# Monthly Reflections

(Insert current photo of child here)

Month:

Child name:

Foster parent writing report:

Date of placement:

Have there been any medical, medication management or dental appointments this month? YesNo

If yes, please list (make sure there is a health form attached for each visit listed):

Have there been any illnesses or injuries? Yes☐No☐

If yes, please describe, including dates:

Have there been any changes in medication? Yes☐No☐

Did the child have any contact with family of origin/significant others this month? Yes☐No☐

If yes, please list dates, with whom, and describe how the contact went (child reaction before, during, after visit; significant others’ presentation):

Please talk about how the child is doing socially this month:

And emotionally:

Please talk about how the child is doing in school:

Describe any foster parent contact with school personnel this month (counselor, teacher, principal, coach) and outcome:

What are short term goals for the child?

How are you helping the child to achieve these goals?

What are long term goals for the child?

How are you helping the child to achieve these goals?

Stories to tell this month (include positives!):