



## Child Care Quality Initiatives (CCQI) Project ASQ Consent Form

Dear Parent,

The first five years of life are very important for your child because this time sets the stage for success in school and later in life. During infancy and early childhood, your child will gain many experiences and learn many skills. It is important to ensure children’s development proceeds well during this period.

As a participant in Child Care Quality Initiatives (CCQI), I have agreed to work with a Specialist from the local Child Care Resource and Referral Agency to improve the quality of child care I provide. To ensure I am providing appropriate activities and support for your child, I must first determine where your child is at developmentally. To do this I will use what is called the Ages & Stages Questionnaire (ASQ-3 and ASQ:SE-2) which are questionnaires that correspond with the age of the child and monitors his/her development. The questions discussed in the ASQ-3 questionnaire reflect developmental milestones for a specific age group such as: communication, gross motor, fine motor, problem-solving, and personal social whereas the ASQ:SE-2 questionnaire looks at social-emotional aspects of development such as: self-regulation, communication, autonomy, compliance, adaptive functioning, affect, and interaction with people. Information obtained from the questionnaires will help determine if your child is on track or if he/she should receive a more in-depth assessment. Your child’s ASQ information will be entered into an electronic database which is safe, secure and password protected – all information will be kept confidential.

I encourage you to be an active participant in this process by completing your own ASQ on your child so that you can compare your information with ours. If you wish to obtain a copy of the ASQ questionnaire please let me know and the Specialist I am working with can provide you a copy. Additional ASQ information can be obtained by visiting the Ages and Stages website: [www.agesandstages.com](http://www.agesandstages.com).

Sincerely,

Child Care Provider

*Please read the text below and indicate whether you give permission for your child to participate in the ASQ screening by initialing on the corresponding line.*

\_\_\_\_\_ I have read the information above about the Ages & Stages Questionnaires ® (ASQ-3™; ASQ:SE-2™) and wish to have my child participate in the screening.

\_\_\_\_\_ I have read the information above about the Ages & Stages Questionnaires ® (ASQ-3™; ASQ:SE-2™) and Do NOT wish to have my child participate in the screening.

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Date

<b>Child’s Name</b>		<b>Date of Birth</b>	
<b>If child was born 3 or more weeks prematurely, # of weeks premature:</b>			