature: _____ **Date:** _____

Shasta Head Start Staff Purposes Only

Grand Total Hours

(Total minutes ÷ 60) Staff's Signature:

Parent Observations

Please choose an activity and write an observation about your child on the lines below. Avoid using words that give your opinion, (She was "happy." He "wanted" the toy). Instead use words that describe the facts of what your child is doing or saying, (She smiled. He picked up the toy). Remember to write your child's name and the date on the observation. Turn in completed observations along with your parent/child activity records to your child's teacher.

Sample: 09.17.26 - "Today when I picked up Jasmine at school, she ran to greet me with a smile on her face."

Observation: _____

Parent /Child Activities

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
<p>Take your parent to a nearby park to play. PD</p> <p>Take a bubble bath. What do bubbles feel like? Make pictures in the bubbles. HLTH</p> <p>Visit the library and check out books. FLD</p>	<p>Practice crossing the street you're your parent. HLTH</p> <p>Look through family pictures and talk about what you see. SED</p> <p>Ask your parent what a pair of something is. Have them show you five pairs. M</p>	<p>Make wet footprints on the sidewalk. PD</p> <p>Look through magazines and cut out pictures of families. Talk about how they are different and the same as yours. SED</p> <p>Ask your parent to read a book with you. FLD</p>	<p>Pretend to be a duck and waddle around. Ask someone to follow you. PD</p> <p>Visit a relative or call one on the phone. SED</p> <p>Teach your parent a song you learned at school. ATL</p>	<p>Act out Little Miss Muffet. ATL</p> <p>Look at pictures of your family and talk about the events shown. SED</p> <p>Make a writing box for practicing. Add paper, pencils, old cards, junk mail, etc. FLD</p>

Ask a parent to read your Raising a Reader book to you.

Week 1

**Shasta Head Start Child Development, Inc.
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Shasta Head Start Staff Purposes Only

Grand Total Hours

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Observation: _____

Parent /Child Activities

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
Take a pretend magic carpet ride. What do you see? FLD Help your parent do the dishes. HLTH	Pretend to be a large caterpillar walking on the floor. ATL Help your parent sort the laundry. Talk about the color of the clothes. M	Show your parent all the ways you can play with a ball. PD Find a picture of an animal that you don’t know. Ask someone questions to problem solve , where does it live and what does it eat? SCI	Throw or kick a ball across a masking tape line. PD Have your parent read you a book. FLD	Play “Hot Potato” SED Have your parent slice an onion. Take the rings apart. Use your senses to tell how it feels, smells, tastes? What favorite foods have onion in them? SCI
Take a bath and play with measuring cups. M	Ask your parent to tell you a story. FLD	When helping cook dinner, look at the food labels for letters . FLD	Use chalk to make a hopscotch. Have your parent number it. M	Go for a walk . Can you read any signs? PD

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Parent /Child Activities

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In your neighborhood, pick up five pieces of trash and throw them in a trash can. SED	Paint your house using a bucket of water and a paint brush. PD	Practice buckling your seatbelt with your parent. HLTH	Practice running in place, then put your hand on your heart and feel. PD	Use a broom handle to play limbo. SED
Paint on newspaper with watercolors or food coloring. ATL	Finger paint with shaving cream and paper. ATL	At dark, go outside and sing , “Twinkle, Twinkle, Little Star” with your parent. FLD	Name things that are hot and cold . COG-S	With your parent, practice two ways of getting out of your house in case of fire. HLTH
Have your parent print your first name for you. FLD	Using paper and crayons, practice writing . FLD	Ask your parent to read you a bedtime story, talk about how the characters are feeling . SED	Count the number of eyes in your house. M	Find circles in your kitchen. M

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Observation: _____

Parent /Child Activities

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
Take a short jog with your parents. PD	Rake a big pile of leaves and jump in them. Rake them again and do it over and over. PD	Draw a picture for your parent. ATL	Collect 10 rocks; use them for adding and subtracting . M	Pretend to be a scarecrow moving your arms and legs stiffly as they “blow in the wind.” PD
Go on a circle hunt around the house. Now spin yourself in a circle. M	Play “I Spy” with your parent. SED	Practice how to safely walk across a parking lot. HLTH	Ask your parent to teach you one of their favorite songs from their childhood. FLD	Taste a lemon and a cracker. Which tastes sour? SCI
Visit the library and check out books . FLD	Read a book with someone in your family. FLD	Use forks and spoons to make a pattern . Fork, spoon, fork, spoon. M	Find circles in your living room, draw and color them in. ATL	Have your parent print your name five times and put it around your room. FLD

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Week 4

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Observation: _____

Parent /Child Activities

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
<p>Walk around the house on your knees. PD</p>	<p>Create family rules and write them on paper. HLTH</p>	<p>With your parent, search the neighborhood for the largest and smallest car. M</p>	<p>Sit on the floor and roll a ball back and forth with your parent. PD</p>	<p>Pretend to be popcorn popping in a pan. PD</p>
<p>Make chalk out of Plaster of Paris and water in paper cups. ATL</p>	<p>Start a new family tradition, such as a monthly special breakfast. SED</p>	<p>Make binoculars out of paper towel rolls. What do you see? ATL</p>	<p>Take an ice cube and sprinkle salt on it. Watch and see what happens? SCI</p>	<p>Put a sock on your hand to make a puppet and perform a puppet show for your family. ATL</p>
<p>Make a book about an animal you like. FLD</p>	<p>Make a pattern using leaves and rocks. Leaf, rock, leaf, rock. M</p>	<p>Ask your parent to read you a short magazine article. FLD</p>	<p>Find out the first letter of your name. Have someone ask you later what it is. FLD</p>	<p>While driving in a car, look for your favorite restaurant. SED</p>

Ask a parent to read your Raising a Reader book to you.

Week 5

Shasta Head Start Child Development, Inc. Parent / Child Home Activity Record

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Grand Total Hours

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Observation: _____

Parent /Child Activities

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
<p>Take a nature walk. Search for brown seeds, twigs and other nature items to glue on a square piece of cardboard. PD</p> <p>Tell your parent what you want to be when you grow up. What does this person do? SED</p> <p>Ask your parent to show you how to write the first letter in your name. FLD</p>	<p>Turn on the radio and dance with your parent. ATL</p> <p>Cut out pictures from a grocery sales add and glue to family shopping list. PD</p> <p>Count the number of door knobs in your house. M</p>	<p>With your parent make feelings faces try happy, sad, mad and surprised. SED</p> <p>Ask your parent to eat dinner on a blanket and help make dinner to eat picnic style. HLTH</p> <p>Read a book to yourself by looking at the pictures. FLD</p>	<p>Crawl backward like a scorpion. PD</p> <p>Ask your parent why we wear seatbelts in the car. HLTH</p> <p>In your room, go on a square hunt. M</p>	<p>Spin like a top. PD</p> <p>Ask your parents what seeing-eye dogs do. SED</p> <p>Using a plate, put sand, flour or salt. Use your fingers to write. FLD</p>

Ask a parent to read your Raising a Reader book to you.

Week 6

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Parent /Child Activities

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<p>Act like a sleepy or mad cat; tell why you are sleepy or mad. SED</p>	<p>Do stretching exercises with your parent. PD</p>	<p>Hop around the house like a hare and crawl around the house like a tortoise. PD</p>	<p>Play a problem solving game by saying, “what would you do if”? <i>ex: If you got lost in the store, what would you do?</i> ATL</p>	<p>Hook onto your partner or friend and chug around the house like a train. PD</p>
<p>Have someone help you go through your spices in the kitchen. Talk about how they smell and taste. SCI</p>	<p>Practice counting with ice cubes on a plate. M</p>	<p>With a parent make up a song about vegetables. ATL</p>	<p>Have your parent hide something in a pillowcase and try to figure out what it is by feeling it through the pillowcase. SCI</p>	<p>Add a scent to homemade dough by using lemon, vanilla or peppermint extract. SCI</p>
<p>Go to the library and check out books FLD</p>	<p>Have your parent tell you a childhood story. FLD</p>	<p>With your parent, look for squares around your house. M</p>	<p>Write out the name of your family member and clap out the syllables. FLD</p>	<p>Dance to a fast song, dance to a slow song. ATL</p>

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Lie on your back and pretend to pedal a bicycle. PD	Look around your house for things that are shaped like circles. Trace them onto a piece of paper. PD	<i>Pick a new food</i> from the grocery store. HLTH	Create a new game by walking around a big circle. Every time the lights go off, change direction. SED	Clean up five items off your bedroom floor. SED
Color fast, color slow. ATL	Have your parent tell you the story about the Tortoise and the Hare or another animal story. FLD	Make crowns and decorate them. ATL	Punch holes around the edge of a paper plate or an old card. Use string or yarn to sew the card. PD	Record a video for someone special. Send it to them. FLD
Complete a puzzle with your parent. ATL	Ask your parent to read you a book about feelings. SED	Sort the silverware after it is washed. M	Look for triangles in your house. M	Clap your name with your parent. FLD

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PD - Physical Development and HLTH - Health																					
Large Motor (jump,hop,run)																					
Small Motor (cut paper,write,color)																					
Cooking																					
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Feelings																					
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ATL-Approaches to Learning Including Creative Art																					
Color, Paint,																					
Music, Dance, Drama																					
Additional Activities																					
Book Bags																					
Child Goals																					
Child Observation																					
Total																					

In order for teachers to truly understand your child's strengths, interests, and goal areas, it is helpful for parents to write observations of their child participating in suggested activities and turn those observations in to the child's teacher. Thank you for your help!

Parent Signature: _____ **Date:** _____

Shasta Head Start Staff Purposes Only

Grand Total Hours

(Total minutes ÷ 60) Staff's Signature:

Date

Parent Observations

Please choose an activity and write an observation about your child on the lines below. Avoid using words that give your opinion, (She was “happy.” He “wanted” the toy). Instead use words that describe the facts of what your child is doing or saying, (She smiled. He picked up the toy). Remember to write your child’s name and the date on the observation. Turn in completed observations along with your parent/child activity records to your child’s teacher.

Sample: 09.17.26 - “Today when I picked up Jasmine at school, she ran to greet me with a smile on her face.”

Observation: _____

Parent /Child Activities

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
Jump for joy today, tell what makes you joyous . SED	Use a sock ball to throw at a can. HLTH	Have your parent create an obstacle course for you to go through. PD	Have your parent beat out drum rhythms on an oatmeal container or a coffee can and dance . ATL	Recite “Jack Be Nimble” and jump over an unlit candle. FLD
Look at a rhyming book with someone. FLD	Give hugs whenever someone says “please” or “thank you.” SED	Hang a piece of paper on the wall and make an art mural . ATL	Make a cheery card and mail it to someone that you love. FLD	Ask your parent to tell you what makes them proud of you. Tell your parent why you are proud of them. SED
Have your parents cut the front of a food box in six pieces to make you a puzzle . M	Use paper and pencil or crayon to write your name. FLD	Ask someone to tell you a story . FLD	Sing “Twinkle, twinkle little star” while washing your hands. HLTH	Count the letters in your name. M

Ask a parent to read your Raising a Reader book to you.

Shasta Head Start Child Development, Inc. Parent / Child Home Activity Record

Child's Name: _____ **Site:** _____ **Mo/Yr:** _____

Check off the time spent on an activity you completed using the Parent-Child Activity sheet, or on any additional special activities you did with your child. We are unable to count daily care giving tasks.

