



## HB HS Inkind Record Report

Child's Name \_\_\_\_\_ HS Area # \_\_\_\_\_ Date: \_\_\_\_\_  
 (first & last)

Name of Activity	Aspects of Development Covered									Teaching Time							
We are asking parents to work 60 minutes per day teaching their child using the following adult directed activities. Please limit each activity to 30 minutes or less. <b>Please return this form every week to your teacher.</b>	Colors/shapes	Numbers/counting	Physical development	Listening/Words	writing/drawing	observation/exploration	letters/pre-reading skills	creative arts/movement	Self-help/safety/feelings	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday	Total Time
	Weekly Goal Chart 																
Men-in-PACT 																	
Reading & Looking at Books																	
ESR goals (List specific goal)																	
MVPA Physical Activities																	
Other such as: games, art,cooking,self-help,etc																	
Literacy Bags/Literacy Binder																	

### Parent Involvement with PACT Head Start

Making home-made toys/materials for use with PACT program.									
Cutting out laminated die-cuts									
Researching and collecting ideas/activities/materials for HV & SA.									
Reading Parent Chat, Handouts, Resource books, etc.									
Looking for information/recipes for the Parent Chat Newsletter.									
Parent Observation Checklist									

Total Number of Days: \_\_\_\_\_ Home Visit in Home \_\_\_ Yes \_\_\_ No  
 Hours \_\_\_\_\_ Minutes \_\_\_\_\_  
 From Date: \_\_\_\_\_ To Date: \_\_\_\_\_ Total time donated this week.

**Guardian/Parent Signatures:** \_\_\_\_\_ **Signatures of other adults working with child:** \_\_\_\_\_

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

By signing this document staff is verifying that staff have reviewed the time & activities listed & have determined that all times are accurate and reasonable for this family. Attach Completed Form to HVR weekly.