

ACADEMIA DE MI ABUELA (AMA)

Diapering/Potty-Training Plan

Child's Name: _____ Age: _____, DOB: _____

Teacher's Name: _____ Classroom Name: _____ Date: _____

Parent's Names: _____, _____ Date: _____

Methods of diapering/potty-training to be used: _____

Introduction and use of appropriate equipment: Please bring your child to daycare/preschool in comfortable and loose bottoms for easier potty-training. No zippers, buttons, laces, buckles, belts, or any other accessory (etc.) allowed.

*Please purchase age appropriate and comfortable shoes for your child's daily daycare/preschool use. This is essential for self-help training.

Introduction and use of appropriate clothing: _____

Date to start training at home, school for consistency: _____

Signature of Parent/Guardian: _____ Date: _____

Signature of Director: _____ Date: _____

Signature of Head Teacher: _____ Date: _____

Signature of Administrative Staff: _____ Date: _____