



Early Childhood Programs

Rev. 11/16

PERMISSION TO SCREEN

Date _____

Dear Parent:

Leon County Schools Early Childhood Programs in conjunction with the Florida Diagnostic Learning Resources System (FDLRS) offers a screening of preschool age children which may include the following areas:

- Motor Development
• Concepts Development
• Speech/Language Development
• Vision & Hearing Screenings
• Observations

There is no fee for this screening as it is part of Leon County Schools and FDLRS services to children in this area. However, this screening can only be provided with your consent. Please complete the form below.

Child's Name _____ Date of Birth _____

___ Yes, I allow my child to be screened.

___ No, I do not want my child to be screened.

Parent/Guardian (Signature) _____

(Please print name) _____

Address _____

Phone (home) _____

Phone (work) _____

FOR OFFICE USE ONLY:

___ M ___ W ___ H ___ MOTHER ___ GUARDIAN
___ F ___ B ___ O ___ FATHER ___ OTHER