幼儿进餐观察记录量表

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| **姓名** | **用勺情况** | | | **进食时间** | | | **进食专注程度** | | | **卫生情况** | | | **漱口及擦嘴情况** | | | **进食习惯** | | |
|  | 能熟练地用勺子吃饭 | 能掌握正确的姿势进餐 | 不会独立使用勺子 | 较快（＜10分钟） | 正常（10-25分钟） | 较慢  （＞25分钟） | 能专注吃饭 | 在老师的提醒下，能专注吃饭 | 老师反复提醒，仍不专注吃饭 | 地面、桌面无残渣饭粒及积水 | 在老师的提醒下能将桌面收拾干净 | 在老师的提醒下未收拾桌面 | 能自觉擦嘴、漱口 | 在老师的提醒下插嘴、漱口 | 在老师的提醒下未擦嘴漱口 | 不挑食、不偏食、不剩饭 | 在引导下，不挑食、不偏食，尽量把饭菜吃完 | 在引导下，依旧挑食、偏食、剩饭 |
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