**ANNEXURE E: EXAMPLE OF A MEDICINE ADMINISTRATION CHART**

Name of child:

Name of medicine:

Instruction of parent (frequency, dosage/volume)

signature of parent/guardian

Date

Time *Signature

*Signature (ECD staff member who administers the medicine)

**ANNEXURE D:**
**EXAMPLE OF AN INCIDENT FORM**

Complete in triplicate
One copy to parent
One copy to child's file
One copy to the accident file

Name of the child _____ Date of incident _____

Description of accident/injury/incident _____

_____

_____

_____

Where did it occur? _____

When did it occur? _____

Who witnessed the accident/injury/incident _____

What injuries or symptoms resulted? _____

(*describe part of the body*)

Was any blood present? _____ How much blood? _____

Where was the blood? _____

What was done for the child ? (first aid treatment) _____

_____

_____

_____

Is any further medical attention required? _____

When was the parent notified? _____

When did the parent collect the child? _____

What advice was given to the parent? _____

Who was in charge when the incident occurred? _____

What measures are necessary to prevent such an incident in the future? _____

_____

_____

_____

Signature and date of staff member _____

Signature and date of parent _____

SEUNS OF MEISIES
BOYS OR GIRLS .....

# REGISTER VAN SKOOLBESOEK VIR DIE KWARTAAL EINDIGENDE .....19.....

| Toelatings No. Admission No. | Klas No. Class No. | LEERLINGE PUPILS | | Geboorte-datum Date of birth | Week wat eindig op Vrydag ..... | | | | | | Week ending Friday ..... | | | | | | Week wat eindig op Vrydag ..... | | | | | | Week ending Friday ..... | | | | | | Week wat eindig op V... ..... | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | | Van Surname | Voorname First names | | M | D | W | D | V | Totaal | M | T | W | T | F | Total | M | D | W | D | V | Totaal | M | T | W | T | F | Total | M | D | W | D |
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| | 24 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Totale getal skoolbesoeke<br>Total number of attendances ..... | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Totale getal afwesiges<br>Total number of absentees ..... | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Moontlike getal skoolbesoeke<br>Possible number of attendances ..... | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Getal skooldae<br>Number of school days ..... | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Gemiddelde skoolbesoek<br>Average attendance ..... | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Gemiddelde inskrywing<br>Average number on the roll ..... | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

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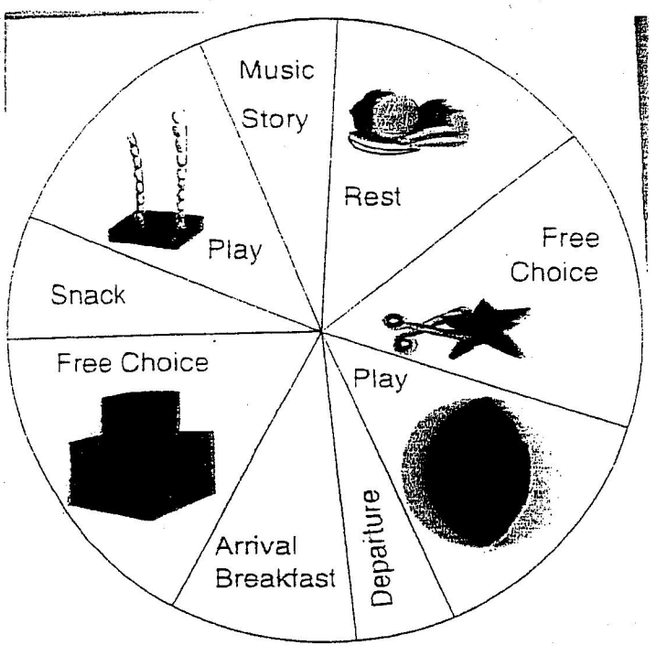
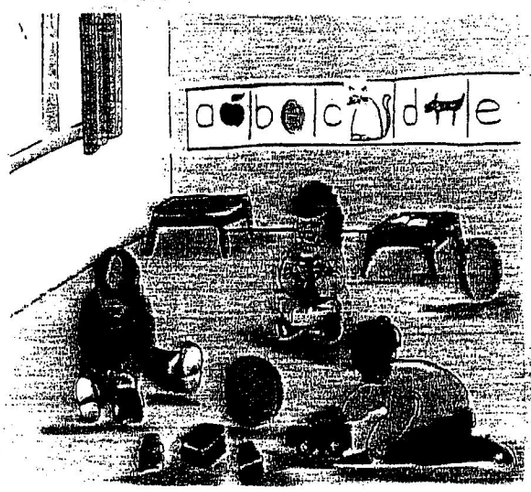
# DAILY PROGRAMMES



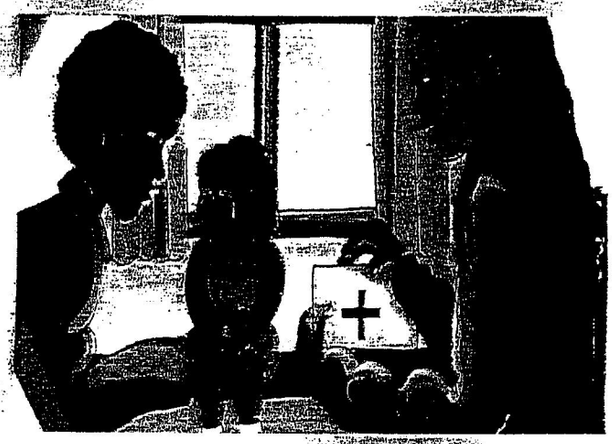

A daily programme should be reflected that clearly shows times for various activities

Parents should bring and collect children on time to avoid disrupting the routine.



Children should be able to play in an attractive, stimulating and safe environment with no overcrowding.

Children should be supervised at all times especially during outdoor play.



Staff should know basic first aid and public health.