## MISSISSIPPI COUNTY, ARKANSAS, E.O.C. EARLY CHILDHOOD EDUCATION DEPARTMENT

## PARENT ORIENTATION CHECKLIST

Place a check (✓) bef	Fore each item that has been provide	ed and reviewed with the parent or legal guardian.
Dental, Ph	ysical and Vision Examination For	m
Resource I	Directory	
Volunteer	Handbook	
Parent han	dbook	
<ul> <li>A. Confidentiality Policy</li> <li>B. Child Abuse &amp; Neglect Policy</li> <li>C. Grievance Procedures</li> <li>D. Discipline Policy</li> <li>E. Smoke-Free Environment Policy</li> <li>F. Eligibility Policy (Termination for Erroneous or False Information).</li> <li>G. Attendance Policy</li> </ul>		
Oth	er Pertinent Information	
H. I. J. K. L. M. N. O. P.	Contagious Disease Policy Head Lice Policy Sick Child Policy Safety Sam Licensing and Head Start Require Ready Rosie Curriculum Consent/Permission Forms School Readiness Calendar COVID-19 Policy	
My signature verifie	s that I have received the items che	cked above and reviewed them with Head Start Staff.
Parent/Guardian Signature		Date
Staff Signature/Title		Date

Upon completion, this form is to be kept in the child's folder.