

Little Actions. Big Impact!

www.papromiseforchildren.com

Share Your Story!

Your child is special. Every moment is a learning experience, and with every day your child grows closer to reaching their full promise. Celebrate your child accomplishments with PA's Promise for Children!

Share how your young child has grown and how quality early learning at home and/or in an early learning program is helping your child reach their promise.

Need help starting your child's story? Considering these questions:

- What makes your child special?
- What dreams do you have for your child?
- How do you help your young child grow? How do you help your child feel safe and loved? Learn new things? Meet and get along with new people?
- Do you have the help of a home visitor, therapist or nurse at home? Does your child attend a child care or early learning program? How have they helped you and your child?
- How have you seen your child grow? Has your child overcome illness, disabilities or delays? Learned new words, new skills, or come out of their shell?

Teachers and others may share stories with written permission from the child's parent/guardian.

Your child's story will be profiled on Pennsylvania's Promise for Children website at www.papromiseforchildren.com. We will let you know when your child's story is live so you can share it with your friends and family.

To submit a child's story, complete the attached submission form.

To read published family stories, visit www.papromiseforchildren.com



PA Promise for Children Story Submission Form

Email the completed form to papromise@pakeys.org or mail it to: Promise story submission, ATTN: Mary Hall, PA Key, 200 North 3rd St., 3rd Floor, Harrisburg PA 17101. You may also email to papromise@pakeys.org.

Submissions must include

- Submission form with child's story
- Signed Photo/video waiver form
- Optional: Photo of the child. The photo can also include the rest of the family and/or teachers from a program.

Name of individual submitting the story:

Relationship to child:

Phone:

Email (required):

I would like to submit the story of the following child:

First name of Child:

Age:

Name of parent or guardian:

Address:

City:

County:

Phone:

Email (required):

Program(s) that the child has participated in, if any:

- | | |
|--|--|
| <input type="checkbox"/> Certified/licensed child care | <input type="checkbox"/> Keystone STARS |
| <input type="checkbox"/> Child Care Works (CCIS) | <input type="checkbox"/> Nurse-Family Partnership |
| <input type="checkbox"/> Children's Trust Fund | <input type="checkbox"/> Parent-Child Home Program |
| <input type="checkbox"/> Early Head Start | <input type="checkbox"/> PA Pre-K Counts |
| <input type="checkbox"/> Early Intervention | <input type="checkbox"/> Parents as Teachers |
| <input type="checkbox"/> Head Start | <input type="checkbox"/> Other: |

Any risk factors that impact the child:

- | | |
|--|---|
| <input type="checkbox"/> Living in economically at-risk families (up to 300% of poverty) | <input type="checkbox"/> Mother has less than a high school education |
| <input type="checkbox"/> English Language Learners | <input type="checkbox"/> Born premature or with low birth weight |
| <input type="checkbox"/> Has disability and/or developmental delay | <input type="checkbox"/> Other: |

All submissions will be reviewed for appropriate language and content before being published; incomplete or inappropriate submissions will not be published.

Your Child's Story!

Share below how your young child has grown, and ways quality early learning at home and/or in a quality early learning program is helping your child reach their promise!

Need help starting your child's story? Considering these questions:

- What makes your child special?
- What dreams do you have for your child?
- How do you help your young child grow? How do you help your child feel safe and loved? Learn new things? Meet and get along with new people?
- Do you have the help of a home visitor, therapist or nurse at home? Does your child attend a child care or early learning program? How have they helped you and your child?
- How have you seen your child grow? Has your child overcome illness, disabilities or delays? Learned new words, new skills, or come out of their shell?

Waiver Form

- Must be signed by child's official parent or guardian.
- Parent/Guardian: please complete and sign below.
- OPTIONAL: You may include a photo of your child. The photo may also include the family or teacher.

I hereby grant Berks County Intermediate Unit, the parent organization of Pennsylvania's Promise for Children, its legal representatives and assigns, and those acting with its authority and permission, including but not limited to the PA Office of Child Development and Early Learning, and the Early Intervention Technical Assistance (EITA) the absolute right and permission to copyright, use, reuse, publish, and republish, photographic portraits, pictures, or videos of

(name of child)

without restriction as to changes or alterations, or reproductions thereof in color or otherwise made through any media for art, advertising, trade, or any other purpose whatsoever. I also consent to the use of any printed matter in conjunction therewith.

I hereby waive any right that I may have to inspect or approve the finished product or products or the advertising copy or printed matter that may be used in connection therewith or the use to which it may be applied.

I hereby release, discharge and agree to save harmless Berks County Intermediate Unit, its legal representatives or assigns, and all persons acting under its permission or authority, from any liability by virtue of any blurring, distortion, alteration, or use in composite form, whether intentional or otherwise, that may occur or be produced in the taking of said picture(s) or in any subsequent processing or manipulation thereof, as well as any publication thereof.

I hereby warrant that I am of legal age and have every right to contract in the above regard as parent or guardian for

Name of child

Parent/Guardian's Signature

Date

Parent/Guardian's Name and Address

**Return with submission form to Promise story submission, attn: Mary Hall, PA Key,
200 North 3rd Street, 3rd Floor, Harrisburg PA 17101**

fax: 717-213-0585

**You may also email a scanned copy with signature to papromise@pakeys.org
Pennsylvania's Promise for Children | www.papromiseforchildren.com**