

## Child Care Transition Plan

### Moving Child to New Classroom or Caregiver

Facility Name: \_\_\_\_\_ Current Primary Caregiver: \_\_\_\_\_  
 Child Name: \_\_\_\_\_ Parent(s) or Guardian: \_\_\_\_\_  
 Transition Plan Start Date: \_\_\_\_\_ Transition Plan End Date: \_\_\_\_\_

Choose some or all of the following activities.  
 Check each task as completed and enter dates.

#### Transition Activities

**Date Completed**

- Parent/Family Discussion of transition \_\_\_\_\_
- Information given to parents/family about the new classroom and/or primary caregiver. \_\_\_\_\_
- Visiting new classroom or caregiver with current primary caregiver \_\_\_\_\_
- Child's participation in shared activities \_\_\_\_\_
- Other activities to familiarize child with new environment and people:
  - \_\_\_\_\_ \_\_\_\_\_
  - \_\_\_\_\_ \_\_\_\_\_
  - \_\_\_\_\_ \_\_\_\_\_
  - \_\_\_\_\_ \_\_\_\_\_
- Transition date determined is: \_\_\_\_\_ \_\_\_\_\_
- Plan for daily visits \_\_\_\_\_

DATE	TIME	ACTIVITY	ADULTS INVOLVED

*\* Use additional page if needed*

***Ensure parents/family is informed of the transition processes as they are developed and that the transition plan includes activities for making the family feel welcome as well as the child.***