

# Shining Stars Academy



Child Development Center

## Infant Schedule

### Parent's Information:

Child's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Mother's Name: \_\_\_\_\_ Work Number: \_\_\_\_\_

Father's Name: \_\_\_\_\_ Work Number: \_\_\_\_\_

Address: \_\_\_\_\_

Emergency Contact \_\_\_\_\_ Phone: \_\_\_\_\_

### Feeding Schedule

Formula: \_\_\_\_\_

Amount: \_\_\_\_\_

Feeding Times: \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_,  
\_\_\_\_\_, \_\_\_\_\_

Strict Schedule: \_\_\_\_\_ or Feed on Demand: \_\_\_\_\_

(Check one of the above)

### Sleeping Schedule

Times: \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_

Length of Naps: \_\_\_\_\_

Position: \_\_\_\_\_

(The North Carolina Law requires child care facilities to place all infants on their backs to sleep. At the advice of the child's physician, Shining Stars Academy Child Development Center may be authorized to use an alternative sleep position for the child due to medical reasons).

Pacifier: Yes \_\_\_\_\_ No \_\_\_\_\_

Any Other Instructions: \_\_\_\_\_

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