

PARTICIPATION IN THE BUILDING (1-B)
BLOCKS FAMILY LITERACY PROGRAM

This permission form indicates that the Building Blocks Coordinator has given you information about the Building Blocks program.

I am aware that:



The Family Literacy Builder will visit my home for twenty half hour sessions or ten hour long sessions. The visits should be completed in approximately 8-12 week time period.

- ☉ After completion of the sessions, the Builder, in consultation with the parent, child and coordinator, may schedule further sessions prior to follow-up visits.
- ☉ With Coordinator approval, sessions can be deferred to another time if outside factors make my family unable to complete the program.
- ☉ Follow up visits will occur for up to 12 months (may be phone calls).



My participation in this program is voluntary and I can withdraw from the program at any time. The Builder and Coordinator can also decide to defer the program if there is just reason.



The Builder could work with me on any of the following:

- ☉ learning activities and games I can do with my child
- ☉ ideas about how I can help my preschooler or school age child
- ☉ learning and reading styles
- ☉ choosing good books for my child



A parent or designated adult needs to be involved and take part in all the visits with the Builder for a minimum of 1 hour per week.

- ☉ **Minimum** committed visits per week: 1 2 3 4 5
- ☉ Preferred length of visit: 30 min 1 hour Other_____



Our family is responsible for contacting the Literacy Builder or if they cannot be reached please call the office if for some reason we will not be available to meet as planned.



Any information about our family is confidential and will not be given to any person or agency, unless required by law.

I understand the above and would like to participate in the Building Blocks program.

Signature: _____

Date _____

Coordinator: _____

**Building Blocks Family Literacy Program
Evaluation Consent Form ¹(1-C)**

It is important that we evaluate our program. We ask that Building Blocks families fill in a few questionnaires. We want to learn things such as:

- Who are the families who use Building Blocks and what things do they want to know?
- What are their reading interests and family activities?
- What did families learn and how did they feel about the Building Blocks program?
- How can we change the program to meet the changing needs in our community?
- How can we let other families know about Building Blocks?
- How can we apply to other funding sources?

The information you provide will be **confidential**. It will only be seen by authorized personnel.

- Any information you give is voluntary, only answer the questions that you want to.
- If you choose not to participate in the evaluation, you may still participate in the Building Blocks program.
- The information you give will be grouped together with all the other families participating in Building Blocks.
- Prior to case studies that focus on a specific family written permission will be obtained.
- You may also ask to see any of the forms in your file at any time.
- If you have any questions about the evaluation, please talk to the Coordinator or the Builder.

Your signature below indicates that you understand, to your satisfaction, the information regarding your participation in the Building Blocks evaluation.

Yes I am willing to participate in Building Blocks Evaluation.

Parent Signature: _____ Date _____

Agency Signature _____

We would also like permission to contact you about any information about our organization, upcoming events and special activities that Literacy for Life Foundation is involved in. Please sign below if you are willing to be added to our contact list. (This list will not be sold or used for any other purpose.)

Parent Signature: _____ Date _____