

Preschool



Helping Families Grow Healthy Children.
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MONTHLY OBSERVATION NOTES

Please return by _____

Thank you ☺

Child _____

Provider (Print) _____

Provider Signature _____

Date: _____

Completed by FCCH Provider

Please provide detailed observations.

Name three skills or strengths this child has worked on or mastered this month

Recognizes their name in print
Counts from 1-10
Listens to story from beginning to end
Uses words like happy, sad, and mad.
Makes letter like symbols for their name

Name three skills or areas this child is currently working on

Naming shapes in the environment
Tracing the letters of their name
Copying ABAB patterns
Engaging in back and forth conversation on a specific topic

Comments, quotes or additional observations

Example Jace likes to pretend read to others.
Leah likes to help with snack
Brian has difficulty during transitions

Please return by _____, thank you ☺

Return to ECE Specialist _____