

Positive Guidance, Discipline, and Classroom Management Policy Parent or Guardian Acknowledgement Form

l,Print Full Name	, the parent and/or guardian of $__$	hav
read and/or received a copy of the faci	ility's Positive Guidance, Discipline	and Classroom
Management Policy, revised March 202	22.	
Date Policy Received	Date of Child's Enro	ollment
Decemble Consulting Full Name	Powert/Guardian Si	