ACTIVITY	SUN			MON			TUES			WED			THUR			FRI			SAT		
	15	30	60	15	30	60	15	30	60	15	30	60	15	30	60	15	30	60	15	30	60
FLD- Foundational and Language Development																					
Reading																					
Story Telling																					
Visit Library																					
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Shasta Head Start Staff Purposes Only

Grand Total Hours

(Total minutes ÷ 60) Staff's Signature:

Date

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Sample: 09.17.26 - “Today when I picked up Jasmine at school, she ran to greet me with a smile on her face.”

Observation: _____

Parent /Child Activities

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
<p>Brush your hair 25 strokes, have a parent help. HLTH</p>	<p>Go on an evening walk with your parent and look for things that are white. PD</p>	<p>Make paper balls and toss them into an empty trash basket. PD</p>	<p>Put on some music and march around your house with a musical instrument. ATL</p>	<p>Play “Red Light, Green Light.” SED</p>
<p>Play in the bath with funnels, sieves, cups, and scoops. SCI</p>	<p>Get out art supplies and be creative with your parent. ATL</p>	<p>Read the story “Stone Soup” and help make some stone soup for dinner. FLD</p>	<p>Make mouse ears with your parent and wear them around the house pretending to be mice. Count how many ears you have altogether now. M</p>	<p>Help your parent put groceries away in the cupboards. PD</p>
<p>Go to the library and check out books. FLD</p>	<p>Play with measuring spoons and water. M</p>	<p>With your parent, write a note to your teacher. Tell them how you feel about your class. SED</p>	<p>Use a recipe with your parent to make something healthy. HLTH</p>	<p>Help someone sort the laundry. M</p>

Ask a parent to read your Raising a Reader book to you.

Shasta Head Start Child Development, Inc. Parent / Child Home Activity Record

Child's Name: _____ **Site:** _____ **Mo/Yr:** _____

Check off the time spent on an activity you completed using the Parent-Child Activity sheet, or on any additional special activities you did with your child. We are unable to count daily care giving tasks.

ACTIVITY	SUN			MON			TUES			WED			THUR			FRI			SAT		
	15	30	60	15	30	60	15	30	60	15	30	60	15	30	60	15	30	60	15	30	60
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Parent Signature: _____ **Date:** _____

Shasta Head Start Staff Purposes Only

Grand Total Hours

(Total minutes ÷ 60) Staff's Signature:

Date

Parent Observations

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Sample: 09.17.26 - *“Today when I picked up Jasmine at school, she ran to greet me with a smile on her face.”*

Observation: _____

Parent /Child Activities

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
Go for a walk and collect fall leaves. HLTH	Bounce a large ball back and forth with your parent. PD	Play “Run, run as fast as you can, you can’t catch me. I’m the Gingerbread Man.” Substitute walk, tiptoe, hop, and skip for run. SED	Exercise to the game “Simon Says.” SED	Play musical chairs. SED
Make up silly words that rhyme. FLD	Read the story of the Gingerbread Man, and then act it out. ATL	Practice putting on your jacket and zipping it. Sing “Zippity Do Dah.” HLTH	Look around your house for red things and sort them by size. M	Role play how to share a toy. See how many solutions to the problem you can come up with? SCI
Have someone draw a triangle. Use your finger to trace it. M	Look at a magazine with your parent. FLD	In the shower, write with your finger on the walls. FLD	Gather red and yellow things around your house. Make up a story about them. FLD	Use paper and pencil to practice your name. FLD

Ask a parent to read your Raising a Reader book to you.

Shasta Head Start Child Development, Inc. Parent / Child Home Activity Record

Child's Name: _____ **Site:** _____ **Mo/Yr:** _____

Check off the time spent on an activity you completed using the Parent-Child Activity sheet, or on any additional special activities you did with your child. We are unable to count daily care giving tasks.

ACTIVITY	SUN			MON			TUES			WED			THUR			FRI			SAT		
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Parent Signature: _____ **Date:** _____

Shasta Head Start Staff Purposes Only

Grand Total Hours

(Total minutes ÷ 60) Staff's Signature:

Date

Parent Observations

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Sample: 09.17.26 - *“Today when I picked up Jasmine at school, she ran to greet me with a smile on her face.”*

Observation: _____

Parent /Child Activities

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
Go on an evening walk and look for orange items. HLTH	Dance like a scarecrow. APL	Use a stick to hammer golf tees into Styrofoam. PD	Pretend to swim like a fish, fly like a bird, and crawl like a bug. ATL	Wear a pair of your parent’s shoes around the house. Is it hard to walk ? PD
Glue rice on a piece of colored paper to make creative art . ATL	Decorate a paper sack for your parent to use for a litter bag in the car or in their room. SED	Look around the house for things that are bigger than you. M	Look for three green vegetables in the grocery store . HLTH	Use pieces of torn paper and glue to make a picture . ATL
Count the spoons in your house. M	Look around your house for numbers . M	Ask someone to tell you a story about a time they felt sad. SED	Read a book with your parent. FLD	Ask someone to show you a word is and what it means. FLD

Ask a parent to read your Raising a Reader book to you.

Week 12

Shasta Head Start Child Development, Inc. Parent / Child Home Activity Record

Child's Name: _____ Site: _____ Mo/Yr: _____

Check off the time spent on an activity you completed using the Parent-Child Activity sheet, or on any additional special activities you did with your child. We are unable to count daily care giving tasks.

ACTIVITY	SUN			MON			TUES			WED			THUR			FRI			SAT		
	15	30	60	15	30	60	15	30	60	15	30	60	15	30	60	15	30	60	15	30	60
FLD- Foundational and Language Development																					
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Story Telling																					
Visit Library																					
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Parent Signature: _____ Date: _____

Shasta Head Start Staff Purposes Only

Grand Total Hours

(Total minutes ÷ 60) Staff's Signature:

Date

Parent Observations

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Sample: 09.17.26 - *“Today when I picked up Jasmine at school, she ran to greet me with a smile on her face.”*

Observation: _____

Parent /Child Activities

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
<p>Act out the nursery rhyme “The Three Billy Goats Gruff.” ATL</p> <p>Problem solve different ways to drop clothes pins into a jar. SCI</p> <p>Go to the library and check out books. FLD</p>	<p>Gobble and strut like a turkey. PD</p> <p>Collect different lids from containers; sort them by size and color. M</p> <p>Make and send a card to someone. FLD</p>	<p>Play “Ring Around the Rosey.” SED</p> <p>Show your child how to cut with scissors safely. Let them practice. PD</p> <p>Read a book to your stuffed animal. FLD</p>	<p>Walk sideways like a crab. PD</p> <p>Go outside and look for bugs. Watch how they move. SCI</p> <p>Use the front of a greeting card cut in 8 pieces to make a puzzle. M</p>	<p>Dance with scarves tied to your arms. ATL</p> <p>Mix drops of yellow and blue food coloring in a glass of water. What happens? SCI</p> <p>Go on a circle hunt. How many can you find? M</p>

Ask a parent to read your Raising a Reader book to you.

Week 13

Shasta Head Start Child Development, Inc. Parent / Child Home Activity Record

Child's Name: _____ **Site:** _____ **Mo/Yr:** _____

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ACTIVITY	SUN			MON			TUES			WED			THUR			FRI			SAT		
	15	30	60	15	30	60	15	30	60	15	30	60	15	30	60	15	30	60	15	30	60
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Reading																					
Story Telling																					
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Parent Signature: _____ **Date:** _____

Shasta Head Start Staff Purposes Only

Grand Total Hours

(Total minutes ÷ 60) Staff's Signature:

Date

Parent Observations

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Sample: 09.17.26 - *“Today when I picked up Jasmine at school, she ran to greet me with a smile on her face.”*

Observation: _____

Parent /Child Activities

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
<p>Ice skate in your socks on a bare floor. PD</p>	<p>Play a memory game. SED</p>	<p>Make a tunnel out of blankets and chairs. PD</p>	<p>Go on a clean-up walk around your neighborhood. Bring a bag for trash. SED</p>	<p>Follow your parent and run in the shape of a square. PD</p>
<p>Mix drops of red and yellow food coloring in a glass of water. What color does it make? What else can you add? SCI</p>	<p>Talk about the sounds that a deer, squirrel and owl make. Now act like each animal. ATL</p>	<p>Problem solve how to drop rocks into a cup of water without the water overflowing. M</p>	<p>Tell your parent a recipe of a favorite dessert. Is it good for you? HLTH</p>	<p>Set up the dinner table. SED</p>
<p>Take a night walk with your parent and count the houses with porch lights on. M</p>	<p>Have someone help you write and send a thank you card. FLD</p>	<p>Read a book with your parent. FLD</p>	<p>Go on a walk and look for a deer, squirrel or owl. SCI</p>	<p>Gather yellow and green things from your house. Mix them. Sort them. M</p>

Ask a parent to read your Raising a Reader book to you.

Shasta Head Start Child Development, Inc. Parent / Child Home Activity Record

Child's Name: _____ **Site:** _____ **Mo/Yr:** _____

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ACTIVITY	SUN			MON			TUES			WED			THUR			FRI			SAT		
	15	30	60	15	30	60	15	30	60	15	30	60	15	30	60	15	30	60	15	30	60
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Shasta Head Start Staff Purposes Only

Grand Total Hours

(Total minutes ÷ 60) Staff's Signature:

Date

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Observation: _____

Parent /Child Activities

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
<p>Play different kinds of music (soft, loud, slow, and fast) and dance. Freeze when music stops. ATL</p> <p>Help your parent choose something for dinner. HLTH</p> <p>Have someone tell you a story about a time when they were excited! SED</p>	<p>Build a fort from pillows, blankets, and cushions and play inside. PD</p> <p>Snuggle with your parent and talk about why you love them. SED</p> <p>Count the clocks in your house. M</p>	<p>Find something smooth and something rough. SCI</p> <p>Make English muffin pizzas for a snack. HLTH</p> <p>Find out the names of all the letters in your name. FLD</p>	<p>Pretend to be a kangaroo and a frog. How do they hop? Is it different or the same? ATL</p> <p>Observe the weather and draw what you see. SCI</p> <p>Read a bedtime story with your parent. FLD</p>	<p>Pretend to be an astronaut walking on the moon. ATL</p> <p>Stuff celery with peanut butter and top with raisins. Eat! HLTH</p> <p>Find 5 rectangles. M</p>

Ask a parent to read your Raising a Reader book to you.

Shasta Head Start Child Development, Inc. Parent / Child Home Activity Record

Child's Name: _____ Site: _____ Mo/Yr: _____

Check off the time spent on an activity you completed using the Parent-Child Activity sheet, or on any additional special activities you did with your child. We are unable to count daily care giving tasks.

