

Infant daily report

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Families: please fill in the first section at drop-off. Staff write down each feeding, nap and diaper change as it happens and send this report home at pickup.

Baby

Baby's name _____

Date _____

Caregivers today _____

From home (filled in by the family at drop-off)

Last feeding (time and amount) _____

Last diaper change (time) _____

How your baby slept last night _____

Medicine given at home today (name and time) _____

Anything we should know today _____

Who's picking up, and when _____

Feedings

We feed babies when they show they're hungry, following each baby's feeding plan.

Time	Breast milk, formula or food	Amount	Notes	Staff initials

Sleep

Babies sleep on their backs in their own crib, as our safe sleep policy says.

Fell asleep	Woke up	Placed on back (initials)	Notes

Diapers

Time	Wet	BM (bowel movement)	Dry	Notes (such as a rash)	Staff initials

Mood today

Check all that apply.

- ☐ Happy and playful
- ☐ Calm
- ☐ Fussy
- ☐ Sleepy
- ☐ Not quite themselves

Today's activities

What your baby did today (such as tummy time, music, books or outdoor time)

Something new we noticed _____

Please bring

Supplies running low (such as diapers, wipes, formula, breast milk or extra clothes)

Notes for your family

Notes _____

Health or injury notes (we'll call you right away about anything urgent, and give you an incident report for any injury)

Staff signature _____

Free to use and change, but not legal or medical advice. Check your state's licensing rules and your insurer's requirements, and have a lawyer review any consent or waiver language.

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