

Parent Consent for Animal(s) in the Early Learning Environment

To be completed by an Early Learning staff person:

Child's Name: _____

Type of Animal: _____

The animal will be in the environment:

Full school year From _____(date/time) to _____(date/time)

Reasons/Benefits of having this animal in the environment:

Health and/or safety risks of having this animal in the environment:

To be completed by Early Learning parent or guardian:

Does your child have any health problems that would be affected by having contact with an animal? (such as asthma, allergies, or fears)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
The risks and benefits of having this animal in the environment have been explained to me.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
I have been able to ask questions.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
I have been given the opportunity to review the "Animals in the Early Learning Environment" policy. (see reverse)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
I give permission to have this animal in my child's learning environment	<input type="checkbox"/> Yes	<input type="checkbox"/> No

I understand that I can discuss concerns about the animal with the teacher at any time during the school year.

 Parent/Guardian Signature

 Date

 Interpreter Signature

 Date