ACKNOWLEDGEMENT OF RECEIPT OF LICENSING REPORTS

I, a	s the parent/legal guardian, ofs the parent/legal guardian, ofs the parent/legal guardian, of
	child care center/family child care home acknowledge I have received the following
info	rmation as required by Health and Safety Code sections 1596.8595 and 1596.8895.
	Copy of any licensing report that documents a Type A deficiency cited at this facility; Type A deficiencies are those that, if not corrected, represent an immediate risk to the health, safety or personal rights of children in care. This includes facility visits and substantiated compliant investigations.
	Date(s) of licensing report(s) provided:
	Copy of licensing documents pertaining to a conference conducted by a local licensing agency management representative and the licensee of this child care center/family child care home in which issues of noncompliance are discussed.
	Date of document provided:
	Copy of the Accusation Summary indicating the Department's intent to revoke the license of this child care center/family child care home, until that accusation is either dismissed or resolved through the administrative hearing process or stipulated agreement.
	Date of document provided:
	As a parent/legal guardian of a newly enrolled child in this child care center/family child care home, I have been provided the documents identified above received by the licensee during the 12-month period prior to my child's enrollment.
Му	signature below verifies I have received the documents identified above.
PAR	ENT/LEGAL GUARDIAN SIGNATURE: DATE DOCUMENTS RECEIVED: