

TEACHER NAME _____

SITE _____

OEC STAFF NAME _____

DATE _____

Is at least one (1) daily meal provided that meets state and federal guidelines for young children.

YES or NO

Do children have access to fiction/non-fiction books **and** writing materials when in learning centers; Mark centers or other centers below that contain these materials (*No specific number, just state what you see*)

Are all children were offered vision/hearing screening within 45 days of enrollment.

YES or NO

If no, provide date of scheduled screening:

Library/Books (required): YES or NO

Math/Manipulatives (required): YES or NO

Creative Art (required): YES or NO

Others: YES or NO (*please list*)

***Schedules, if they are not in Share Point get a copy.**

Curriculum used: _____

Physical settings:

Room size: _____ x _____ sq. ft.

Daily/Weekly Lesson Plans:

YES or NO

Feet to Exit: _____

Thematic Unit: _____

Feet to Bathroom: _____

Lesson Plans reflect all MDE Standards:

	Check:	Yes	No
ELA			
Math			
Science			
Social Studies			
Creative Expression			
Physical Development			
Approaches to Learning			
Differentiated Instruction			
Social & Emotional Development			

Closet locks: YES or NO

Closet latches are operable by a child from the inside.

Note/s:

Safety covers on outlets: YES or NO

Toilet door locks: YES or NO

Designed to permit opening of locked door from outside in case of an emergency

Note/s:

Is there appropriate child-size furniture in the classroom:

YES or NO

Notes on lesson plan:

Outdoor space:

Designated area:

YES or NO

List learning centers available:

Library/Books (required): YES or NO

Math/Manipulatives (required): YES or NO

Creative Art (required): YES or NO

Others: YES or NO (*please list*)

Is the area/space shared w/children 6+ simultaneously:

YES or NO

Are there defined boundaries:

YES or NO

Is the area/space developmentally appropriate for 3's & 4's:

YES or NO