NEW YORK STATE OFFICE OF CHILDREN AND FAMILY SERVICES

CHILD DAY CARE CENTER SLEEPING AND NAPPING AGREEMENT

This form may be used to meet the regulatory requirement that, other than for school-age children, sleeping and napping arrangements must be made in writing between the parent and the program.

Name of Child in Care:	Date of Birth
	/ /
Name of Parent/Guardian:	
Traine of Farong Caardan.	
Name of Program: Imagination Childcare Academy, Inc.	Facility ID# 588004
Area of program where shild will pen or close. Classroom	
Area of program where child will nap or sleep: Classroom	
Napping or sleeping surface (Check all that apply):	Cot
How will the child be supervised? Teachers will be seated who	ere all children can be visually seen at all times.
All applicable regulations must be followed, including, but not with any questions.	limited to, those listed below. Contact your regulator
 In a child day care center, children may not sleep or na bouncy seats, unless otherwise prescribed by a health these devices, they must be moved to an approved sleet 	care provider. Should a child fall asleep in one of
 Sleeping arrangements for infants through 12 months back to sleep, unless medical information from the chi by the parent that shows that arrangement is inappropri 	d's health care provider is presented to the program
 Cribs, bassinets, and other sleeping areas for infants the sized fitted sheet and must not have bumper pads, toys positioners. Wedges or infant positioners will be permitt care provider. 	, stuffed animals, blankets, pillows, wedges, or infant
 The resting/napping places must be located in approven program; be located in a draft-free area; be where childregress is not blocked; allow a person to move freely are or meet the needs of children; and be at least two feet. 	en will not be stepped on; be in a location where safe ad safely within the napping area in order to check on
 Children unable to sleep during nap time shall not be co must be offered a supervised place for quiet play. 	nfined to a sleeping surface (cot, crib, etc.) but instead
A copy of this agreement must be kept on file at the pro	gram and accessible for review.
Signature of Parent/Guardian	Signature of Program Staff
/ /	/ /
Date	Date