



Dear Parents,

As part of the Quality Rating System for early childhood centers in the state of Massachusetts Bigelow conducts a developmental screening of all of our children. We are using the ASQ (Ages and Stages Questionnaire) tool. We ask families to electronically complete this screening tool within 45 days of your child's enrollment at Bigelow. Additional information and the link to complete will be sent via email at a later date.

Screening tools to gauge development of children. They provide a snapshot of areas of strength and potential needs. The ASQ assessment requires both parents and teachers to complete a questionnaire about your child's development including information about communication, gross motor, fine motor, problem solving and personal-social skills.

Before we can undertake this process, we need your signed permission which will be included in the . Please indicate your willingness to participate in this important activity by signing the permission slip below and returning to the office.

I hope you will enjoy participating in this assessment. It's a nice way to spend some time observing and interacting with your child and a great time to take a look at how they are progressing.

If you have any questions, please don't hesitate to contact the office.

Dawn

I give my permission for my child _____ to participate in the ASQ developmental screening. I agree to fill out the questionnaire about my child's development and will complete it as instructed.

I do not wish to participate in the ASQ developmental screening process.

Parent/Guardian Signature

Date