

MULTIPLE VERIFICATION AND CONSENT FORM

INTERVIEWING CHILDREN

This is a statement of verification that I have been informed the Child Care Licensing/Investigators/Law Enforcement may possible interview my child. This is in accordance with Minimum Licensing Requirements 201.4

Parent/Guardian Signature

Date

KINDERGARTEN READINESS SKILLS

This is to acknowledge that I have received the Kindergarten Readiness Skills Web Address for my child. In accordance with Minimum Licensing Requirements 201.5 (https://www.trinitylittlerock.org/download_file/view_inline/354/348/)

Parent/Guardian Signature

Date

SUNSCREEN

I give written permission for the use of suntan lotion/sunscreen for my child to protect from overexposure to the sun. In accordance with Minimum Licensing Requirements 1101.27

Parent/Guardian Signature

Date

PERMISSION TO DISPENSE MEDICATION

I hereby give ___ / do not give/ ___ the director/nurse of the child care facility or appointed representative permission to give my child _____, acetaminophen or ibuprofen. I understand that I will be notified that the medication has been administered.

I understand that if my child is in need of prescription medication to be administered while at the daycare/school, I must fill out a *parental request for medication to be administered* form specifying the date, type, drug name, time and dosage, length of time to give medication and what the medication is being given for.

I understand a care plan is needed for children who require scheduled daily medication or medications to be given on an emergent basis (Benadryl, EpiPen, rescue asthma medication, etc.).

All medication must be in the original container with a child resist cap and labeled with the child's name.

This is in accordance with Minimum Licensing Requirements 1101.6 and 1101.7.

Parent/Guardian Signature

Date