

**2017**  
**HEAD START ORDER FORM**  
**(Migrant/Regional/Early)**

Order Submitted By:	Ship To Attn:
Delegate/DO:	Receiving Site:
Phone Number:	Receiving Address/Route:
<b>Desired Delivery Date:</b>	<b>Opening Date of First Center:</b>
<b>Program to Charge To: (REQUIRED)</b>	

*This space for office use only.*

**PARENT INVOLVEMENT**

Document Name Mandatory forms must be completed in Spanish OR English	Form Number	Amount Ordered Last Year	Amount Ordering This Year*	Agency or SCOE Letterhead/ Logo
Center Parent Committee/Meeting Calendar MHS (E/S)(2 part ncr) (Revised 1/05)(mandatory)	CF/P-2 MHS			
Center Parent Committee/Meeting Calendar RHS (E/S)(2 part ncr) (Revised 1/05)(mandatory)	CF/P-2 RHS			
Center Meeting Planning Sheet (E)(white)(Revised 12/06)(optional)	CF/P-3			
Parent Meeting Agenda (E)(2 part ncr)(Revised 1/12)(mandatory)	CF/P-4			
Agenda Para Juntas de Padre (S)(2 part ncr)(Revised 1/12)(mandatory)	CF/P-4.1			
Parent Meeting Minutes (E)(2 part ncr)(2 pages stapled)(Revised 11/09) (mandatory)	CF/P-5			
Acta de la Junta de Padres (S)(2 part ncr)(2 pages stapled)(Revised 11/09) (mandatory)	CF/P-5.1			
Center Committee/PPC Sign-In sheet (E/S)(2 part ncr)(Revised 1/12) (mandatory)	CF/P-6			
Center Committee Data (E)(2 part ncr)(Revised 11/03)(mandatory)	CF/P-7			
<b>Policy Committee Data (E)(2 part ncr)(Revised 1/17)(mandatory)</b>	<b>CF/P-8</b>			
<b>Delegate/Partners Policy Committee Data (E)(2 part ncr)(New 1/17) (mandatory)</b>	<b>CF/P-8a</b>			
Parent Volunteer Calendar (E)(2 part ncr)(Revised 1/02)(optional)	CF/P-9			
<b>Parent Meeting Survey (E)(2 part ncr)(2 pages stapled)(Revised 1/17) (mandatory)</b>	<b>CF/P-10</b>			
<b>Parent Meeting Survey (S)(2 part ncr)(2 pages stapled)(Revised 1/17) (mandatory)</b>	<b>CF/P-10.1</b>			
Delegate Policy Committee Meeting Agenda (E)(2 part ncr)(Revised 11/03) (optional)	CF/P-11			
Delegate Policy Committee Meeting Agenda (S)(2 part ncr)(Revised 1/12) (optional)	CF/P-11.1			
Delegate Policy Committee Meeting Minutes (E)(2 part ncr)(2 pages stapled) (Revised 11/03)(optional)	CF/P-12			

\* Minimum of 25 copies

Updated 1/17

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Delegate Policy Committee Meeting Minutes (S)(2 part ncr)(2 pages stapled) Revised 1/12)(optional)	CF/P-12.1			
Parent Meeting Evaluation (E/S)(2 pages B/B)(white)(Revised 1/11)(optional)	CF/P-13			
Policy Council Reimbursement Claim (E/S)(3 part ncr)(Revised 1/13) (mandatory for RHS, EHS, MHS)	CF/P-14			
Delegate Policy Committee Report (E/S)(2 pages B/B)(white)(Revised 11/03) (optional)	CF/P-15			
Policy Council Approval Form (E/S)(white)(Revised 1/17)(mandatory)	CF/P-16			
Interview Committee Minutes (E/S)(white)(Revised 1/17)(mandatory)	CF/P-17			
Parent Meeting Survey Compilation (E)(white)(2 pages B/B)(Revised 1/17) (optional)	CF/P-18			
Parent Meeting Survey Compilation (S)(white)(2 pages B/B)(Revised 1/17) (optional)	CF/P-18.1			
Policy Council Ratification of Assignment of Staff (E/S)(white)(New 1/17) (mandatory)	CF/P-19			
CCMHS Policy Council Representative Confirmation (E)(white)(New 1/17) (mandatory)	CF/P-20			
Stanislaus Head Start Policy Council Representative Confirmation (E)(white) (New 1/17)(mandatory)	CF/P-21			

Comments: