



Healthy Start Profile Form – Add Child

Child's Name: \_\_\_\_\_

Enrollment Date: \_\_\_/\_\_\_/\_\_\_

Child's Date of birth? \_\_\_/\_\_\_/\_\_\_

Child's Sex? (Select one)

- Female
- Male

Child's Race? (Select all that apply)

- White
- Black or African American
- American Indian or Alaskan Native
- Asian
- Native Hawaiian or Other Pacific Islander
- Unknown/Not reported

Child's Ethnicity? (Select one)

- Hispanic or Latino
- Not Hispanic or Latino
- Unknown/Refused

Child's Primary Language? (Select one)

- English
- Spanish
- Other- please specify: \_\_\_\_\_

Is the child able to have a conversation (i.e., proficient) in English? (Select one)

- Yes
- No
- Unknown/Not reported

Child's Active Status? (Select one)

- Active
- Inactive

Revised May 2016



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