



Child \_\_\_\_\_  
 DSCC # \_\_\_\_\_  
 Address \_\_\_\_\_  
 City/County \_\_\_\_\_  
 Parent/Guardian \_\_\_\_\_  
 O.T./P.T. \_\_\_\_\_  
 Vendor/Instructor \_\_\_\_\_

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

**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:**