

The following form(s) can be filled in on-line, then printed for signatures and mailing or faxing.

To begin filling out the forms in Acrobat Reader, make sure the '**hand**' tool is selected then click on a line or in a box and begin typing. Check boxes can be clicked on or off.



# Spokane County Head Start/Early Head Start INITIAL CHILD INDIVIDUAL PLAN (CIP) – I/T CENTER-BASED

Name \_\_\_\_\_ Teacher \_\_\_\_\_

Site \_\_\_\_\_ DOB \_\_\_\_\_ Current age \_\_\_\_\_

| Creative Curriculum |        | Social Emotional | Cognitive Dev | Physical Dev | Green = Strength, Tscore 60 and above<br>Blue = Typical, Tscore between 41 and 59<br>Amber = Concern, Tscore 40 and below | Most recent developmental screen results:<br><br>Date: |
|---------------------|--------|------------------|---------------|--------------|---|--|
|                     | Fall   |                  |               |              |   |  |
|                     | Spring |                  |               |              |   |  |

|   |   |
|---|---|
| <b>Summary of Current Abilities and Interests</b> | <b>Social Emotional Development:</b> Learning about self, others and feelings |
|   | <b>Cognitive Development:</b> Acquiring thinking skills                       |
|   | Learning about communication  |
|   | <b>Physical Development:</b> Learning about moving and doing                  |

|                           |                                      |
|---------------------------|--------------------------------------|
| <b>IFSP / Focus Goals</b> | 1.                                   |
|                           | 2.                                   |
|                           | Connecting goals to home experiences |

**Transition information for 2-1/2 years and older, or as appropriate**

Transition to \_\_\_\_\_  Interpreter support recommended (primary language) \_\_\_\_\_

Health plan in place  Transition plan in place

I give permission for this form to be shared at my child's new provider/school  Yes  No

Other home visit/conference information is on back of page

Staff signature \_\_\_\_\_

Staff signature \_\_\_\_\_

Parent signature \_\_\_\_\_

Date \_\_\_\_\_

- 1st Home visit
- 2nd Home visit
- 1st Conference
- 2nd Conference