

Endless Options LLC

Dear Parent/Guardian:

We are pleased to inform you that a technician has been assigned to work with your child. As a technician providing IISS services they will be responsible for carrying out program goals. During the first 3 weeks of service or nine sessions you will be required to be in the home or designate someone else who is familiar with your child to be in the home during the instruction. Once your child and the technician have had time to get to know each other the technician may work alone in the home with your permission. This can be done by signing the form below.

I _____ give my permission for _____ to work alone in my home with my child. I have developed an emergency plan with the above mentioned technician on what to do in the event of an emergency while my child is alone with the technician. In the event of a medical emergency 911 will be called and I will be notified.

1. I have discussed with the above mentioned technician what I want them to do if an unusual or prolonged behavior occurs while I am out of the house.
2. I have discussed with the technician what to do if emergencies arise in community. I have provided emergency contact numbers for the technician to enter in to their cell phone.

If your child's implementation plan has goals requiring access into the community you will need to sign this portion of the form.

I understand that it will be necessary for the above mentioned technician to use their personal vehicle to transport my child on community outings. I give my permission for the technician to do so.

Signed: _____

Parent/guardian

Date: _____