

## CONSENT FOR SCREENING - PRIOR WRITTEN NOTICE

In order to determine if your child is suspected of having a developmental delay and in need of an evaluation, a screening must be completed within 45 days from the date the Arizona Early Intervention Program (AzEIP) received your referral.

**Screening** includes gathering information through parent/caregiver interview, observations of your child, review of other available information, and the use of a screening instrument(s) that covers all areas of development.

By signing below, I authorize AzEIP to conduct the screening for my child,

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

for the purpose of determining whether my child is suspected of having a developmental delay and in need of an evaluation.

- 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 screening process is completed, a time period not to exceed 45 days unless requested by me.
- I understand that I have a right to request an evaluation at any time during the screening process.

Parent's Signature: \_\_\_\_\_ Date: \_\_\_\_\_