

## INDIVIDUALIZED EDUCATION PLANS (IEP) AND INDIVIDUALIZED FAMILY SERVICE PLANS (IFSP) INFORMATION REQUEST FORM

Due to the diverse set of needs of children in our program, it is important to gather as much information about the best ways to educate each child. IEP's and IFSP's are created by service providers working with children with special needs and includes this information. The Keystone STARS Performance Standards therefore require each early learning provider to request copies of IEP's and IFSP's for children in their care. Because of the importance of the IEP/IFSP to a child's learning, the program should have a copy before the child begins to attend, if possible.

The information found on an IEP/IFSP is protected by privacy laws including the Health Insurance Portability and Accountability Act (HIPAA). Releases of information may also be required to speak to members of a child's treatment team. Professional development regarding privacy issues, and HIPAA, is highly recommended.

Your child's growth and development are measured with developmental assessments. If your child currently has an IEP/IFSP, it would be beneficial to share a copy of this plan with us so we can work together to ensure that the guidelines are put into practice.

I AM PROVIDING A COPY OF MY CHILD'S IEP/IFSP

I AM **NOT** PROVIDING A COPY OF MY CHILD'S IEP/IFSP

THIS IS NOT APPLICABLE TO MY CHILD

PARENT SIGNATURE \_\_\_\_\_

PRINTED NAME \_\_\_\_\_

DATE \_\_\_\_\_

## MEDIA CONSENT FORM AND RELEASE FOR MINOR

I am the parent/guardian of \_\_\_\_\_ (print full name of child) ("My Child"). I hereby grant PRECIOUS MOMENTS CHRISTIAN ACADEMY (PMCA), and their agents the absolute right and permission to use photographic portraits, pictures, digital images or videotapes of My Child, or in which My Child may be included in whole or part, or reproductions there of in color or otherwise for any lawful purpose whatsoever, including but not limited to sue in any PMCA publication or on the PMCA websites, without payment or any other consideration.

I hereby waive any right that I may have to inspect and/or approve the finished product or the copy that may be used in connection therewith, wherein My Child's likeness appears, or the use to which it may be applied.

I hereby release, discharge, and agree to indemnify and hold harmless PMCA and their agents from all claims, demands and causes of action that I or My Child have or may have by reason of this authorization or use of My Child's photographic portraits, pictures, digital images or videotapes, including any liability by virtue of any blurring, distortion, alteration, optical illusion, or of said images or videotapes or in processing tending towards the completion of the finished product, including publication on the internet, in brochures or any other advertisements or promotional materials.

**CONSENT:** I HEREBY CERTIFY THAT I AM THE PARENT/GUARDIAN OF THE ABOVE-NAMED CHILD AND DO HEREBY GIVE MY CONSENT WITHOUT RESERVATION TO THE FOREGOING ON BEHALF OF MY CHILD

**NON-CONSENT:** I HEREBY CERTIFY THAT I AM THE PARENT/GUARDIAN OF THE ABOVE-NAMED CHILD AND **DO NOT** HEREBY GIVE MY CONSENT WITHOUT RESERVATION TO THE FOREGOING ON BEHALF OF MY CHILD

PARENT SIGNATURE \_\_\_\_\_

PRINTED NAME \_\_\_\_\_

DATE \_\_\_\_\_