

ready4success
Parent Release for Child Information,
Early Reading and Early Math Screenings



Our preschool program is committed to supporting your child by providing early learning experiences that will help him or her be kindergarten ready. We are partnering with the **ready4success** initiative and *FutureReady Columbus* to receive assistance for early reading and math. By signing this **Permission Release**, your child's teacher will receive information that will help us plan lessons that will support your child's learning.

I hereby grant permission for _____
(Child's Legal Name)

be administered the Get Ready to Read and/or Preschool Early Numeracy Skills Test in the Fall of the current school year (pre-screening) and in the Spring of current school year (post screening). This information will be used by my teacher to identify instructional strategies that will help my child with early reading and early math development.

I give permission to _____
(Provider Name)

to share the screening results and basic information (e.g., date of birth, language and race) with *FutureReady Columbus* and/or the receiving school. I also permit *FutureReady Columbus*' IT to obtain my child's Kindergarten Readiness Assessment information from the school district so that we may share these results with my child's preschool program for program improvement.

I understand that this information will be kept confidential and used only for improvement measures by the program. I understand that all personal information will be kept confidential.

Child's Legal Name (First, Middle, Last) (printed)	Child's Date of Birth
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Parent/Guardian's Legal Name (printed)

Parent/Guardian's Signature	Date
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_____ (Please Initial) In addition, I give permission for my child's photograph to be used for the **ready4success** professional development seminars to showcase your child's learning and work with his or her teacher and literacy coach.