ACTIVITY	SUN			MON			TUES			WED			THUR			FRI			SAT		
	15	30	60	15	30	60	15	30	60	15	30	60	15	30	60	15	30	60	15	30	60
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Shasta Head Start Staff Purposes Only

Grand Total Hours

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Date

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Observation: _____

Parent /Child Activities

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
Practice doing summersaults . PD	Problem solve how to get across the living room without touching the floor. SCI	Pretend to be a circus elephant walking on a string. ATL	Join hands with your parent and move like a merry-go-round. PD	Play “Follow the Leader” after creating game rules . SED
Talk to your parent about how you would feel if you were lost. What could you do? SED	Help peel eggs to make egg salad sandwiches with your parent. PD	Do a puzzle . M	Find the letter of your first name in a book. See how many times you can find the letter. FLD	Make popcorn and sprinkle with Parmesan cheese or taco seasoning. HLTH
Go to the library and check out books . FLD	Find a rectangle and count the sides. M	Have your child guess what word you are saying as you say it in onset and rime. Ex: C-at = Cat FLD	Using paper circles, squares and triangles, sort them and compare the amounts. M	Use socks to put on a puppet show . FLD

Ask a parent to read your Raising a Reader book to you.

Shasta Head Start Child Development, Inc. Parent / Child Home Activity Record

Child's Name: _____ **Site:** _____ **Mo/Yr:** _____

Check off the time spent on an activity you completed using the Parent-Child Activity sheet, or on any additional special activities you did with your child. We are unable to count daily care giving tasks.

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Parent Signature: _____ **Date:** _____

Shasta Head Start Staff Purposes Only

Grand Total Hours

(Total minutes ÷ 60) Staff's Signature:

Date

Parent Observations

Please choose an activity and write an observation about your child on the lines below. Avoid using words that give your opinion, (She was “happy.” He “wanted” the toy). Instead use words that describe the facts of what your child is doing or saying, (She smiled. He picked up the toy). Remember to write your child’s name and the date on the observation. Turn in completed observations along with your parent/child activity records to your child’s teacher.

Sample: 09.17.26 - “Today when I picked up Jasmine at school, she ran to greet me with a smile on her face.”

Observation: _____

Parent /Child Activities

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
Using cardboard tubes and plastic balls, play a game of golf with your family. SED	Play classical music and dance with a scarf. ATL	Place a muffin tin on the floor and toss large buttons into the cups. PD	Pretend to stomp grapes to make grape juice. PD	Toss a balloon in the air and keep it from touching the ground. Create rules for the game. SED
Practice stringing spools, noodles, or beads on yarn. PD	Talk about sharing with and caring for all people. How does it make you feel when someone shares with you? SED	Look for pink things around the house. Find 7. M	Look for shadows outside. Make some using a flashlight. SCI	Ask your parent to let you listen to their heart . Talk about heart beats and how to keep your heart healthy. HLTH
Ask your parent to tell you a story . FLD	Read a book to yourself by looking at the pictures. FLD	Using paper shapes, name them by feeling instead of looking at the pictures. SED	Practice the name of book parts; cover, spine, title, etc. FLD	Ask someone to draw a rectangle for you to cut out. M

Ask a parent to read your Raising a Reader book to you.

Shasta Head Start Child Development, Inc. Parent / Child Home Activity Record

Child's Name: _____ Site: _____ Mo/Yr: _____

Check off the time spent on an activity you completed using the Parent-Child Activity sheet, or on any additional special activities you did with your child. We are unable to count daily care giving tasks.

ACTIVITY	SUN			MON			TUES			WED			THUR			FRI			SAT		
	15	30	60	15	30	60	15	30	60	15	30	60	15	30	60	15	30	60	15	30	60
FLD - Foundational and Language Development																					
Reading																					
Story Telling																					
Visit Library																					
Writing																					
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Music, Dance, Drama																					
Additional Activities																					
Book Bags																					
Child Goals																					
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Total																					

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Parent Signature: _____ Date: _____

Shasta Head Start Staff Purposes Only

Grand Total Hours

(Total minutes ÷ 60) Staff's Signature:

Date

Parent Observations

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Sample: 09.17.26 - *“Today when I picked up Jasmine at school, she ran to greet me with a smile on her face.”*

Observation: _____

Parent /Child Activities

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
Create rules and play kick the can. SED Learn how to dial 9-1-1 and how to talk to the operator. HLTH Draw a picture from a book you’ve read . FLD	Run around and get sweaty. PD Set up a hospital for stuffed animals. Pretend to be the doctor. ATL Pretend to read a story. Point to the words with your fingers. FLD	Play the “London Bridge.” game . PD Using a tape measure find the longest objects in your house. M Look through a local magazine with your parent. FLD	Have a stuffed animal dance party. ATL Practice blowing and wiping your nose. HLTH Practice using the words near and far . M	Hop like a rabbit and crawl like a turtle. PD Play with a deck of cards. Separate the red and black cards. M Cut out shapes to make a picture . ATL

Ask a parent to read your Raising a Reader book to you.

**Shasta Head Start Child Development, Inc.
Parent / Child Home Activity Record**

Child's Name: _____ **Site:** _____ **Mo/Yr:** _____

Check off the time spent on an activity you completed using the Parent-Child Activity sheet, or on any additional special activities you did with your child. We are unable to count daily care giving tasks.

ACTIVITY	SUN			MON			TUES			WED			THUR			FRI			SAT		
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Parent Signature: _____ **Date:** _____

Shasta Head Start Staff Purposes Only

Grand Total Hours

(Total minutes ÷ 60) Staff's Signature:

Date

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Observation: _____

Parent /Child Activities

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
<p>Make a punching bag from a brown bag and newspaper. PD</p>	<p>Walk around with a pretend camera and take pictures of things that are purple. ATL</p>	<p>Do exercises with your parent. Toe touches, arm circles, knee bends, etc. PD</p>	<p>Plant a pretend garden in your house. Weed, dig, plant, and water. PD</p>	<p>Jump on a pretend trampoline and ride a pretend teeter totter. Talk about how this is done. Ex: what does it look like to jump on a trampoline, show me how. ATL</p>
<p>Make paper airplanes with your parent. ATL</p>	<p>Eat an apple or banana with peanut butter. HLTH</p>	<p>Make a present for a neighbor. How does it make you feel? SED</p>	<p>Make a graph that names as many fruits and vegetables as you know. M</p>	<p>Color with crayons or markers. ATL</p>
<p>Pick a theme with your family, ex: sharks. Go to the library and check out books related to the theme. FLD</p>	<p>Count the doors in your house. What shape are they? Are they different or the same? M</p>	<p>Read a bedtime story to your stuffed animal. FLD</p>	<p>Ask your parent to teach you the letters in your name. FLD</p>	<p>Practice good book handling. Hold it right side up, turn the page from the top right corner. FLD</p>

Ask a parent to read your Raising a Reader book to you.
Week 19

Shasta Head Start Child Development, Inc. Parent / Child Home Activity Record

Child's Name: _____ **Site:** _____ **Mo/Yr:** _____

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ACTIVITY	SUN			MON			TUES			WED			THUR			FRI			SAT		
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Shasta Head Start Staff Purposes Only

Grand Total Hours

(Total minutes ÷ 60) Staff's Signature:

Date

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Sample: 09.17.26 - *“Today when I picked up Jasmine at school, she ran to greet me with a smile on her face.”*

Observation: _____

Parent /Child Activities

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
Pretend to be a big dinosaur walking on a tight rope. PD	Bend your body forward, backward, and side-to-side. PD	Have your parent teach you the dance called “The Twist.” SED	Plays a game with your parent, when they call out a body part you shake it when it is named. SED	Play freeze tag with rules . SED
Recite “Humpty Dumpty” and talk about where eggs come from. SCI	Make funny faces with your parent. SED	Eat a pickle on a stick. HLTH	Do crayon rubbings over raised objects. ATL	Finger-paint with shaving cream on a cookie sheet or bathtub wall. ATL
Read a book with a family member. FLD	Use a pencil to practice writing your name. FLD	Ask someone to tell you a story about your name. FLD	Use paper and a crayon to make a map of your room. M	Count your toes. How many are there? Do you have the same amount of fingers on your hands? How many altogether? M

Ask a parent to read your Raising a Reader book to you.

Shasta Head Start Child Development, Inc. Parent / Child Home Activity Record

Child's Name: _____ Site: _____ Mo/Yr: _____

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ACTIVITY	SUN			MON			TUES			WED			THUR			FRI			SAT		
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Parent Signature: _____ Date: _____

Shasta Head Start Staff Purposes Only

Grand Total Hours

(Total minutes ÷ 60) Staff's Signature:

Date

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Sample: 09.17.26 - “Today when I picked up Jasmine at school, she ran to greet me with a smile on her face.”

Observation: _____

Parent /Child Activities

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
<p>Help your parent vacuum. SED</p> <p>Check the weather outside. Talk about how cold it is and talk about other places in the world where it is colder. SCI</p> <p>Use your fingers to trace the letters in your name. FLD</p>	<p>Play an up-and-down game, using different body parts (such as fingers, arms, legs, eyes, head, sit down, stand up, etc. SED</p> <p>Darken the room and have flashlight races. Talk about the light and the shapes. SC</p> <p>Read a book to someone you love. FLD</p>	<p>Walk on a line with one object to step over. PD</p> <p>On paper, paint things that are blue. ATL</p> <p>Use spoons and forks to make a pattern. Spoon, spoon, fork, fork. M</p>	<p>Problem solve with your parent how many different ways you can cross the room. ATL</p> <p>Ask your parent to show you how to make a sandwich you like to eat. Then make one for your parent. HLTH</p> <p>Make puppets from paper towel rolls and do a puppet show. APL</p>	<p>Take your parent on a listening walk. What do you hear? SCI</p> <p>Practice stop, drop, and roll. Ask questions such as; Why don’t we run when our clothes are on fire? HLTH</p> <p>Create a race to find 7 blue things in your house. SED</p>

Ask a parent to read your Raising a Reader book to you.

**Shasta Head Start Child Development, Inc.
Parent / Child Home Activity Record**

Child's Name: _____ **Site:** _____ **Mo/Yr:** _____

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Parent Signature: _____ **Date:** _____

Shasta Head Start Staff Purposes Only

Grand Total Hours

(Total minutes ÷ 60) Staff's Signature:

Date

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Sample: 09.17.26 - "Today when I picked up Jasmine at school, she ran to greet me with a smile on her face."

Observation: _____

Parent /Child Activities

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
Recite "Jack and Jill" and act it out. ATL	Scatter paper flowers on the floor and " Tiptoe through the Tulips." PD	Make a big pile of pillows to jump in, then a small pile, which works best? SCI	Throw a ball into a bucket over and over. PD-	Count with your parent as you go up and down stairs. How many does it take to get up or down? How many altogether? M
Practice over and under. Have someone put something in different positions and problem solve , is it over or under? M	Find things in your house that you can recycle . What is recycling? ATL	Find all the parts of your body that bend . PD	Ask your parent to tell you something cute you did when you were smaller. SED	Take a rest with your parent and talk about your day. SED
Go to the library and check out books . FLD	Hop on one foot and sing a song. ATL	Use cornstarch and water in a plate to practice writing letters with your finger. FLD	Count 10 objects, pointing to each as you count. M	Look at a magazine with your parent. FLD

Ask a parent to read your Raising a Reader book to you.

