The Flour Baby Project

Parent #1_____

Parent #2 _____

Baby's Name _____

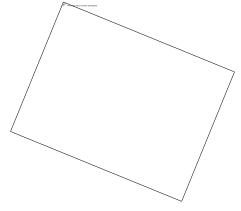
Flour Baby Grading System

<u>October</u>

	<u>Day 1</u>	<u>Day 2</u>	Day 3	TOTAL
	Date:	Date:	Date:	
Baby is present and				
"dressed" (15pts per				
day)				
Journal entry is				
complete and				
signed				
(15 pts per day)				
Daily log				
(5pts per day)				

Complete Project Due: November

Baby present (45)	
Journal Entries (45)	
Daily Log (15)	
Cost List (50)	
Scenarios (30)	
Birth Certificate (5)	
Family Picture (5)	
Creativity/Effort (5)	
TOTAL POINTS (200)	





My Baby Book

Parent #1 _____

Parent #2_____

Baby's Name _____





INSERT BIRTH CERTIFICATE & FAMILY PICTURE

Daily Journal Entries

****Must provide 3-5 sentences per question****

<u>Day 1</u> (Date: _____)

- 1. Congratulations you are going to be a proud parent of a newborn! How does this make you feel? Explain how you think you would react if you found out you were having a baby. Include emotions, fears, who you would tell, etc.
- 2. What changes do you think will occur in your daily life once you have a baby? How will having a baby affect your sleep patterns, social life, career, and other recreational activities (working out, weekend plans, parties, shopping, etc)?

3. Describe the physical traits that you think will be passed down to your baby (hair/eye color, height). What is your family history like? Does your family have a history of genetic diseases or disorders that may be passed down to your baby (heart disease, diabetes, cancer, birth defects, etc.)?

Was the baby home with you tonight? ____ Yes ___ No

If No, explain why and where the baby was.

Grandparent Signature _____

Must provide 3-5 sentences per question

Day 2 (Date:)

4. Explain your child care arrangements. Will you be a stay-at-home mom/dad or will you use daycare, in-home care, or a family member/friend to care for your child?

If you choose to be a stay-at-home parent, how will the loss of your income affect your family? Will one partner have to work overtime? Will you have to give up specific things to cut costs (gym membership, hair/nails, shopping, etc?)

If you plan to use childcare (daycare, in-home care) how will the expense affect your "normal" living? Will you have to give up specific things to cut costs (gym membership, hair/nails, shopping, etc?)

If you plan to have a family member/friend watch your child, what is your back-up plan if that person was sick, went on vacation, had an emergency and they were unable to care for your child?

5. It's 2:00am and your newborn is awake crying uncontrollably. He/she is coughing like crazy and has a fever. What do you do?

6. You have not had a night out with your partner in months. You have planned a special "date night" this Friday because you need some time alone. You have made all of the plans – reservations at your favorite fancy restaurant in NYC and tickets to see a show. You have a babysitter lined up to arrive at your house on Friday at 4pm so you can leave to head into NYC.

However, when you wake up on Friday, you notice your baby is not feeling very well. As the day progresses, the baby is feeling worse and is now very fussy and clingy. They haven't napped well or eaten well throughout the day. He/she only wants to be with mommy or daddy because they are able to comfort them. What will you do regarding your plans that evening? Will you cancel? Still have the babysitter take care of the child? Will you allow your partner to go with a friend and you stay home?

Was the baby home with you tonight? ____ Yes ___ No

If No, explain why and where the baby was.

Grandparent Signature _____

****Must provide 3-5 sentences per question****

<u>Day 3</u> (Date: _____)

- 7. If something were to happen to you and your spouse, who would you want to have custody of your child? Why?
- 8. In your opinion, what do you think would be the most difficult part about being a teen parent?

9. In your opinion, what do you think will be some of the challenges you will face even as an adult, when you are "ready" to have a child?

Was the baby home with you tonight? ____ Yes ___ No

If No, explain why and where the baby was.

Grandparent Signature _____

<u>Daily Log</u> – DAY 1 (DATE:)

Complete the chart below. Write down you and your baby's daily schedule of activities.

Time of Day	Where was the baby?	Who was caring for the baby?	What adjustments did you have to make?
6:00am			
7:30am			
10:30am			
2:15pm			
6:00pm			
8:00pm			
10:00pm			
12:00am			
	Daily Log	– DAY 2 (DATE:)
Comple		own you and your baby's da	

Complete the chart below. Write down you and your baby's daily schedule of activities.

Time of Day	Where was the baby?	Who was caring for the baby?	What adjustments did you have to make?
6:00am			
7:30am			
10:30am			
2:15pm			
6:00pm			
8:00pm			
10:00pm			
12:00am			
	D.:'I I.)
Compl		DAY 3 (DATE:	

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Day		baby?	have to make?

6:00am

7:30am

10:30am

2:15pm

6:00pm

8:00pm

10:00pm

12:00am