

Site/Class:

# Sacramento City USD Early Head Start EHS IN-KIND HOME ACTIVITY RECORD

Teacher:

Month/Year:

Child's Name:

Use letter		DRDP or HELP #	Week #1-5
A	Use feeling words		

Please write on this calendar any time spent on teacher circled curriculum activities or events each day using a letter from the box (on the left) and the number of minutes as in the example below.

Activity letter on left, time spend on activity in minutes on right.

A 15

H			
I			
J	Naming, tasting, cooking, nutritious foods		
K	Eating meals together as a family		
L			
M			
N	Sing songs, recite nursery rhymes, do finger plays		
O	Read books together		
P			
Q			
R	Name objects, body parts, colors		
S	Practice using words or signs to express wants or needs		
T	Use positive descriptive acknowledgement – "You walked up the steps!"		
U			
V			
W	Provide back and tummy time		
X	Let your child draw with crayons and non-toxic paint/paintbrushes		
Y			
Z			



This represents an accurate account of time I have spent on assigned curriculum activities.

\_\_\_\_\_  
Parent/guardian Signature and Date      Teacher's Signature and Date

Relationship (      ): Mother, Father, Non-Parent, Sibling

\_\_\_\_\_ Hours \_\_\_\_\_ Minutes \_\_\_\_\_