



**WCMCA Head Start
Socialization/Family Event**



Date:

**Start &
End Time**

Location:

Is this event combined with another class?

Yes

No

How did you notify parents of this event?

List Staff Present:

In Person Meeting - Submit safety checklist also

Virtual Meeting

How many parents/guardians attended?

(If any attended, submit In-Kind form also)

**Developmental Observation Topic (DOT-EHS)/
Topics/Activities:**

Center and Program Updates:

**Policy Council Report
or Summary as Presented:**

Elected Policy Council Representative from your Classroom:

Planning with Parents for next Family Event/Socialization: