Partnership FOR CHILDREN
OF CUMBERLAND COUNTY

2021-2022 NC Pre-K Student File Review Checklist

Site Name: _____ **Student's DOB:** _____

Student Name: _____
First **MI** **Last**

□ Enrollment Date: _____ (include first month's attendance sheet as verification)

□ Eligibility Form (Scorecard)

□ Enrollment Handbook Forms

□ Childcare Policy Forms

□ Child Health Assessment (Physical) _____ If not completed, due by _____

□ Dental Screening _____ If not completed, due by _____

□ Immunization Record (Shot record)

□ Developmental Screening
ASQ-3 _____ ASQ:SE2 _____

□ TS Gold Assessments
Fall (Nov) _____ Winter (Feb) _____ Spring (May) _____

□ Documentation of Risk Factors (If applicable)

□ IEP (If applicable)

□ Legal Documentation (If applicable)

□ Correspondence (i.e. Letters from parents, Doctor's notes)

Site Administrator Conducting File Enrollment Check (Initial): _____ Date: _____

PFC Staff Conducting File Review (Sign): _____Date: _____

Site Administrator Conducting File Closeout Review (Initial) _____ Date: _____

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NORTH CAROLINA NC Pre-K Prekindergarten Program

a partner in the Smart Start network

Be the Driving Force.