

Child \_\_\_\_\_

Date Sent \_\_\_\_\_

DSCC # \_\_\_\_\_

Address \_\_\_\_\_

City/County \_\_\_\_\_

Parent/Guardian \_\_\_\_\_

O.T./P.T. \_\_\_\_\_

Vendor/Instructor \_\_\_\_\_

**INSTRUCTIONS:** Please sign and complete on the designated lines and return to our office after evaluation has been completed. Thank you for your cooperation.

I certify I have instructed the above named parents and child in the proper operation and maintenance of the (item) \_\_\_\_\_.

In addition I instructed them in the importance of maintaining their equipment. I explained it is their responsibility to promptly report the need for repairs to the vendor of the equipment and the Division of Specialized Care for Children.

DATE \_\_\_\_\_

VENDOR/INSTRUCTOR \_\_\_\_\_

BUSINESS NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY/STATE/ZIP \_\_\_\_\_

RETURN TO: