

Child's Name: \_\_\_\_\_

### **SYC Permission and Acknowledgement Form**

- 1 My child has an IEP (individual education plan) care plan on file for special needs.  
\_\_\_yes \_\_\_no
  
2. I authorize access to my child's information, including health information on file at School for Young Children (SYC) to the staff of the School for Young Children (SYC), including the Director, the office staff and my child's teachers, as well as to any paramedics, physicians or other medical personnel who may be summoned in the event of an emergency while my child is at the SYC facility.
  
3. I have been given a Parent Handbook and a pre-enrollment interview with a school staff member during which I have been given the opportunity to address any questions or concerns I have about SYC and its policies. Further, I understand that if I have additional questions or concerns at any time while my child is enrolled at SYC, I am encouraged to speak to the school staff about them.
  
4. I have received and reviewed the SYC Pandemic Plan, and have been given the opportunity to address any questions or concerns I have. I understand that the Pandemic Plan may be adjusted during the course of the year due to the changing nature of the pandemic. SYC will send updates if changes are made.
  
5. My child has my permission to go to any other part of the First UU Church building and grounds for a class activity, including those areas not specifically approved for child care by the Child Care Licensing division of the Ohio Department of Job and Family Services, as long as he/she is accompanied by one of his/her SYC teachers at all times.

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Date

PLEASE FILL OUT AND SIGN **BOTH SIDES OF THIS FORM**