**Shasta Head Start Child Development, Inc.
Parent / Child Home Activity Record**

Child's Name: _____ **Site:** _____ **Mo/Yr:** _____

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ACTIVITY	SUN			MON			TUES			WED			THUR			FRI			SAT		
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Parent Signature: _____ **Date:** _____

Shasta Head Start Staff Purposes Only

Grand Total Hours

(Total minutes ÷ 60) Staff's Signature:

Date

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Sample: 09.17.26 - *“Today when I picked up Jasmine at school, she ran to greet me with a smile on her face.”*

Observation: _____

Parent /Child Activities

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
<p>Walk with a ball between your knees. PD</p>	<p>Have a walking backwards race. SED</p>	<p>Pretend to be a leprechaun dancing a jig. ATL</p>	<p>Go for a walk in the rain with your own umbrella, if you don’t have one, what else can you use? PD</p>	<p>Crawl under a row of chairs on your back. PD</p>
<p>Count the light bulbs in your house. Remember to always turn them off when you leave the room. M</p>	<p>Problem solve which lids match the pots and pans in your kitchen. ATL</p>	<p>Search around your house to find rectangles. M</p>	<p>Color on wax paper with crayons. ATL</p>	<p>Have a family game night. SED</p>
<p>Search your house for different kinds of books .How many can you find? FLD</p>	<p>Read a book with your parent. FLD</p>	<p>With your parent, write a note to your teacher. FLD</p>	<p>Ask your parent to help you think of words that rhyme. FLD</p>	<p>Ask your parent to write the numbers 1-5. Count them by name. M</p>

Ask a parent to read your Raising a Reader book to you.

Week 23

Shasta Head Start Child Development, Inc. Parent / Child Home Activity Record

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ACTIVITY	SUN			MON			TUES			WED			THUR			FRI			SAT		
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Parent Signature: _____ **Date:** _____

Shasta Head Start Staff Purposes Only

Grand Total Hours

(Total minutes ÷ 60) Staff's Signature:

Date

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Sample: 09.17.26 - "Today when I picked up Jasmine at school, she ran to greet me with a smile on her face."

Observation: _____

Parent /Child Activities

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
<p>Pretend to be a car, plane, boat, and helicopter. Go fast, and then slow. PD</p> <p>Play a car game. Ex: count the road signs or look for restaurant signs and see how many you can find before you get home. SED</p> <p>Ask your parent to tell you a story about when they were in school. FLD</p>	<p>Brush your teeth while your parent counts. HLTH</p> <p>Turn on a flashlight and pretend you are reading by the campfire. FLD</p> <p>Practice writing the number zero. Talk about how much it is. Then add or subtract numbers to 0, what is the answer? M</p>	<p>Take your parent for a walk to show them spring buds on blossoms. SCI</p> <p>With your parent, stick pictures of yourself to a large piece of paper and tell your parent how you feel about them. Have your parent write your words. SED</p> <p>Tell your parent about something you did at school. FLD</p>	<p>Float around like a butterfly. PD</p> <p>Walk around barefooted and talk about how it feels. SED</p> <p>Pretend to read a story. Point to the words with your fingers. FLD</p>	<p>Make paper balls and toss them around, trying to juggle. ATL</p> <p>Talk about how to handle books the right way with your parent. FLD</p> <p>Search for objects in your house that are orange. How many can you find? M</p>

Ask a parent to read your Raising a Reader book to you.

Shasta Head Start Child Development, Inc. Parent / Child Home Activity Record

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Grand Total Hours

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Observation: _____

Parent /Child Activities

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
<p>Problem solve and create a map from school to home with your parents. Asking questions like, which way do we turn first? SCI</p> <p>Help your parent cook dinner using a new spice. HLTH</p> <p>Go to the library, explore and check out books. FLD</p>	<p>Have your parent hook behind you to form a giant caterpillar crawling across the floor. PD</p> <p>Help your parent wash the dishes. SED</p> <p>Ask someone to print the letters in the alphabet. How many do you know? FLD</p>	<p>Go for a walk and look for things that are yellow. PD</p> <p>Use water on a piece of paper to paint a picture. SED</p> <p>Use flour, sand, or salt to practice writing your name with your fingers. FLD</p>	<p>Sing and dance to the song, “Old McDonald had a Farm.” ATL</p> <p>Look around your house and count 8 things that are green. M</p> <p>Read a story with someone who is younger than you. FLD</p>	<p>Fluff the pillows on your bed before you go to sleep. PD</p> <p>Ask your parents to let you sort the socks by color and size. M</p> <p>Clean up things in your house that are black or white and put them away. SED</p>

Ask a parent to read your Raising a Reader book to you.

Shasta Head Start Child Development, Inc. Parent / Child Home Activity Record

Child's Name: _____ **Site:** _____ **Mo/Yr:** _____

Check off the time spent on an activity you completed using the Parent-Child Activity sheet, or on any additional special activities you did with your child. We are unable to count daily care giving tasks.

ACTIVITY	SUN			MON			TUES			WED			THUR			FRI			SAT		
	15	30	60	15	30	60	15	30	60	15	30	60	15	30	60	15	30	60	15	30	60
FLD - Foundational and Language Development																					
Reading																					
Story Telling																					
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Parent Signature: _____ **Date:** _____

Shasta Head Start Staff Purposes Only

Grand Total Hours

(Total minutes ÷ 60) Staff's Signature:

Date

Parent Observations

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Sample: 09.17.26 - “Today when I picked up Jasmine at school, she ran to greet me with a smile on her face.”

Observation: _____

Parent /Child Activities

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
<p>Play the “Duck, Duck, Goose.” game. SED</p>	<p>Do the “Hokey-Pokey.” ATL</p>	<p>Bounce a large ball with your parents, as it bounces sound out the syllables of your name. Ex: Jas-mine. FLD</p>	<p>March and play a homemade instrument to marching music. ATL</p>	<p>Play a leapfrog game. SED</p>
<p>Guess how many dried beans are in a jar. Open the jar and count them. M</p>	<p>Show your parent the right way to wash hands. Wash your hands with them. HLTH</p>	<p>Talk with your parent about being polite. Name some good manners and ask questions such as; how do others feel when you are polite? SED</p>	<p>Look for pairs of things around your house. M</p>	<p>Brush your teeth with your parent. Practice flossing. HLTH</p>
<p>Have someone write your name big and cut it apart. Can you put it back together? FLD</p>	<p>Practice drawing ovals with a crayon and paper. M</p>	<p>Write your name with a pencil and color it. ATL</p>	<p>Read a book with your parent. FLD</p>	<p>Find things in your house that are purple and pink. Sort them. M</p>

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Shasta Head Start Child Development, Inc. Parent / Child Home Activity Record

Child's Name: _____ **Site:** _____ **Mo/Yr:** _____

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Shasta Head Start Staff Purposes Only

Grand Total Hours

(Total minutes ÷ 60) Staff's Signature:

Date

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Sample: 09.17.26 - *“Today when I picked up Jasmine at school, she ran to greet me with a smile on her face.”*

Observation: _____

Parent /Child Activities

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
<p>Roll around like eggs. PD</p> <p>How many clocks do you have in your house? What numbers do you see? Talk about different kinds of clocks asking how and why we use them? M</p> <p>Ask your parent to write the alphabet and hang it in your room. FLD</p>	<p>Hop like bunnies. PD</p> <p>Ask your parent to help you scatter crumbs for the birds. SCI</p> <p>Take a walk with your parent. Find things that start with the first letter of your name. FLD</p>	<p>Go to a park and climb a slide ladder. Talk about high and low. PD</p> <p>Form a line with your family. Who is in front, back, middle? Now count and see how many there are altogether. M</p> <p>Sing the ABC song and point to the letters as you sing. FLD</p>	<p>Take your dog or a neighbor’s dog on a walk. PD</p> <p>Plant a seedling with your parent. SCI</p> <p>Draw a picture for someone and write your name on the top. FLD</p>	<p>Pretend to be a seed. Start small and grow with the help of water and sunshine. ATL</p> <p>Make your bed. SED</p> <p>Ask your parent to write your last name and see if you know the letters. FLD</p>

Ask a parent to read your Raising a Reader book to you.

Shasta Head Start Child Development, Inc. Parent / Child Home Activity Record

Child's Name: _____ **Site:** _____ **Mo/Yr:** _____

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Shasta Head Start Staff Purposes Only

Grand Total Hours

(Total minutes ÷ 60) Staff's Signature:

Date

Parent Observations

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Sample: 09.17.26 - *“Today when I picked up Jasmine at school, she ran to greet me with a smile on her face.”*

Observation: _____

Parent /Child Activities

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
<p>Decorate your trike or bike with crepe paper and have a parade. ATL</p> <p>Use a shoe to practice tying. HLTH</p> <p>Go to the library and check out books for you and a parent. FLD</p>	<p>Play a hide and seek game. SED</p> <p>Hang a prism in the window to make rainbows on the walls. SCI</p> <p>Ask someone to draw a rhombus (diamond) shape for you to trace. M</p>	<p>Put your feet on the top of your parent’s feet and dance with them. ATL</p> <p>Practice cutting the corners off pieces of scratch paper. PD</p> <p>Count the cans in your cupboard, then match similar foods and compare which has more or less. M</p>	<p>Make a pull train using cardboard boxes and chug it all around. PD</p> <p>Ask your parent to tell you a story about when they feel happy and feel sad. SED</p> <p>Practice writing some letters in your last name. FLD</p>	<p>Dance like a penguin, monkey, and robot. ATL</p> <p>Have your parent give you several pairs of clothes and you choose what to wear for the day. HLTH</p> <p>Together use 5 cans and 5 boxes to build a castle. M</p>

Ask a parent to read your Raising a Reader book to you.

Shasta Head Start Child Development, Inc. Parent / Child Home Activity Record

Child's Name: _____ Site: _____ Mo/Yr: _____

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ACTIVITY	SUN			MON			TUES			WED			THUR			FRI			SAT		
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Parent Signature: _____ Date: _____

Shasta Head Start Staff Purposes Only

Grand Total Hours

(Total minutes ÷ 60) Staff's Signature:

Date

Parent Observations

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Sample: 09.17.26 - “Today when I picked up Jasmine at school, she ran to greet me with a smile on her face.”

Observation: _____

Parent /Child Activities

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
<p>Have your parent teach you to hula-hoop. PD</p> <p>Make a garden by cutting out pictures of plants and gluing them to a brown bag. ATL</p> <p>Find five crayons. Arrange them from longest to shortest. M</p>	<p>Blow bubbles and chase them. PD-HLTH</p> <p>Count all the windows in your house. Write the number on a piece of paper. M</p> <p>Make a pretend grocery list. FLD</p>	<p>Create a game with rules involving kicking a ball back and forth with our parent. SED</p> <p>Pour different amounts of water into glasses and tap them on the edges to make music. How did it sound? What were the differences? SCI</p> <p>Make up a story using the words over, under, behind, and in front of. FLD</p>	<p>Do the “Bunny Hop.” PD</p> <p>Name different farm animals and the sounds they make. ATL</p> <p>Make a love letter for your parent. FLD</p>	<p>Pull weeds in your yard. SCI</p> <p>Feed your family pet today. SED</p> <p>Make up nonsense rhyming words like silly, willy, filly, tilly. FLD</p>

Ask a parent to read your Raising a Reader book to you.

