

HOLIDAY and SPECIAL EVENTS
Request for Planning

The Family Engagement Director or the Head Start Director are the contacts for these requests. The Request form should be filled out by the parent planner in partnership with a UMCHS staff member.

Name of Center Initiating the Request: _____

Name of Parent Planner: _____

Date of Request: _____

Partnering Staff: (List 1 you are planning with)

- Education Manager/Teacher/Family Advocate: _____

Briefly describe the input you've received from local parents in your program:

Describe how the planned celebration activities support and connect with the curriculum:
(Check all that apply and briefly state the application)

- Approaches to Learning _____
- Social & Emotional Skills _____
- Language & Literacy _____
- Cognition _____
- Perception, Motor & Physical Development _____

How does this plan support equity in serving diverse families in your program?

Communication:

- Parents in the program
- Health & Nutrition Director/Nutrition Manager
- Education Manager
- Parent communication (please attach a copy) will be sent home on: _____ (1 week in advance)

Program Resources Requested:

Approved by: _____

Approval date by Family Engagement Director or Head Start Director: _____