**CDI Homework Sheet**

Child’s name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Caregiver’s name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |
| --- | --- | --- | --- |
| **Date** | **Did you spend 5 minutes in Special Time today?** | **Activity** | **Problems or Questions in Special Time** |
| Monday\_\_\_\_\_\_\_\_\_\_ |  [ ]  Yes [ ]  No |  |  |
| Tuesday\_\_\_\_\_\_\_\_\_\_ |   [ ]  Yes [ ]  No |  |  |
| Wednesday\_\_\_\_\_\_\_\_\_\_ |   [ ]  Yes [ ]  No |  |  |
| Thursday\_\_\_\_\_\_\_\_\_\_ |   [ ]  Yes [ ]  No |  |  |
| Friday\_\_\_\_\_\_\_\_\_\_ |  [ ]  Yes [ ]  No |  |  |
| Saturday\_\_\_\_\_\_\_\_\_\_ |  [ ]  Yes [ ]  No |  |  |
| Sunday\_\_\_\_\_\_\_\_\_\_ |  [ ]  Yes [ ]  No |  |  |