

BARUCH COLLEGE
ACKNOWLEDGEMENT AND APPROVAL TO BRING A
CHILD ON CAMPUS

Employee's Name _____

Child's Name _____ Age _____

Child's Name _____ Age _____

Child's Name _____ Age _____

Will accompany me on campus:

Day: _____

Date: _____

Time: From _____ to _____

We will visit the following location(s)

_____ Tel. Number _____

_____ Tel. Number _____

I have read the policy and procedures concerning 'Children in the Workplace' and agree to abide by those policy and procedures.

Employees Signature _____ Date _____

Manager/Supervisor Signature _____ Date _____

This form, once approved, should be given to the employee and a copy faxed (646)660-6001 or delivered to Public Safety/Security.

This form can be copied for distribution and use as needed.