

**LANGLAGE COUNTY**  
**CHILD DEVELOPMENT PROJECT FOR \_\_\_\_\_**

Name \_\_\_\_\_  
 Years in project including this year \_\_\_\_\_  
 Things I want to learn \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Skills Learned or Improved**

To better understand how children grow and develop, I learned ...

Skills	Learned or Improved		Skills	Learned or Improved	
	This Year	Past Year		This Year	Past Year
More about myself when I was a child			About the things that make me a special person today		
About the things children do at different ages			Children like to take part in five Types of play – active, creative, Imaginative, social, and mental		
I need to know more about _____ and I can find out about it From _____			Other		
Other			Other		

To do a good job of taking care of young children, I learned.....

Skills	Learned or Improved		Skills	Learned or Improved	
	This Year	Past Year		This Year	Past Year
The first visit the children at their home when an adult is present			To choose toys appropriate for The child's age		
To write a plan of activities I will do with the child and what I will bring with me to the child's home			To make a toy/activity Appropriate for the child's age		
I need to know more about _____ and I can find out about it from _____			Other		
Other:			Other:		

In order to be ready to take care of children on my own, I learned these skills...\*\*

Skills	Learned or Improve			Learned or Improved	
	This Year	Past Year		This Year	Past Year
Know what children can do as an infant, toddler, preschooler, and school-ager.			How to plan playtime appropriate for an infant, toddler, preschooler, or school-ager		
How to make toys/games for children that are appropriate for their age			What to do and who to call if there is an emergency		
How to keep you and the children safe			How and what to feed an infant, toddler, preschooler, or school-ager		
How to soothe a crying child			How to dress children, including diapering if necessary		
Other:			Other:		

**\*\*It is a good idea to review these skills with your parent/guardian before you care for children without adult supervision.**

**Ways Your Received Help This Year Include (check all that apply):**

	<b>Describe or Explain</b>
<input type="checkbox"/> Attended project training offered in the county	_____
<input type="checkbox"/> Attended project training offered at district or state level	_____
<input type="checkbox"/> Guidance from a 4-H leader	_____
<input type="checkbox"/> Guidance from a parent	_____
<input type="checkbox"/> Reading and use of literature, books, audio visual resources	_____
<input type="checkbox"/> Guest presenters	_____
<input type="checkbox"/> Own knowledge	_____
<input type="checkbox"/> Help from friends/other youth	_____
<input type="checkbox"/> Other (describe) _____	_____