

RURAL UTAH CHILD DEVELOPMENT

HEAD START AND EARLY HEAD START

Individualization Planning for Families Who Need a Head Start Experience **Beyond Thirty-Six Months**

Name of Child: _____ DOB: _____

Please Complete Each Question	Yes	No
Child is currently ineligible for community based program, i.e. Part B, Child Care,		
Head Start Classroom, etc.		
Demonstrates developmental lags but was found not eligible for Part B.		
Parent has developmental disabilities or intellectual impairment.		
Recent history (< 13 months) of DCFS involvement.		
Lack of social support.		
Family is making progress but continues to need assistance to be on their way to		
self-sufficiency.		
Family has had services less than one year.		
Parent/s experiencing major depression or other significant mental illness.		
Family is interested in continuing Early Head Start services while awaiting		
transition to another program they have applied for.		
Does family usually keep regularly schedule home visits?		
If not is there valid justification for missed visits?		

Date copy given to EHS Enrollment Personnel: _____

Decision has been made to keep child past thirty-six months: yes____ no____

Goals/strategies to be added to FPA to transition child out of RUCD EHS

1.				

2.

Estimated date of exit from RUCD EHS:

EHS Family Educator

Date