



Intake Form Cover Sheet for Child Profiles

CHILD

This cover sheet provides information on translating the Intake and Demographic Form for Child Profiles (printable PDF) into a DAISEY Child Profile. Remember to **search for each child** in DAISEY before creating a new profile to prevent profile duplication.

Note: Mandatory DAISEY questions are preceded by an asterisk (*). Profiles cannot be saved in DAISEY without the answers to these questions.

Child Information

Active Status: This question is not on the Intake Form PDF. Your organization may choose to use this to track if a child is currently enrolled/receiving services (“Active”) or if they discontinued services (“Inactive”). This field provides a way for DAISEY users to sort the child search grid by this status.

Alternate ID: This question is not on the Intake Form PDF. The alternative ID is any alternative identification system that your organization wishes to use. This field does not refer to the automatically generated DAISEY ID number that is assigned to new child profiles upon creation.

Child First Name: The child’s first name. This information is not required. Your organization may identify children by other methods, such as initials or pseudonyms.

Child Last Name: The child’s last name. This information is not required. Your organization may identify children by other methods, such as initials or pseudonyms.

***Child Date of Birth:** The child DOB follows the MM/DD/YYYY format.

***Enrollment Date:** The date (MM/DD/YYYY) that the child began receiving services.

Number of weeks premature: Space is provided for how many weeks premature the child was born. A score of zero denotes not premature.

Discharge Date: This question is not on the Intake Form PDF. The date (MM/DD/YYYY) that the child discontinued receiving services. Leave this field blank if the child is actively receiving services.

Name of primary caregiver: Note: This question is not directly entered in the DAISEY system. Use the information written on the Intake Form to assign a caregiver by clicking “Choose Primary Caregiver” button in the child’s DAISEY profile. ECBG grantees **must** attach a caregiver profile to each child.

***Child’s relationship to primary caregiver:** Check only one box to describe how the child relates to the primary caregiver.

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*Was this child referred to your program by the Department for Children and Families: Select "yes" or "no."

*Does the child have an IEP or IFSP? Check only one box to indicate if the child has an Individualized Education Program (IEP), an Individual Family Service Plan (IFSP), or neither (none).

Child's myIGDI ID: This question is not on the Intake Form PDF. Only fill this out in DAISEY if your organization uses the myIGDI API. If you need more information on the myIGDI API, please email the DAISEY helpdesk.

Contact Information

Address 1, Address 2, City, *County, State, *Zip, and Telephone: Space is provided for all contact info, if gathered.

Child Demographics

*Child Gender: Select "male" or "female".

*Child Ethnicity: Select child's ethnicity. Note: Ethnicity is not the race of the child.

*Child Race: Check all the boxes that describe the child's race.

*Does this child speak a language other than English at home? Select "yes" or "no."

*Child Primary Language: Select the child's primary language. Select "Other" if it is not listed.

Child Insurance Status: Check only one box which corresponds to the child's insurance coverage at the time of intake.

At-Risk Criteria

*Is the child participating in Part B Assistance for Education of All Children with Disabilities? Yes/no field that describes whether the child is participating in Part B Assistance for All Children with Disabilities as provided by the Individuals with Disabilities Education Act (IDEA).

*Is the child participating in Part C Early Intervention services? Yes/no field that describes whether the child is participating in Part C Early Intervention services as provided by the Individuals with Disabilities Education Act (IDEA).