

**Parent / Caregiver Consent Form 2021 – 2022**  
**Ages and Stages Questionnaire / ASQ3 / Devereux / Brigance And**  
**Other Classroom Assessments**

Dear Parents / Caregivers:

In Order to improve the quality of services provided to your child we are using the ASQ3 Screening Tool.

The screening process will be similar to the kind of activities your child is involved in on a daily basis. The results of the screenings will have no bearing on your child's receipt of services. All data gathered from this program will be kept confidential.

Part of this process will involve, but is not limited to the collection of parent and teacher information, child observation and teacher interview. Your child's teachers will have access to the data in order to make informed decisions about how best to improve the quality of services provided to your child.

\_\_\_\_\_  
**(PRINT) Name of Parent or Guardian**

\_\_\_\_\_  
**(PRINT) Child's First and Last Name**

\_\_\_\_\_  
**Child's Date of Birth**

- I consent to have my child included in this Screening / Assessment Program.
- I **DO NOT** Consent to have my child included in this screening / Assessment Program.

\_\_\_\_\_  
**SIGNATURE of Parent or Guardian**

\_\_\_\_\_  
**Date (this Form is Valid for One Year)**

**My child Speaks:**

\_\_\_\_\_ English

\_\_\_\_\_ Spanish

\_\_\_\_\_ Creole

\_\_\_\_\_ Other: \_\_\_\_\_

The language (s) spoken at home is:  
\_\_\_\_\_