

Edgerton Local Schools
Early Entrance to Kindergarten
Permission for Review

I, _____, hereby give my permission for

Parent/Legal Guardian (print)

Edgerton Local Schools to evaluate my child for early entrance to kindergarten.

Name of Child (print)

Date of Birth

In giving my permission, I understand that any or all of the following may occur:

1. Review of relevant records(release of information will be included)
2. Interviews with caregiver and/or parent/guardian
3. Observation(s) of my child
4. Assessment(e.g. curriculum-based, screening, and other appropriate evaluation for placement)

Print name of Parent/Legal Guardian

Signature of Parent/Legal Guardian

Date

