

MOHDC SmartStart Nature Academy and Learning Center

533 Blake Avenue, Brooklyn NY 11207

Tel: (718) 485-8500 • Fax: (718) 485-8510 • www.mohdcsmartstart.com

SmartStart Parental Consent For COVID-19 Emergency Distance Learning

Instructions: This consent form for use of Distance Learning as an instructional method must be completed by the student's parent/guardian in order for Distance Learning services to be delivered to the child at home. The consent form for use of Distance Learning can be returned via email, text messaging, WhatsApp, or any other electronic method. Electronic signatures will be accepted as formal consent once forms are returned from a device belonging to child's parent/guardian. A separate consent form is required for each child receiving distance learning delivery services.

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I _____, Parent/Guardian of _____, do consent to have my child's learning instruction delivered using distance learning as an Early Childhood or School Age Childcare learning method during this emergency period of COVID-19. I understand the distance learning services my child will receive fulfill the age appropriate curriculum learning for my child.

I understand this distance learning instructional delivery method is only available during the declared state of emergency for COVID-19 and that this method of instruction will end once this emergency is over; and cannot be requested as a substitute for regular in person school attendance for my child anytime thereafter.

I understand that distance learning means that instructional services will be delivered using audio, video, and electronic transmitted learning materials for the duration of each learning session. I further understand that distance learning does not mean having a casual telephone chat with my child's teacher.

I understand that I will have access to all distance learning information resulting from the sessions conducted during the emergency period in the form of Session Notes and Progress Notes if I request them from my child's teacher and center director.

I understand that agreeing to distance learning for my child does not deny my right to privacy; and that this service can be stopped at anytime so I desire.

Parent Name (please print): _____

Parent Signature: _____ (electronic signature if no printer available)

Date: _____