



Foster Grandparent Program Child Assignment Plan

FOCUS on Senior Citizens: 1920 6th Street, Tuscaloosa AL 35401
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We appreciate your participation and support of the Foster Grandparent Program.

Child (or number): _____ School/Work Site: Head/Start, Pre-School, Kindergarten
(Circle one)

Foster Grandparent: _____ Supervisor: _____
(Signature) (Signature)

COMPLETE FOR CHILD WHO NEEDS A FOSTER GRANDPARENT

(FAX, E-MAIL OR MAIL THIS FORM TO Foster Grandparent Program)

Today's Date: _____

List child's skills, abilities, or behaviors to be improved by the assignment of Foster Grandparent as tutor/mentor.

Social / Emotional Development:

Sense of Self: _____

Responsibility for Self and Others: _____

Prosocial Behavior: _____

Physical Development:

Gross Motor: _____

Fine Motor: _____

Cognitive Development:

Learning and Problem Solving: _____

Logical Thinking: _____

Representation and Symbolic Thinking: _____

Language Development:

Listening and Speaking: _____

Reading and Writing: _____

FGP will assist with Disaster Drills (Fire and Tornado):

FILL OUT in January or April when form is returned to you

Date: of Evaluation: _____

Please rate how much the child changed on each of the target dimensions listed at the left using the following scale.

1 = significantly decreased; 2 = decreased; 3 = neither decreased nor improved; 4 = improved; 5 = significantly improved.

1 2 3 4 5

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1 2 3 4 5

1 2 3 4 5

Yes

No

CONFIDENTIALITY: The child's complete name is not required on the Child Care Plan. First name only or an assigned number (known only to the Foster Grandparent and teacher or supervisor) may be used instead.