

**RECORD OF HOME VISIT**

**Date of Visit:** \_\_\_\_\_

**Parent(s) Name:** \_\_\_\_\_

**Child's Name:** \_\_\_\_\_ **Birthday:** \_\_\_\_\_ **Age in Mo.** \_\_\_\_\_

**Mentor:** \_\_\_\_\_ **Mentor's Phone** \_\_\_\_\_

**Which Handouts were used?** \_\_\_\_\_

**Which Activities Cards were used?** \_\_\_\_\_

**How did the parent(s) respond to the hand-outs and to the child development lesson:** \_\_\_\_\_

**What parenting strengths did you observe in the family:** \_\_\_\_\_

**What family members were present and participated during the visit:** \_\_\_\_\_

**Significant parent comments during the visit:** \_\_\_\_\_

**Mentor's Comments on the lesson plan steps:**

**ENGAGE:** \_\_\_\_\_

**ENCOURAGE:** \_\_\_\_\_

**EDUCATE:** \_\_\_\_\_

**EXPAND:** \_\_\_\_\_

**END:** \_\_\_\_\_

**Any spiritual indicators?** \_\_\_\_\_

**Concerns or Prayer Requests for the family:** \_\_\_\_\_

**What kind of follow-up does the family need:** \_\_\_\_\_

**Mentor's reminders for the next visit:** \_\_\_\_\_

**Date of next visit:** \_\_\_\_\_

**\*\*Please return to your Coordinator no more that three days after visit\*\***

**CONFIDENTIAL**