	Teacher:	Date:	Mor	Monday		Tuesday		Wednesday		Thursday		Friday	
		Date	- Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	
	OUND AREA CHECKLIST												
Playground is free from needles, glass, and other sharp objects?													
Play area is free from poisonous/hazardous foliage, sharp branches, and thorns?													
Area is free from bee or wasp nests?													
Are all play equipment is free from sharp edges or points and bolts are tight and not exposed?													
There are no exposed nails or hooks?													
Playground is free of p	ossible tripping hazards?												
INDOOR LARGE MOT	OR SKILL AREA CHECKLIST												
Area is free from hazaı	rdous equipment?												
Toys and equipment a	re free of sharp edges or corners?												
Have tripping hazards													
Are tricycles in good w	orking order?												
RESPONSIBILITY OF	THE HEAD START STAFF												
Are cleaning supplies k	kept away from food storage and locked on	ly accessible to staff?											
•	ts stored out of children's reach?	,											
Is the first aid kit properly equipped and kept in a safe area away from children?													
Are all electrical outlets covered? Check daily.													
If a refrigerator is in the room is it cleaned daily?													
Sanitizing solution locked and labeled corretly?													
ITEMS DONE BY CUS	TODIAL STAFF (CHECKED BY HEAD STA	RT STAFF)											
All furniture is free of b	proken parts, sharp edges, and protruding na	ails?											
Are bathrooms and cleaned and sanitized daily?													
Is garbage and trash empty daily and covered with a lid?													
ls your classroom vacu	· · · · ·												
Windows and glass are in a working order?													
	ms are in working order?												
Classroom lighting is in	<u> </u>												
Sand Table area is swe	•												
MEDICATION ADMIN													
	-to-date? Locked box in refridgerator? Expi	ration date:											
	ne rejected medications policy? (attach copy												
	EAM ASSIGNMENT LIST												
Classroom Sweep													
Nap Time - Count num	ber of children												
	eas to ensure no child left behind												
	cked classroom prior to leaving for the day, I	ights off windows locked											
Comments:	and a section prior to rearing for the day,												
Teacher Signature:	ature.							<u> </u>					
Teacher Assistant Sign	ature:			1		1	1	1		1	ı	ſ	