

CONSENT FOR CHILD ASSESSMENT

Early intervention builds upon and provides supports and resources to assist family members and caregivers to enhance children’s learning and development through everyday learning opportunities. Key principles of early intervention include:

- Infants and toddlers learn through everyday experiences with familiar people in familiar contexts.
- All families, with the necessary support and resources can enhance their children’s learning and development.
- The primary role of the service provider in early intervention is to work with and support family members and caregivers in children’s lives.

Assessment gathers information about your family’s resources, priorities, concerns, and interests and your child’s unique strengths and needs in all areas of development. Through assessment early intervention professionals learn about how you would like early intervention to support your family. An initial assessment must be completed prior to your initial Individualized Family Service Plan (IFSP) and annually thereafter.

The family assessment is conducted to identify your family’s resources, priorities, and concerns and the supports and services necessary to enhance your family’s capacity to meet the developmental needs of your child in early intervention. The family assessment is:

- a) voluntary on the part of each family member participating in the assessment;
- b) based on the information obtained through the assessment process, which includes interviews with those family members who elect to participate in the assessment; and
- c) includes your family’s description of its resources, priorities, and concerns related to enhancing your child’s development.

The child assessment is conducted to identify your child’s unique strengths and needs in all areas of development and the early intervention services appropriate to meet those needs. Consent is required prior to completing your child’s assessment. The assessment of your child must include:

- a) a review of the results of the evaluation, if conducted;
- b) observations of your child; and
- c) the identification of your child’s needs in each of the developmental areas within the context of your family’s routines and activities.

By signing below, I authorize the Arizona Early Intervention Program (AzEIP) to conduct the assessment for my child,

Name: _____ Date of Birth: _____

for the purpose of identifying my child’s unique strengths and needs and the early intervention services appropriate to meet those needs.

My service coordinator and I have reviewed the AzEIP family rights’ booklet, and I understand my family’s rights and options.

I understand that my consent is voluntary, and that I may withdraw the consent at any time. My consent expires after this assessment process and IFSP is completed.

Parent’s Signature: _____ Date: _____