Notification for Parent(s)/Guardian(s)

Itinerant Team Services: Visiting Educators

Notification to Parent(s)/Guardian(s) from _____ [name of Child Care Program] on _____ [date]:

In partnership with _____ Public Schools, visiting educators will support our program's children with enhanced education services. In addition to working with specific children in our program as part of their Individualized Education Programs (IEPs), these visiting educators will periodically lead small group activities much like our regular program staff. For example, they might read a story to a few students or play a game with them.

These visiting educators will have successfully cleared the Massachusetts Department of Early Education and Care's Background Record Check process before working in our program.

If you wish, you have the option to opt out of your child's participation in small group activities with these educators. If so, please fill out the below section and return this form at your earliest convenience. **If not, no other action is needed.**

(OPTIONAL): Opt-Out. If you prefer that your child opts out of participating in small group activities with visiting educators, please check the box, sign/date below and speak with your child's educator as soon as possible.

☐ *By checking this box, I am opting out of my child participating in group activities with visiting Itinerant Team staff*

_____
Child Name

_____
Parent/Guardian Printed Name

_____ _____
Parent/Guardian Signature Date