



## Informed Notice & Consent for Screening, Evaluation, Assessment and Follow-Up Review

Child's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

**Initial Screening** - Early Steps may conduct a screening of your child's current development to determine if more intensive evaluation and assessment are needed. A screening is a brief procedure that may look at some or all of the following areas to determine if there is delayed development: Hearing, vision, communication (speech and language), physical (fine and gross motor), health/medical, cognition, social/emotional, self-help (adaptive), behavioral, or other areas. If your child is found eligible for Early Steps, the screening information will also be helpful to your child's Individualized Family Support Plan team. **You have the right to request an evaluation for your child at any time during the initial screening process.**

**Initial Evaluation/Initial Assessment** - Before we can provide services to your child, we must conduct an evaluation and an assessment to determine eligibility and to plan for services that will best meet his/her needs. An evaluation and/or assessment shall be done by a team made up of you and at least two professionals. Specific types of evaluations will be carefully selected based on your child's age, developmental level and needs. You will be asked to provide information about your family and its needs for services and support. The evaluation and assessment may look at the following areas: hearing, vision, communication/speech/ language, psychological, physical/health/medical, developmental, social and emotional, self-help (adaptive), behavioral, family, or other areas. The results of previous evaluations and assessments may also be used. If you do not provide consent for the evaluation and/or assessment, **your child will not be able to receive early intervention services.**

**Follow-Up Screening, Evaluation, and Review** – A follow-up screening, evaluation or review may be conducted to determine if your child still has a level of developmental delay that qualifies him or her for Early Steps. If a follow-up evaluation is recommended and you do not provide consent, **then your child will no longer be eligible for Early Steps and will not receive early intervention services.**

The following action as checked is recommended for your child:

- Screening
- Initial Evaluation and/or Assessment
- Follow-up Screening, Evaluation or Review

**A copy of my rights under the Individuals with Disabilities Education Act has been provided with this form and explained to me.**

- I give my permission for the action (s) recommended above.
- I do not give my permission for the action(s) recommended.

\_\_\_\_\_  
Signature of Parent or Guardian

\_\_\_\_\_  
Witness

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date