

## Checklist for Parents Helping in the Classroom

The following checklist has been developed to assist parents who will be helping in the classroom to ensure Sections 19 and 29 of our BC Provincial licensing regulations are being addressed.

### **Section 19 and 29** -

<b>Preschool Name:</b>  <b>COUNTRYSIDE PRESCHOOL</b>
<b>Parent Name:</b>

Action/Document	Yes	No	Additional Information
Criminal Record Check Obtained (request + CRC)			Date CRC received: _____ Date CRC expires: _____
Copy of Criminal Record Check at preschool			
Character Reference Number 1			
Character Reference Number 2			
Copies of Character References at preschool			
Designated parent is at least 19 years of age			
Immunization Record for child completed with dates.			
Duty parents' immunization record checked and signed			
BC Medical Service Plan number is written on enrolment form for child and duty parent			

## Designated Parent Information and Records

Please fill out the following form with any information related to parent education or child development for children under five.

### **Section 19 and 29** – Relevant work history, training and skills

#### **A) Record of work history or experience with children** (this experience can be volunteer or paid)

Workplace/Organization	Additional Information

#### **B) Training or skills relevant to experience with children under five**

Please give a brief description of training taken and attach documents or certificates if obtained

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#### **C) Training relevant to Section 29: 20 hours of training in parent education/child development**

\* Please note: This training must be in the subject area of child development, guidance, health and safety or nutrition.

Type of training?	
Number of hours taken?	
Where was training obtained?	
Proof of training attached (copy of certificate)	

### **Duty Parent Immunization Record**

Immunization Status for (*print name*) \_\_\_\_\_

To the best of my knowledge my immunization status is:

- Complete and up to date (attach documentation)
- Some immunization but unsure of dates/completion
- Not immunized

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

\_\_\_\_\_  
Date

**Character References**

***Parents helping in the classroom are required to complete two character reference forms. (see below). References may be from a friend, co-worker or (one) family member who can support that the designated parent is of good character and has the personality, ability and temperament to work with children.***

**No. 1** I \_\_\_\_\_ (*reference name*) , have known  
\_\_\_\_\_ (*designated parent*) since \_\_\_\_\_ (*date*) and I  
have had the opportunity to witness her/him interacting appropriately with children.

\_\_\_\_\_  
Reference Signature

\_\_\_\_\_  
Date

**No. 2** I \_\_\_\_\_ (*reference name*) , have known  
\_\_\_\_\_ (*designated parent*) since \_\_\_\_\_ (*date*) and I  
have had the opportunity to witness her/him interacting appropriately with children.

\_\_\_\_\_  
Reference Signature

\_\_\_\_\_  
Date