



# Head Start

*"Building partnerships, changing lives"*



## Head Start Campus Intervention Team

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

\_\_\_\_\_  
Head Start Campus

\_\_\_\_\_  
Conference Date

\_\_\_\_\_  
Teacher

**Presenting  
Problem:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Current  
interventions:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Interventions  
Suggested:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Meeting Participants  
Name**

**Title**

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____