Education File Monitoring- Education Sections

Center_____ Teacher_____ Date File Monitored_____

Child's Name (first initial/last name)	Conf. Of Record	Ed/Dis Check-list	BDI Perm	TSG Perm	Virtual Perm/ zoom	Consent photo/ Video/ Social media	Commun. To/from Paretnt	2nd Parent Conf.	1st Parent Conf.	2nd Home Visit	1st Home Visit	School Attend/ Transition	TSG Spring Check Point	TSG Winter Check Point	TSG Fall Check Point	Child Ind. Plan

Instructions: If the items above are in the file and complete, place a check mark in the box. List dates for parent conferences and home visits.
Submit this form along with your Monitoring Form. 8.22nt