



Child Observation Report

*** Please make sure that all spaces on this form are filled out. Keep this form in the Childs Red File and submit a copy to the agency. Any pictures taken should also be attached.

Name of Child: _____ Date of Birth: _____

Date of Observation: _____ Time: _____

Educator's Name: _____ Phone number: _____

Parent/Caregiver Contact Notified: _____

Date: _____ Time: _____ (Name) Phone number: _____

How was the parent notified? Phone in writing in person

Details of Observation:

Pictures taken-sent to parent: _____

Comments from child when questioned about observation (if child is verbal):

Was there anyone else present at the time of the observation? Yes No

If yes then who? _____

Additional information/ Comments related to the observation:

Educator Signature

Date

Parent Signature

Date