



## Early Intervention Activity Note

**Child's Name:** \_\_\_\_\_ **DOB:** \_\_\_\_\_ **ITOTS #:** \_\_\_\_\_

**Date of Service:** \_\_\_\_\_ **Location:** \_\_\_\_\_ **Length of Session in Minutes:** \_\_\_\_\_

**Participants:** \_\_\_\_\_

**Individual Early Intervention Activity:**  **Group Early Intervention Activity**

<b>Family/Caregiver Update</b>	What has happened since last visit, review of family priorities, etc.
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<b>Narrative Summary of the Early Intervention Session</b>	Specific outcome(s) that were addressed, provider's actions to address the outcome(s), how the family/caregiver participated in the early intervention session, and how the child responded throughout the session.
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<b>Strategies that will be used to incorporate learning and practice opportunities throughout child's daily activities</b>	Narrative about what strategies were discussing including how and when they would be implemented throughout the child's daily activities and routines.
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\_\_\_\_\_  
*Parent/Caregiver Signature* \_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Practitioner(s) Signature(s) and Credentials* \_\_\_\_\_  
*Date*

**Next Visit Scheduled (Date and Time):** \_\_\_\_\_