

The following form(s) can be filled in on-line, then printed for signatures and mailing or faxing.

To begin filling out the forms in Acrobat Reader, make sure the '**hand**' tool is selected then click on a line or in a box and begin typing. Check boxes can be clicked on or off.



# Spokane County Head Start/ECEAP/EHS INFANT/TODDLER DAILY STAFFING PLAN II

Center:
Room:
Session:
Date:

PRIMARY CARE GIVER ASSIGNMENTS	
GROUP 1	GROUP 2
Staff	Staff
Child	Child
Child	Child
Child	Child
Child	Child

SUGGESTED DAILY SCHEDULE	STAFF	STAFF	STAFF	STAFF/STUDENTS	VOLUNTEERS