Shasta Head Start Child Development, Inc. Parent / Child Home Activity Record

Child's Name: _____ Site: _____ Mo/Yr: _____

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ACTIVITY	SUN			MON			TUES			WED			THUR			FRI			SAT		
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Shasta Head Start Staff Purposes Only

Grand Total Hours

(Total minutes ÷ 60) Staff's Signature:

Date

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Observation: _____

Parent /Child Activities

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
Do the Mexican hat dance around a hat. ATL	Figure out how to make a piñata using a brown bag, a string, filled with boxed raisins, fruits, and nuts. SCI	Dip a sponge in a bucket of water and play catch with it. PD	Take a walk and bring a picnic lunch. PD	Collect and use recycle materials to create an art sculpture. ATL
Have your parent cut open an apple. Count the seeds. M	Look around your house and find 3 things shaped like triangles, and 2 things shaped like rhombus (diamonds). How many do you have altogether? M	Trace alphabet letters with cotton swabs and water. FLD	Have your parent cut shapes out of paper. Lay them on the floor and step on the shape your parent says. M	Make an all-vegetable snack. HLTH
Does anyone in your class have the same first letter in their name? Who? FLD	Role play different ways to ask somebody to play with you. ATL	Tell jokes to your parent. Ask them to tell you some too. FLD	Look in your parent’s closet, then yours. Use tally marks to see who has more clothes? M	Tell your parent how you feel when you eat ice cream. SED

Ask a parent to read your Raising a Reader book to you.

Shasta Head Start Child Development, Inc.
Parent / Child Home Activity Record

Child's Name: _____ **Site:** _____ **Mo/Yr:** _____

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ACTIVITY	SUN			MON			TUES			WED			THUR			FRI			SAT		
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Shasta Head Start Staff Purposes Only

Grand Total Hours

(Total minutes ÷ 60) Staff's Signature:

Date

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Observation: _____

Parent /Child Activities

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
<p>Jump forward and backward over lines in the sidewalk. PD</p>	<p>Roll a ball up a slide or hill then try to catch it as it comes down. PD</p>	<p>Take your parent on a walk and count the trucks you see. M</p>	<p>Have your parent make large shapes out of masking tape for you to dance and crawl in. ATL</p>	<p>Problem solve how to make a tower out of Legos taller than you are. SCI</p>
<p>Problem solve how to make letters from cut pieces of yarn. FLD</p>	<p>Ask your parent if you can help plan a family activity. What will you do? How do you feel about the plan? SED</p>	<p>Clean under your bed. What did you find? How did it get there? SED</p>	<p>Ask your parent for some fabric to cut. Does it feel like paper? PD</p>	<p>Get eight spoons and ask someone to show you how to count them by two. M</p>
<p>Go to the library and check out books. FLD</p>	<p>Get a small cup of rocks. Count as many as you can. M</p>	<p>Tell your parent your favorite nursery rhyme. Have your parent tell you theirs. FLD</p>	<p>Make two piles of rocks that are equal. Count how many are in each pile. M</p>	<p>Show your parent how good you can write your name. FLD</p>

Ask a parent to read your Raising a Reader book to you.

Shasta Head Start Child Development, Inc. Parent / Child Home Activity Record

Child's Name: _____ **Site:** _____ **Mo/Yr:** _____

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Observation: _____

Parent /Child Activities

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
Put on a pretend cowboy hat and pretend to ride a bucking bronco. PD	Help cook dinner with your parent. HLTH	Practice learning how to jump rope. PD	Have your parent teach you to roller skate . PD	Create a new game where your parent cuts shapes from material, then tiptoe to the shape as you call it by name. SED
With yarn, form alphabet letters that you know. FLD	Try to guess how many cotton balls will fit into a small cup. Count to see if you were right. M	Make up a story and have your parents record it or write it down. FLD	While riding in a car or walking, count the signs you see. M	Use a magazine and have your parent call out a color . Find the color they call in the magazine. SED
Draw a picture of your family. ATL	Pretend to read a story to your parent. Point to the words. FLD	Make a pattern using XX OO XXOO XXOO. M	Try to make your bed . SED	Practice writing your first and last name. FLD

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Observation: _____

Parent /Child Activities

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
Take a pretend magic carpet ride. What do you see? ATL	Pretend to be a large caterpillar walking on the floor. ATL	Make up a funny nickname using 2 words that start with the letter of your name. ex: jumping John. FLD	Throw or kick a ball across a masking tape line. PD	Play the “Hot Potato” game . SED
Help your parent do the dishes. SED	Help your parent sort the laundry. Talk about the color of the clothes. M	Find a picture of an animal that you don’t know. Ask someone questions to problem solve . Where does it live and what does it eat? SCI	Have your parent slice an onion. Take the rings apart. How does it feel, smell, taste ? What favorite foods have onion in them? SCI	Have your parent read you a book. FLD
Take a bath and play with measuring cups. CM	Ask your parent to tell you a story . FLD	When helping cook dinner, look at the food labels for letters . FLD	Use chalk to make a hopscotch. Have your parent number it. M	Go for a walk . Can you read any signs? PD

Ask a parent to read your Raising a Reader book to you.

Shasta Head Start Child Development, Inc. Parent / Child Home Activity Record

Child's Name: _____ Site: _____ Mo/Yr: _____

Check off the time spent on an activity you completed using the Parent-Child Activity sheet, or on any additional special activities you did with your child. We are unable to count daily care giving tasks.

ACTIVITY	SUN			MON			TUES			WED			THUR			FRI			SAT		
	15	30	60	15	30	60	15	30	60	15	30	60	15	30	60	15	30	60	15	30	60
FLD - Foundational and Language Development																					
Reading																					
Story Telling																					
Visit Library																					
Writing																					
M - Math and SCI - Science																					
Counting																					
Shapes																					
Sorting																					
Observe Nature																					
Use Senses																					
Problem Solving																					
PD - Physical Development and HLTH - Health																					
Large Motor (jump, hop, run)																					
Small Motor (cut paper, write, color)																					
Cooking																					
Grocery Store																					
Self Care Tasks																					
SED- Social Emotional Development,																					
Feelings																					
Help Clean Up																					
Games with Rules																					
ATL-Approaches to Learning Including Creative Art																					
Color, Paint,																					
Music, Dance, Drama																					
Additional Activities																					
Book Bags																					
Child Goals																					
Child Observation																					
Total																					

In order for teachers to truly understand your child's strengths, interests, and goal areas, it is helpful for parents to write observations of their child participating in suggested activities and turn those observations in to the child's teacher. Thank you for your help!

Parent Signature: _____ Date: _____

Shasta Head Start Staff Purposes Only

Grand Total Hours

(Total minutes ÷ 60) Staff's Signature:

Date

Parent Observations

Please choose an activity and write an observation about your child on the lines below. Avoid using words that give your opinion, (She was “happy.” He “wanted” the toy). Instead use words that describe the facts of what your child is doing or saying, (She smiled. He picked up the toy). Remember to write your child’s name and the date on the observation. Turn in completed observations along with your parent/child activity records to your child’s teacher.

Sample: 09.17.26 - *“Today when I picked up Jasmine at school, she ran to greet me with a smile on her face.”*

Observation: _____

Parent /Child Activities

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
In your neighborhood, pick up five pieces of trash and throw them in a trash can. SED	Paint your house using a bucket of water and a paint brush. PD	With a parent, practice buckling your seatbelt. HLTH	Practice running in place, then put your hand on your heart and feel. HLTH	Use a broom handle to play limbo. SED
Paint on paper with watercolors or food coloring. ATL	Color a picture with markers. Use a spray bottle and mist the picture. ATL	At dark, go outside and sing , “Twinkle, Twinkle, Little star” with your parent. FLD	Name things that are hot and cold . SCI	With your parent, practice two ways of getting out of your house in case of fire. HLTH
Have your parent print your first name for you. FLD	Using paper and crayons, practice writing . FLD	Ask your parent to read you a bedtime story. Talk about how the characters are feeling . SED	Count the number of eyes in your house . M	Find circles in your kitchen. M

Ask a parent to read your Raising a Reader book to you.

**Shasta Head Start Child Development, Inc.
Parent / Child Home Activity Record**

Child's Name: _____ **Site:** _____ **Mo/Yr:** _____

Check off the time spent on an activity you completed using the Parent-Child Activity sheet, or on any additional special activities you did with your child. We are unable to count daily care giving tasks.

ACTIVITY	SUN			MON			TUES			WED			THUR			FRI			SAT		
	15	30	60	15	30	60	15	30	60	15	30	60	15	30	60	15	30	60	15	30	60
FLD - Foundational and Language Development																					
Reading																					
Story Telling																					
Visit Library																					
Writing																					
M - Math and SCI - Science																					
Counting																					
Shapes																					
Sorting																					
Observe Nature																					
Use Senses																					
Problem Solving																					
PD - Physical Development and HLTH - Health																					
Large Motor (jump,hop,run)																					
Small Motor (cut paper,write,color)																					
Cooking																					
Grocery Store																					
Self Care Tasks																					
SED- Social Emotional Development,																					
Feelings																					
Help Clean Up																					
Games with Rules																					
ATL-Approaches to Learning Including Creative Art																					
Color, Paint,																					
Music, Dance, Drama																					
Additional Activities																					
Book Bags																					
Child Goals																					
Child Observation																					
Total																					

In order for teachers to truly understand your child's strengths, interests, and goal areas, it is helpful for parents to write observations of their child participating in suggested activities and turn those observations in to the child's teacher. Thank you for your help!

Parent Signature: _____ **Date:** _____

Shasta Head Start Staff Purposes Only

Grand Total Hours

(Total minutes ÷ 60) Staff's Signature:

Date

Parent Observations

Please choose an activity and write an observation about your child on the lines below. Avoid using words that give your opinion, (She was “happy.” He “wanted” the toy). Instead use words that describe the facts of what your child is doing or saying, (She smiled. He picked up the toy). Remember to write your child’s name and the date on the observation. Turn in completed observations along with your parent/child activity records to your child’s teacher.

Sample: 09.17.26 - *“Today when I picked up Jasmine at school, she ran to greet me with a smile on her face.”*

Observation: _____

Parent /Child Activities

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
Take a short jog with your parents. PD	Talk about family rules and why you have them. HLTH	Draw a picture of your parent. ATL	Collect rocks for a rock collection. SCI	Pretend to be a scarecrow moving your arms and legs stiffly as they “blow in the wind.” PD
Go on a circle hunt around the house. Now spin yourself in a circle. M	Play “I Spy” with your parent. SED	Practice what to do if your clothes catch on fire. Stop, drop, and roll. HLTH	Ask your parent to teach you one of their favorite songs from their childhood. FLD	Taste a lemon and a cracker. Which tastes sour? SCI
Visit the library and check out books . FLD	Read a book with someone in your family. FLD	Use forks and spoons to make a pattern . Fork, spoon, fork, spoon. M	Find circles in your living room. M	Have your parent print your name five times and put it around your room. FLD

Ask a parent to read your Raising a Reader book to you.

Shasta Head Start Child Development, Inc. Parent / Child Home Activity Record

Child's Name: _____ **Site:** _____ **Mo/Yr:** _____

Check off the time spent on an activity you completed using the Parent-Child Activity sheet, or on any additional special activities you did with your child. We are unable to count daily care giving tasks.

ACTIVITY	SUN			MON			TUES			WED			THUR			FRI			SAT		
	15	30	60	15	30	60	15	30	60	15	30	60	15	30	60	15	30	60	15	30	60
FLD - Foundational and Language Development																					
Reading																					
Story Telling																					
Visit Library																					
Writing																					
M - Math and SCI - Science																					
Counting																					
Shapes																					
Sorting																					
Observe Nature																					
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Problem Solving																					
PD - Physical Development and HLTH - Health																					
Large Motor (jump, hop, run)																					
Small Motor (cut paper, write, color)																					
Cooking																					
Grocery Store																					
Self Care Tasks																					
SED- Social Emotional Development,																					
Feelings																					
Help Clean Up																					
Games with Rules																					
ATL-Approaches to Learning Including Creative Art																					
Color, Paint,																					
Music, Dance, Drama																					
Additional Activities																					
Book Bags																					
Child Goals																					
Child Observation																					
Total																					

In order for teachers to truly understand your child's strengths, interests, and goal areas, it is helpful for parents to write observations of their child participating in suggested activities and turn those observations in to the child's teacher. Thank you for your help!

Parent Signature: _____ **Date:** _____

Shasta Head Start Staff Purposes Only

Grand Total Hours

(Total minutes ÷ 60) Staff's Signature:

Date

Parent Observations

Please choose an activity and write an observation about your child on the lines below. Avoid using words that give your opinion, (She was “happy.” He “wanted” the toy). Instead use words that describe the facts of what your child is doing or saying, (She smiled. He picked up the toy). Remember to write your child’s name and the date on the observation. Turn in completed observations along with your parent/child activity records to your child’s teacher.

Sample: 09.17.26 - *“Today when I picked up Jasmine at school, she ran to greet me with a smile on her face.”*

Observation: _____

Parent /Child Activities

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
Take your parent to a nearby park to play . PD	Set out your clothes for school tomorrow. HLTH	Use molding clay to create a sculpture. ATL	Pretend to be a duck and waddle around. As someone to follow you. PD	Act out Little Miss Muffet. ATL
Play a simple memory game . SED	Look through family pictures and talk about what you see . How does it make you feel ? SED	Mix together cornstarch and water in a bowl. Use your senses to explore it. SCI	Dance to jazz music. ATL	Look at pictures of your family and tell stories about the events shown. FLD
Visit the library and check out books . FLD	Ask your parent what a pair of something is. Have them show you five pairs. M	Ask your parent to read a book with you. FLD	Problem solve how to move across the living room without touching the floor. SCI	Teach your parent a song you learned at school. FLD

Ask a parent to read your Raising a Reader book to you.

Week 36

Shasta Head Start Child Development, Inc. Parent / Child Home Activity Record

Child's Name: _____ **Site:** _____ **Mo/Yr:** _____

Check off the time spent on an activity you completed using the Parent-Child Activity sheet, or on any additional special activities you did with your child. We are unable to count daily care giving tasks.

ACTIVITY	SUN			MON			TUES			WED			THUR			FRI			SAT		
	15	30	60	15	30	60	15	30	60	15	30	60	15	30	60	15	30	60	15	30	60
FLD - Foundational and Language Development																					
Reading																					
Story Telling																					
Visit Library																					
Writing																					
M - Math and SCI - Science																					
Counting																					
Shapes																					
Sorting																					
Observe Nature																					
Use Senses																					
Problem Solving																					
PD - Physical Development and HLTH - Health																					
Large Motor (jump, hop, run)																					
Small Motor (cut paper, write, color)																					
Cooking																					
Grocery Store																					
Self Care Tasks																					
SED- Social Emotional Development,																					
Feelings																					
Help Clean Up																					
Games with Rules																					
ATL-Approaches to Learning Including Creative Art																					
Color, Paint,																					
Music, Dance, Drama																					
Additional Activities																					
Book Bags																					
Child Goals																					
Child Observation																					
Total																					

In order for teachers to truly understand your child's strengths, interests, and goal areas, it is helpful for parents to write observations of their child participating in suggested activities and turn those observations in to the child's teacher. Thank you for your help!

Parent Signature: _____ **Date:** _____

Shasta Head Start Staff Purposes Only

Grand Total Hours

(Total minutes ÷ 60) Staff's Signature:

Parent Observations

Please choose an activity and write an observation about your child on the lines below. Avoid using words that give your opinion, (She was "happy." He "wanted" the toy). Instead use words that describe the facts of what your child is doing or saying, (She smiled. He picked up the toy). Remember to write your child's name and the date on the observation. Turn in completed observations along with your parent/child activity records to your child's teacher.

Sample: 09.17.26 - "Today when I picked up Jasmine at school, she ran to greet me with a smile on her face."

Observation: _____

Parent /Child Activities

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
Take your parent to a nearby park to play . PD	Practice crossing the street you're your parent. HLTH	Make wet footprints on the sidewalk. PD	Pretend to be a duck and waddle around. Ask someone to follow you. PD	Act out Little Miss Muffet. ATL
Take a bubble bath. What do bubbles feel like? Make pictures in the bubbles. ATL	Look through family pictures and talk about what you see. SED	Look through magazines and cut out pictures of families. Talk about how they are different and the same as yours. SED	Visit a relative or call one on the phone. SED	Look at pictures of your family and talk about the events shown. SED
Visit the library and check out books . FLD	Ask your parent what a pair of something is. Have them show you five pairs. M	Ask your parent to read a book with you. FLD	Teach your parent a song you learned at school. ATL	Make a writing box for practicing. Add paper, pencils, old cards, junk mail, etc. FLD

Ask a parent to read your Raising a Reader book to you.

Week 37

Shasta Head Start Child Development, Inc. Parent / Child Home Activity Record

Child's Name: _____ **Site:** _____ **Mo/Yr:** _____

Check off the time spent on an activity you completed using the Parent-Child Activity sheet, or on any additional special activities you did with your child. We are unable to count daily care giving tasks.

ACTIVITY	SUN			MON			TUES			WED			THUR			FRI			SAT		
	15	30	60	15	30	60	15	30	60	15	30	60	15	30	60	15	30	60	15	30	60
FLD - Foundational and Language Development																					
Reading																					
Story Telling																					
Visit Library																					
Writing																					
M - Math and SCI - Science																					
Counting																					
Shapes																					
Sorting																					
Observe Nature																					
Use Senses																					
Problem Solving																					
PD - Physical Development and HLTH - Health																					
Large Motor (jump,hop,run)																					
Small Motor (cut paper,write,color)																					
Cooking																					
Grocery Store																					
Self Care Tasks																					
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Feelings																					
Help Clean Up																					
Games with Rules																					
ATL-Approaches to Learning Including Creative Art																					
Color, Paint,																					
Music, Dance, Drama																					
Additional Activities																					
Book Bags																					
Child Goals																					
Child Observation																					
Total																					

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Parent Signature: _____ **Date:** _____

Shasta Head Start Staff Purposes Only

Grand Total Hours

(Total minutes ÷ 60) Staff's Signature:

Date

Parent Observations

Please choose an activity and write an observation about your child on the lines below. Avoid using words that give your opinion, (She was “happy.” He “wanted” the toy). Instead use words that describe the facts of what your child is doing or saying, (She smiled. He picked up the toy). Remember to write your child’s name and the date on the observation. Turn in completed observations along with your parent/child activity records to your child’s teacher.

Sample: 09.17.26 - *“Today when I picked up Jasmine at school, she ran to greet me with a smile on her face.”*

Observation: _____

Parent /Child Activities

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
<p>Take a pretend magic carpet ride. What do you see? FLD</p> <p>Help your parent wash the dishes. PD</p>	<p>Pretend to be a large caterpillar walking on the floor. ATL</p> <p>Help your parent sort the laundry. Talk about the color of the clothes. M</p>	<p>Show your parent all the ways you can play with a ball. PD</p> <p>Find a picture of an animal that you don’t know. Ask someone questions to problem solve, where does it live and what does it eat? SCI</p>	<p>Throw or kick a ball across a masking tape line. PD</p> <p>Have your parent read you a book. FLD</p>	<p>Play “Hot Potato” SED</p> <p>Have your parent slice an onion. Take the rings apart. Use your senses to tell how it feels, smells, tastes? What favorite foods have onion in them? SCI</p>
<p>Take a bath and play with measuring cups. M</p>	<p>Ask your parent to tell you a story. FLD</p>	<p>When helping cook dinner, look at the food labels for letters. FLD</p>	<p>Use chalk to make a hopscotch. Have your parent number it. M</p>	<p>Go for a walk. Can you read any signs? PD</p>

Ask a parent to read your Raising a Reader book to you.

Shasta Head Start Child Development, Inc. Parent / Child Home Activity Record

Child's Name: _____ **Site:** _____ **Mo/Yr:** _____

Check off the time spent on an activity you completed using the Parent-Child Activity sheet, or on any additional special activities you did with your child. We are unable to count daily care giving tasks.

ACTIVITY	SUN			MON			TUES			WED			THUR			FRI			SAT		
	15	30	60	15	30	60	15	30	60	15	30	60	15	30	60	15	30	60	15	30	60
FLD - Foundational and Language Development																					
Reading																					
Story Telling																					
Visit Library																					
Writing																					
M - Math and SCI - Science																					
Counting																					
Shapes																					
Sorting																					
Observe Nature																					
Use Senses																					
Problem Solving																					
PD - Physical Development and HLTH - Health																					
Large Motor (jump, hop, run)																					
Small Motor (cut paper, write, color)																					
Cooking																					
Grocery Store																					
Self Care Tasks																					
SED- Social Emotional Development,																					
Feelings																					
Help Clean Up																					
Games with Rules																					
ATL-Approaches to Learning Including Creative Art																					
Color, Paint,																					
Music, Dance, Drama																					
Additional Activities																					
Book Bags																					
Child Goals																					
Child Observation																					
Total																					

In order for teachers to truly understand your child's strengths, interests, and goal areas, it is helpful for parents to write observations of their child participating in suggested activities and turn those observations in to the child's teacher. Thank you for your help!

Parent Signature: _____ **Date:** _____

Shasta Head Start Staff Purposes Only

Grand Total Hours

(Total minutes ÷ 60) Staff's Signature:

Date

Parent Observations

Please choose an activity and write an observation about your child on the lines below. Avoid using words that give your opinion, (She was "happy." He "wanted" the toy). Instead use words that describe the facts of what your child is doing or saying, (She smiled. He picked up the toy). Remember to write your child's name and the date on the observation. Turn in completed observations along with your parent/child activity records to your child's teacher.

Sample: 09.17.26 - "Today when I picked up Jasmine at school, she ran to greet me with a smile on her face."

Observation: _____

Parent /Child Activities

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
In your neighborhood, pick up five pieces of trash and throw them in a trash can. SED	Paint your house using a bucket of water and a paint brush. PD	Practice buckling your seatbelt with your parent. HLTH	Practice running in place, then put your hand on your heart and feel. PD	Use a broom handle to play limbo. SED
Paint on newspaper with watercolors or food coloring. ATL	Finger paint with shaving cream and paper. ATL	At dark, go outside and sing , "Twinkle, Twinkle, Little Star" with your parent. FLD	Name things that are hot and cold . SCI	With your parent, practice two ways of getting out of your house in case of fire. HLTH
Have your parent print your first name for you. FLD	Using paper and crayons, practice writing . FLD	Ask your parent to read you a bedtime story, talk about how the characters are feeling . SED	Count the number of eyes in your house. M	Find circles in your kitchen. M

Ask a parent to read your Raising a Reader book to you.

