

**Toddler Needs and Services Plan**  
(Update Every Three Months – Licensing Regulation 101419.3 & 101417)

Child's Name: \_\_\_\_\_ Birth Date/Age: \_\_\_\_\_

Parent(s) Name: \_\_\_\_\_

Primary Caregiver: \_\_\_\_\_

**Sleeping Routine**

What is your child's sleeping arrangement at home? \_\_\_\_\_

Pre-nap Routines/Rituals: \_\_\_\_\_

How many naps per day (typical): \_\_\_\_\_ Time and Length of naps: \_\_\_\_\_

What position does your child prefer? \_\_\_\_\_

Waking behavior/routine: \_\_\_\_\_

Special considerations: \_\_\_\_\_

**Comforting/Self-soothing**

Does your child have a security object? Yes No If yes, what? \_\_\_\_\_

What does your family call it? \_\_\_\_\_

Does your child use a pacifier? Yes No What does your family call it? \_\_\_\_\_

Other information? \_\_\_\_\_

**Mealtime Routine**

Allergies: \_\_\_\_\_

Food likes and eating preferences: \_\_\_\_\_

Food dislikes or eating challenges: \_\_\_\_\_

Special diet/requests: \_\_\_\_\_

Special considerations: \_\_\_\_\_

**Bottle/Cup Routines**

Does your child use a bottle at home? Yes/No If yes, how often? \_\_\_\_\_

Cup Type: cup with lid or open cup

Milk: Yes/No Type: \_\_\_\_\_ Amount per serving: \_\_\_\_\_

Juice: Yes/No Type: \_\_\_\_\_ Amount per serving: \_\_\_\_\_

**Diapering/Toilet Learning Routines**

Will you use the diapers we provide, or do you prefer to supply your own diapers?

What size diaper/pull-up does your child need? \_\_\_\_\_

Which type of under garments for toilet learning? Pull-ups OR Cloth underpants

What cues does your child use to indicate a need to use the toilet? \_\_\_\_\_

Any special routines that your family has during toilet learning (books, songs, words, etc.)?

If your child needs diaper ointment, you must sign the Diaper Ointment permission form.  
Please specify the brand of ointment \_\_\_\_\_

**Other Information or Services**

Does your child have any services that are different from those provided by the center's routine program, i.e., special exercises, materials, accommodation of services?

\_\_\_\_\_

\_\_\_\_\_

The Needs and Services Plan will be updated every three months or sooner if requested by parent or guardian until the child leaves the toddler program.

**Parent Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Staff Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Placement in Toddler Component**

Section 101805 (b) of the Community Care Licensing Manual, Title 22, Division 12 states (1) A child younger than 18 months of age shall not be moved into the toddler component. A child who is 18 months of age or older shall not be required to be placed in the toddler component. (2) Parents shall give written permission for the placement of their children in the toddler component, with the written permission maintained in the facility's file for the child. By signing below, parents are giving permission for their child to be placed in the toddler component.

**Parent Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Staff Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Shasta Head Start Child Development, Inc.

**Update Notes:** \_\_\_\_\_

**Date:** \_\_\_\_\_ **Change:** Yes \_\_\_ No \_\_\_ **Parent Initials:** \_\_\_\_\_

**Update Notes:** \_\_\_\_\_

**Date:** \_\_\_\_\_ **Change:** Yes \_\_\_ No \_\_\_ **Parent Initials:** \_\_\_\_\_

**Update Notes:** \_\_\_\_\_

**Date:** \_\_\_\_\_ **Change:** Yes \_\_\_ No \_\_\_ **Parent Initials:** \_\_\_\_\_