AZ STEPS

Small Steps...Big Impact!

Arizona Statewide Training and Technical Assistance for Expulsion Prevention System Supported by







SERVICE CONSENT FORM

regarding your child. F				equest or Notification of Expuls ultant within two (2) business da	
				Provider on the AZ STEPS proced	
also underst	and that the Resource Consu	Itant and child care pro	ovider may e	ny child in the child care setting xchange information about my he overall quality of the child ca	child
confidential,		nd Federal laws indica	ate the follow	the provider, my child, or myse ing exceptions to the confident others.	
written reque		ide my signature. The	revocation d	ram at any time. I will submit a loes not include any informatior nation and the time it was	1
I understand that the indicated by myself.	e Service Consent Form exp	oires one year from t	he date it is	signed, unless otherwise	
I Consent to Servi	ces I Decline Services				
Name of Child		Child's Date of Birth		Parent Phone Number	
Name and Address of	Child Care Site				
Parent/Guardian Name (please print)		Parent/Guardian Signature		Date	
Name of Resource Consultant		Phone Number			
The following individua	als have permission to talk wit	th the RC, child care p	rovider and t	eacher about the child's case:	
Name	Relationship to Child	Phone Number	Email Ad	dress	
Name	Relationship to Child	Phone Number	Email Ad	dress	
Funding provided by the Care and Developmen		onomic Security Child	Care Admini	stration through the Federal Ch	ild
Equal Opportunity Em	plover / Program • Auxiliary a	ids and services are a	vailable upoi	request to individuals with	

Equal Opportunity Employer / Program • Auxiliary aids and services are available upon request to individuals with disabilities • To request this document in alternative format or for further information about this policy, contact 602-542-4248; TTY/TDD Services: 7-1-1 • Disponible en español en línea o en la oficina local