

## Safe Sleep Commitment Form

Safe Sleep pamphlet review and signed Safe Sleep Commitment Form is required by each caregiver and teenage parent licensed under Title 21, Chapter 6 and Title 21, Chapter 7 to provide care to children under the age of three (3) per DCS 15-31 Safe Sleep Commitment and Pamphlet. "Baby" in regard to this form, is defined as a child under the age of one.

<ul> <li>Name of Caregiver</li> <li>Commitment Statement</li> <li>I understand that the safest place for a child under</li> <li>I understand that I shall have the proper equipment</li> <li>I have read and reviewed the Safe Sleep Pamphle</li> <li>I Will: <ul> <li>Not share my bed with the baby.</li> <li>Keep bedding away from the baby's face.</li> <li>Not overdress the baby.</li> </ul> </li> </ul>	t, such as age-appropriate l	
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<ul> <li>3 I have read and reviewed the Safe Sleep Pamphle</li> <li>4 I Will: Not share my bed with the baby. Keep bedding away from the baby's face.</li> </ul>		beds, for each child at the time of placeme
• I will: Not share my bed with the baby. Keep bedding away from the baby's face.	et (CSO-2142).	
Not share my bed with the baby. Keep bedding away from the baby's face.		
Keep bedding away from the baby's face.		
Not overdress the baby.		
Move the baby to a crib as soon as possible if	they fall asleep in a; stroller	er, swing, infant carrier, car seat, sling, etc.
Make sure nothing is in the baby's sleeping	area (pillows, blankets, bur	umper pads, other soft items, toys, etc.).
Use a firm mattress.		
Not place the baby to sleep on furniture suc	ch a sofa or chair.	
Keep any pets away from a sleeping baby.		
Make sure that anyone who watches the bal	by knows about and agree	es to follow the safe sleep requirements.
Caregiver Name	aregiver Signature	Date
Caregiver Name	aregiver Signature	
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Acknowledgments		
I Have:	·	
Reviewed the Safe Sleep Pamphlet with the care	-	
Initial Renewal Amendme		isit for a child under the age of three (3) ye
Verified age-appropriate beds available for each household members.	child at the time of placer	ment, for current placements, and all
Agency Representative Printed Name	gency Representative Signature	Date

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