

New Road Nursery – Caterpillars Daily Record Sheet

1. Parents Section please fill in this top section, thank you

Child's Name Today's date Arrival Time

Has your child had breakfast today? Yes/No* Time
Or Time and amount of last bottle feed? Amount Time

What time did your child wake up? How did they sleep?

Have you given them any medication since midnight? Yes/No Time.....Amount.....

Reason.....Name of medication.....

Any medication to be given at nursery? Yes/No (if yes please fill in additional medicine consent form)

For weaning babies only - Food to be given Nursery or Own

Is there any other information, particular events or occasions which we could further extend by talking about in nursery? Or which would help the nursery to enable your child to have a good day?

2. Nursery Section- Your Key Person today is AM..... PM.....

Key Person's comments, today we....

Snack time: Lunch time: Tea time:

Ate well/ little Ate well/ little Ate well/ little
Drink Drink Drink

.....oz of milk given at.....By.....witnessed by.....
.....oz of milk given at.....By.....witnessed by.....

Your child slept between:

Nappies were checked at....
Dry Wet Soiled

Nappies needed Yes please / No thank you Wipes needed Yes please/ No thank you

Key person signature

3. Parent/ Carer signature.....Collection time.....

*Delete as appropriate
E:\Master Files\Nursery Forms\Caterpillars daily record sheet.doc