

Check-in/Check-out

Daily Progress Report

Name _____ Date _____ Goal Met? Y N

Goal: _____ %							
1.	😊 😞	😊 😞	😊 😞	😊 😞	😊 😞	😊 😞	😊 😞
2.	😊 😞	😊 😞	😊 😞	😊 😞	😊 😞	😊 😞	😊 😞
3.	😊 😞	😊 😞	😊 😞	😊 😞	😊 😞	😊 😞	😊 😞
4.	😊 😞	😊 😞	😊 😞	😊 😞	😊 😞	😊 😞	😊 😞
5.	😊 😞	😊 😞	😊 😞	😊 😞	😊 😞	😊 😞	😊 😞

Rating Scale

😊 = Great

😞 = OK

😊 Points

Divided by Max. 😊 Points:

Percent 😊 :

Comments:

CICO Coordinator _____ Date _____

Parent Signature _____ Date _____