Shasta Head Start Child Development, Inc. Parent / Child Home Activity Record

Child's Name: _____ **Site:** _____ **Mo/Yr:** _____

Check off the time spent on an activity you completed using the Parent-Child Activity sheet, or on any additional special activities you did with your child. We are unable to count daily care giving tasks.

ACTIVITY	SUN			MON			TUES			WED			THUR			FRI			SAT		
	15	30	60	15	30	60	15	30	60	15	30	60	15	30	60	15	30	60	15	30	60
FLD - Foundational and Language Development																					
Reading																					
Story Telling																					
Visit Library																					
Writing																					
M - Math and SCI - Science																					
Counting																					
Shapes																					
Sorting																					
Observe Nature																					
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Color, Paint,																					
Music, Dance, Drama																					
Additional Activities																					
Book Bags																					
Child Goals																					
Child Observation																					
Total																					

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Parent Signature: _____ **Date:** _____

Shasta Head Start Staff Purposes Only

Grand Total Hours

(Total minutes ÷ 60) Staff's Signature:

Date

Parent Observations

Please choose an activity and write an observation about your child on the lines below. Avoid using words that give your opinion, (She was “happy.” He “wanted” the toy). Instead use words that describe the facts of what your child is doing or saying, (She smiled. He picked up the toy). Remember to write your child’s name and the date on the observation. Turn in completed observations along with your parent/child activity records to your child’s teacher.

Sample: 09.17.26 - *“Today when I picked up Jasmine at school, she ran to greet me with a smile on her face.”*

Observation: _____

Parent /Child Activities

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
Take a short jog with your parents. HLTH	Rake a big pile of leaves and jump in them. Rake them again and do it over and over. PD	Draw a picture for your parent. ATL	Collect 10 rocks; use them for adding and subtracting . M	Pretend to be a scarecrow moving your arms and legs stiffly as they “blow in the wind.” PD
Go on a circle hunt around the house. Now spin yourself in a circle. M	Play “I Spy” with your parent. SED	Practice how to safely walk across a parking lot. HLTH	Ask your parent to teach you one of their favorite songs from their childhood. FLD	Taste a lemon and a cracker. Which tastes sour? SCI
Visit the library and check out books . FLD	Read a book with someone in your family. FLD	Use forks and spoons to make a pattern . Fork, spoon, fork, spoon. M	Find circles in your living room, draw and color them in. ATL	Have your parent print your name five times and put it around your room. FLD

Ask a parent to read your Raising a Reader book to you.

Shasta Head Start Child Development, Inc. Parent / Child Home Activity Record

Child's Name: _____ Site: _____ Mo/Yr: _____

Check off the time spent on an activity you completed using the Parent-Child Activity sheet, or on any additional special activities you did with your child. We are unable to count daily care giving tasks.

ACTIVITY	SUN			MON			TUES			WED			THUR			FRI			SAT		
	15	30	60	15	30	60	15	30	60	15	30	60	15	30	60	15	30	60	15	30	60
FLD - Foundational and Language Development																					
Reading																					
Story Telling																					
Visit Library																					
Writing																					
M - Math and SCI - Science																					
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ATL-Approaches to Learning Including Creative Art																					
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Book Bags																					
Child Goals																					
Child Observation																					
Total																					

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Parent Signature: _____ Date: _____

Shasta Head Start Staff Purposes Only

Grand Total Hours

(Total minutes ÷ 60) Staff's Signature:

Date

Parent Observations

Please choose an activity and write an observation about your child on the lines below. Avoid using words that give your opinion, (She was “happy.” He “wanted” the toy). Instead use words that describe the facts of what your child is doing or saying, (She smiled. He picked up the toy). Remember to write your child’s name and the date on the observation. Turn in completed observations along with your parent/child activity records to your child’s teacher.

Sample: 09.17.26 - “Today when I picked up Jasmine at school, she ran to greet me with a smile on her face.”

Observation: _____

Parent /Child Activities

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
<p>Walk around the house on your knees. PD</p>	<p>Create family rules and write them on paper. HLTH</p>	<p>With your parent, search the neighborhood for the largest and smallest car. PD</p>	<p>Sit on the floor and roll a ball back and forth with your parent. PD</p>	<p>Pretend to be popcorn popping in a pan. PD</p>
<p>Make chalk out of Plaster of Paris and water in paper cups. ATL</p>	<p>Start a new family tradition, such as a monthly special breakfast. SED</p>	<p>Make binoculars out of paper towel rolls. What do you see? ATL</p>	<p>Take an ice cube and sprinkle salt on it. Watch and see what happens? SCI</p>	<p>Put a sock on your hand to make a puppet and perform a puppet show for your family. ATL</p>
<p>Make a book about an animal you like. FLD</p>	<p>Make a pattern using leaves and rocks. Leaf, rock, leaf, rock. M</p>	<p>Ask your parent to read you a short magazine article. FLD</p>	<p>Find out the first letter of your name. Have someone ask you later what it is. FLD</p>	<p>Name 3 feelings. Make a face that matches each feeling. SED</p>

Ask a parent to read your Raising a Reader book to you.

Shasta Head Start Child Development, Inc. Parent / Child Home Activity Record

Child's Name: _____ **Site:** _____ **Mo/Yr:** _____

Check off the time spent on an activity you completed using the Parent-Child Activity sheet, or on any additional special activities you did with your child. We are unable to count daily care giving tasks.

ACTIVITY	SUN			MON			TUES			WED			THUR			FRI			SAT		
	15	30	60	15	30	60	15	30	60	15	30	60	15	30	60	15	30	60	15	30	60
FLD - Foundational and Language Development																					
Reading																					
Story Telling																					
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Parent Signature: _____ **Date:** _____

Shasta Head Start Staff Purposes Only

Grand Total Hours

(Total minutes ÷ 60) Staff's Signature:

Date

Parent Observations

Please choose an activity and write an observation about your child on the lines below. Avoid using words that give your opinion, (She was “happy.” He “wanted” the toy). Instead use words that describe the facts of what your child is doing or saying, (She smiled. He picked up the toy). Remember to write your child’s name and the date on the observation. Turn in completed observations along with your parent/child activity records to your child’s teacher.

Sample: 09.17.26 - *“Today when I picked up Jasmine at school, she ran to greet me with a smile on her face.”*

Observation: _____

Parent /Child Activities

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
<p>Take a nature walk. Search for brown seeds, twigs and other nature items to glue on a square piece of cardboard. PD</p> <p>Tell your parent what you want to be when you grow up. What does this person do? SED</p> <p>Ask your parent to show you how to write the first letter in your name. FLD</p>	<p>Turn on the radio and dance with your parent. ATL</p> <p>Cut out pictures from a grocery sales ad and glue to family shopping list. PD</p> <p>Count the number of door knobs in your house. M</p>	<p>With your parent make feelings faces try happy, sad, mad and surprised. SED</p> <p>Ask your parent to eat dinner on a blanket and help make dinner to eat picnic style. HLTH</p> <p>Read a book to yourself by looking at the pictures. FLD</p>	<p>Crawl backward like a scorpion. PD</p> <p>Ask your parent why we wear seatbelts in a car. HLTH</p> <p>In your room, go on a square hunt. M</p>	<p>Spin like a top. PD</p> <p>Ask your parents what seeing-eye dogs do. SED</p> <p>Using a plate, put sand, flour or salt. Use your fingers to write. FLD</p>

Ask a parent to read your Raising a Reader book to you.

Shasta Head Start Child Development, Inc. Parent / Child Home Activity Record

Child's Name: _____ **Site:** _____ **Mo/Yr:** _____

Check off the time spent on an activity you completed using the Parent-Child Activity sheet, or on any additional special activities you did with your child. We are unable to count daily care giving tasks.

ACTIVITY	SUN			MON			TUES			WED			THUR			FRI			SAT		
	15	30	60	15	30	60	15	30	60	15	30	60	15	30	60	15	30	60	15	30	60
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Parent Signature: _____ **Date:** _____

Shasta Head Start Staff Purposes Only

Grand Total Hours

(Total minutes ÷ 60) Staff's Signature:

Date

Parent Observations

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Sample: 09.17.26 - “Today when I picked up Jasmine at school, she ran to greet me with a smile on her face.”

Observation: _____

Parent /Child Activities

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
<p>Act like a sleepy or mad cat; tell why you are sleepy or mad. SED</p>	<p>Do stretching exercises with your parent. PD</p>	<p>Hop around the house like a hare and crawl around the house like a tortoise. PD</p>	<p>Play a problem solving game by saying, “what would you do if”? <i>ex: If you got lost in the store, what would you do?</i> SED</p>	<p>Hook onto your partner or friend and chug around the house like a train. PD</p>
<p>Have someone help you go through your spices in the kitchen. Talk about how they smell and taste. SCI</p>	<p>Practice counting with ice cubes on a plate. M</p>	<p>With a parent make up a song about vegetables. ATL</p>	<p>Have your parent hide something in a pillowcase and try to figure out what it is by feeling it through the pillowcase. SCI</p>	<p>Add a scent to homemade dough by using lemon, vanilla or peppermint extract. SCI</p>
<p>Go to the library and check out books FLD</p>	<p>Have your parent tell you a childhood story. FLD</p>	<p>With your parent, look for squares around your house. M</p>	<p>Write out the name of your family member and clap out the syllables. FLD</p>	<p>Dance to a fast song, dance to a slow song. ATL</p>

Ask a parent to read your Raising a Reader book to you.

Shasta Head Start Child Development, Inc. Parent / Child Home Activity Record

Child's Name: _____ **Site:** _____ **Mo/Yr:** _____

Check off the time spent on an activity you completed using the Parent-Child Activity sheet, or on any additional special activities you did with your child. We are unable to count daily care giving tasks.

ACTIVITY	SUN			MON			TUES			WED			THUR			FRI			SAT		
	15	30	60	15	30	60	15	30	60	15	30	60	15	30	60	15	30	60	15	30	60
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Parent Signature: _____ **Date:** _____

Shasta Head Start Staff Purposes Only

Grand Total Hours

(Total minutes ÷ 60) Staff's Signature:

Date

Parent Observations

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Sample: 09.17.26 - “Today when I picked up Jasmine at school, she ran to greet me with a smile on her face.”

Observation: _____

Parent /Child Activities

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
Lie on your back and pretend to pedal a bicycle. PD	Look around your house for things that are shaped like circles. Trace them onto a piece of paper. PD	<i>Pick a new food</i> from the grocery store. HLTH	Create a new game and walk around a big circle. Every time the lights go off, change direction. SED	Clean up five items off your bedroom floor. SED
Color fast, color slow. ATL	Have your parent tell you the story about the Tortoise and the Hare or another animal story. FLD	Make crowns and decorate them. ATL	Punch holes around the edge of a paper plate or an old card. Use string or yarn to sew the card. PD	Record a video for someone special. Send it to them. FLD
Complete a puzzle with your parent. M	Ask your parent to read you a book about feelings. SED	Sort the silverware after it is washed. M	Look for triangles in your house. M	Clap your name with your parent. FLD

Ask a parent to read your Raising a Reader book to you.

Shasta Head Start Child Development, Inc. Parent / Child Home Activity Record

Child's Name: _____ **Site:** _____ **Mo/Yr:** _____

Check off the time spent on an activity you completed using the Parent-Child Activity sheet, or on any additional special activities you did with your child. We are unable to count daily care giving tasks.

