# Management Changes

Dear staff member,

We have made the following changes to our practices at the service. Please read the changes and sign and date below. If you have any questions please don’t hesitate to ask the Nominated Supervisor or you can raise questions at the next educator meeting.

Insert changes and the reasons for the changes along with any policies/procedures which will change.

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| **Educator/Employee Name** | **Educator/Employee Signature** | **Date** |
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