

CENTER STAFF MEETING FORMAT

Date _____ **Center** _____

Start Time: _____ Time Concluded: _____

Staff Attending _____

Regular Business
Child Safety/Supervision Issues/Training _____

Bus Route Issues _____

Monthly Calendars _____

Field Trips/Event Planning _____

Unit Preparation/Materials _____

Training Follow-up _____

Policies/Procedures _____

Monthly Report/Memos _____

Policy Council Meeting Review _____

Screenings _____

Fluharty _____

Assessment Schedule _____

Conference/Home Visit due date _____

Tracking _____

Child or Parent Concerns _____

Dental Status of Children _____

Phys Exams Status of Children _____

Environmental Inspection(s) _____

Licensing Visit/Issues _____

In-Kind _____

Staff Attendance _____

Update Staff Calendars _____

Volunteers/TB test needs _____

Self Assessment _____

Additional Business-Record on and attach a separate sheet of paper.

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Center_____