ACTIVITY	SUN			MON			TUES			WED			THUR			FRI			SAT		
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Parent Signature: _____ **Date:** _____

Shasta Head Start Staff Purposes Only

Grand Total Hours

(Total minutes ÷ 60) Staff's Signature:

Date

Parent Observations

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Sample: 09.17.26 - *“Today when I picked up Jasmine at school, she ran to greet me with a smile on her face.”*

Observation: _____

Parent /Child Activities

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
Jump for joy today, tell what makes you joyous . SED	Use a sock ball to throw at a can. PD	Have your parent create an obstacle course for you to go through. PD	Have your parent beat out drum rhythms on an oatmeal container or a coffee can and dance . ATL	Recite “Jack Be Nimble” and jump over an unlit candle. FLD
Look at a rhyming book with someone. FLD	Give hugs whenever someone says “please” or “thank you.” SED	Hang a piece of paper on the wall and make an art mural . ATL	Make a cheery card and mail it to someone that you love. FLD	Ask your parent to tell you what makes them proud of you. Tell your parent why you are proud of them. SED
Have your parent cut the front of a food box in six pieces to make you a puzzle . M	Use paper and pencil or crayon to write your name. FLD	Ask someone to tell you a story . FLD	Sing “Twinkle, twinkle little star” while washing your hands. HLTH	Count the letters in your name. M

Ask a parent to read your Raising a Reader book to you.

Shasta Head Start Child Development, Inc. Parent / Child Home Activity Record

Child's Name: _____ **Site:** _____ **Mo/Yr:** _____

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ACTIVITY	SUN			MON			TUES			WED			THUR			FRI			SAT		
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Parent Signature: _____ **Date:** _____

Shasta Head Start Staff Purposes Only

Grand Total Hours

(Total minutes ÷ 60) Staff's Signature:

Date

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Sample: 09.17.26 - *“Today when I picked up Jasmine at school, she ran to greet me with a smile on her face.”*

Observation: _____

Parent /Child Activities

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
Brush your hair 25 strokes, have a parent help. PD	Go on an evening walk with your parent and look for things that are white. PD	Make paper balls and toss them into an empty trash basket. PD	Put on some music and march around your house with a musical instrument. ATL	Play “Red Light, Green Light.” SED
Play in the bath with funnels, sieves, cups, and scoops. SCI	Get out some art supplies and be creative with your parent. ATL	Read the story “Stone Soup” and help make some stone soup for dinner. FLD	Make mouse ears with your parent and wear them around the house pretending to be mice. Count how many ears you have altogether now. M	Help your parent put groceries away in the cupboards. PD
Go to the library and check out books. FLD	Play with measuring spoons and water. M	With your parent, write a note to your teacher. Tell them how you feel about your class. SED	Use a recipe with your parent to make something. HLTH	Help someone sort the laundry. M

Ask a parent to read your Raising a Reader book to you.

Shasta Head Start Child Development, Inc. Parent / Child Home Activity Record

Child's Name: _____ **Site:** _____ **Mo/Yr:** _____

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Parent Signature: _____ **Date:** _____

Shasta Head Start Staff Purposes Only

Grand Total Hours

(Total minutes ÷ 60) Staff's Signature:

Date

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Observation: _____

Parent /Child Activities

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
Go for a walk and collect leaves. PD	Bounce a large ball back and forth with your parent. PD	Play “Run, run as fast as you can, you can’t catch me. I’m the Gingerbread Man.” Substitute walk, tiptoe, hop, and skip for run. SED	Exercise to the game “Simon Says.” SED	Play musical chairs. SED
Make up silly words that rhyme . FLD	Read the story of the Gingerbread Man, and then act it out. ATL	Practice putting on your jacket and zipping it. Sing “Zippity Do Dah.” HLTH	Look around your house for red things and sort them by size. M	Role play how to share a toy. See how many solutions to the problem you can come up with? SED
Have someone draw a triangle . Use your finger to trace it. M	Look at a magazine with your parent. FLD	In the shower, write with your finger on the walls. FLD	Gather red and yellow things around your house. Make up a story about them. FLD	Use paper and pencil to practice your name . FLD

Ask a parent to read your Raising a Reader book to you.

Shasta Head Start Child Development, Inc. Parent / Child Home Activity Record

Child's Name: _____ **Site:** _____ **Mo/Yr:** _____

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ACTIVITY	SUN			MON			TUES			WED			THUR			FRI			SAT		
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Parent Signature: _____ **Date:** _____

Shasta Head Start Staff Purposes Only

Grand Total Hours

(Total minutes ÷ 60) Staff's Signature:

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Sample: 09.17.26 - *“Today when I picked up Jasmine at school, she ran to greet me with a smile on her face.”*

Observation: _____

Parent /Child Activities

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
Go on an evening walk and look for orange items. PD	Dance like a scarecrow. APL	Use a stick to hammer golf tees into Styrofoam. PD	Pretend to swim like a fish, fly like a bird, and crawl like a bug. ATL	Wear a pair of your parent’s shoes around the house. Is it hard to walk ? PD
Glue rice on a piece of colored paper to make creative art . ATL	Decorate a paper sack for your parent to use for a litter bag in the car or in their room. SED	Look around the house for things that are bigger than you. M	Look for three green vegetables in the grocery store . HLTH	Use pieces of torn paper and glue to make a picture . ATL
Count the spoons in your house. M	Look around your house for numbers . M	Ask someone to tell you a story about a time they felt sad. SED	Read a book with your parent. FLD	Ask someone to show you what a word is and what it means. FLD

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Shasta Head Start Child Development, Inc. Parent / Child Home Activity Record

Child's Name: _____ Site: _____ Mo/Yr: _____

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Parent Signature: _____ Date: _____

Shasta Head Start Staff Purposes Only

Grand Total Hours

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Observation: _____

Parent /Child Activities

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
<p>Act out the nursery rhyme “The Three Billy Goats Gruff.” ATL</p> <p>Problem solve different ways to drop clothes pins into a jar. SCI</p> <p>Go to the library and check out books. FLD</p>	<p>Gobble and strut like a turkey. PD</p> <p>Collect different lids from containers; sort them by size and color. M</p> <p>Make and send a card to someone. FLD</p>	<p>Play “Ring Around the Rosey.” SED</p> <p>Show your child how to cut with scissors safely. Let them practice. PD</p> <p>Read a book to your stuffed animal . FLD</p>	<p>Walk sideways like a crab. PD</p> <p>Go outside and look for bugs. Watch how they move. SCI</p> <p>Use the front of a greeting card cut in 8 pieces to make a puzzle. M</p>	<p>Dance with scarves tied to your arms. ATL</p> <p>Mix drops of yellow and blue food coloring in a glass of water. What happens? SCI</p> <p>Go on a circle hunt. How many can you find? M</p>

Ask a parent to read your Raising a Reader book to you.

Week 49

Shasta Head Start Child Development, Inc. Parent / Child Home Activity Record

Child's Name: _____ Site: _____ Mo/Yr: _____

Check off the time spent on an activity you completed using the Parent-Child Activity sheet, or on any additional special activities you did with your child. We are unable to count daily care giving tasks.

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Parent Signature: _____ Date: _____

Shasta Head Start Staff Purposes Only

Grand Total Hours

(Total minutes ÷ 60) Staff's Signature:

Date

Parent Observations

Please choose an activity and write an observation about your child on the lines below. Avoid using words that give your opinion, (She was “happy.” He “wanted” the toy). Instead use words that describe the facts of what your child is doing or saying, (She smiled. He picked up the toy). Remember to write your child’s name and the date on the observation. Turn in completed observations along with your parent/child activity records to your child’s teacher.

Sample: 09.17.26 - *“Today when I picked up Jasmine at school, she ran to greet me with a smile on her face.”*

Observation: _____

Parent /Child Activities

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
<p>Ice skate in your socks on a bare floor. PD</p>	<p>Play a memory game. SED</p>	<p>Make a tunnel out of blankets and chairs. PD</p>	<p>Go on a clean-up walk around your neighborhood. Bring a bag for trash. SED</p>	<p>Follow your parent and run in the shape of a square. PD</p>
<p>Mix drops of red and yellow food coloring in a glass of water. What color does it make? What else can you add? SCI</p>	<p>Talk about the sounds that a deer, squirrel and owl make. Now act like each animal. ATL</p>	<p>Problem solve how to drop rocks into a cup of water without the water overflowing. SCI</p>	<p>Tell your parent a recipe of a favorite dessert. Is it good for you? HLTH</p>	<p>Set up the dinner table. SED</p>
<p>Take a night walk with your parent and count the houses with porch lights on. M</p>	<p>Have someone help you write and send a thank you card. FLD</p>	<p>Read a book with your parent. FLD</p>	<p>Go on a walk and look for a deer, squirrel or owl. SCI</p>	<p>Gather yellow and green things from your house. Mix them. Sort them. M</p>

Ask a parent to read your Raising a Reader book to you.

Shasta Head Start Child Development, Inc. Parent / Child Home Activity Record

Child's Name: _____ Site: _____ Mo/Yr: _____

Check off the time spent on an activity you completed using the Parent-Child Activity sheet, or on any additional special activities you did with your child. We are unable to count daily care giving tasks.

ACTIVITY	SUN			MON			TUES			WED			THUR			FRI			SAT		
	15	30	60	15	30	60	15	30	60	15	30	60	15	30	60	15	30	60	15	30	60
FLD - Foundational and Language Development																					
Reading																					
Story Telling																					
Visit Library																					
Writing																					
M - Math and SCI - Science																					
Counting																					
Shapes																					
Sorting																					
Observe Nature																					
Use Senses																					
Problem Solving																					
PD - Physical Development and HLTH - Health																					
Large Motor (jump, hop, run)																					
Small Motor (cut paper, write, color)																					
Cooking																					
Grocery Store																					
Self Care Tasks																					
SED- Social Emotional Development,																					
Feelings																					
Help Clean Up																					
Games with Rules																					
ATL-Approaches to Learning Including Creative Art																					
Color, Paint,																					
Music, Dance, Drama																					
Additional Activities																					
Book Bags																					
Child Goals																					
Child Observation																					
Total																					

In order for teachers to truly understand your child's strengths, interests, and goal areas, it is helpful for parents to write observations of their child participating in suggested activities and turn those observations in to the child's teacher. Thank you for your help!

Parent Signature: _____ Date: _____

Shasta Head Start Staff Purposes Only

Grand Total Hours

(Total minutes ÷ 60) Staff's Signature:

Date

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Observation: _____

Parent /Child Activities

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
Play different kinds of music (soft, loud, slow, and fast) and dance. Freeze when music stops. ATL	Build a fort from pillows, blankets, and cushions and play inside. PD	Find something smooth and something rough . SCI	Pretend to be a kangaroo and a frog. How do they hop? Is it different or the same? ATL	Pretend to be an astronaut walking on the moon. ATL
Help your parent choose something for dinner. HLTH	Snuggle with your parent and talk about why you love them. SED	Make English muffin pizzas for a snack. HLTH	Observe the weather and draw what you see. SCI	Stuff celery with peanut butter and top with raisins. Eat! HLTH
Have someone tell you a story about a time when they were excited! SED	Count the clocks in your house. M	Find out the names of all the letters in your name. FLD	Read a bedtime story with your parent. FLD	Find 5 rectangles . M

Ask a parent to read your Raising a Reader book to you.