



Program Assurances

Please print, sign, scan and email this form

_____ **(program name)** hereby provides the following assurances:

Our program will be accessible for children and adults with disabilities in accordance with disabilities requirements including the American with Disabilities Act (ADA).

Authorized Signature

Date

The following staff-child ratio will be maintained in all RIDE Approved classrooms: 3, 4 and 5 year olds: 1:9 ratio with a maximum group size of 18 children per classroom. Kindergarten children: 1:12 ratio with a maximum group size of 24 children per classroom.

Authorized Signature

Date

Our program will notify RIDE of any staff changes related to RIDE-approved classrooms (Administrator, Education Coordinator, Teachers, and Teacher Assistants) within 48 hours.

Authorized Signature

Date

All consultants employed by this program will meet the minimum professional standards in their particular fields, and professional persons whose practice is regulated by state law will meet state requirements.

Authorized Signature

Date

Liability insurance for school personnel, children, transportation services and physical plant will be kept up to date at all times.

Authorized Signature

Date

Reports shall be submitted to the Commissioner of Education in such manner and form as may be required.

Authorized Signature

Date

The Program is open to families for observations and visits whenever the program is in operation.

Authorized Signature

Date