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|  | | | | | | | | | Date: |  | |
| **MY DAY AT PRESCHOOL** | | | | | | | | | | | |
| Child’s Name: | | |  | | | | | | | | |
| **My mood today :** | | | | | | | | | | | |
|  |  | Happy | | |  | Energetic |  | Sad | |  | Tired |
| **Centers I chose to play in today:** | | | | | | | | | | | |
|  |  | Dramatic play | | |  | Blocks |  | Music | |  | Library |
|  |  | Sensory | | |  | Art |  | Writing | |  | Language |
|  |  | Math | | |  | Science |  | Manipulatives and puzzles | | | |
|  |  | Other | |  | | | | | | | |
| **Lunch:** | | | | | | | | | | | |
|  |  | I ate all my lunch | | |  | I ate some lunch |  | I was not hungry so I did not eat lunch | | | |
| **Nap:** | | | | | | | | | | | |
|  |  | I slept | | |  | I rested quietly |  | I had a difficult time resting quietly | | | |
| **Your child needs:** | | | | | | | | | | | |
|  |  | Extra clothes | | |  | Other | | | | | |
| **Special notes from my teacher:** | | | | | | | | | | | |
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