## Please sign the acknowledgment below and send back to your licensing official.

This letter is an	acknowledgment from	the Mississippi State 1	Health Chita Carre	
Division to the	person(s) who will be I	held responsible for an	v violetions that	tensure
conducting any	type of inspection.	Possourd for diff	y violations that may	be found while

I, Sanda (name), serve in the capacity of owner director, or director designee of Carterville Christian School (center name). I acknowledge that I was instructed to review my records and building to assure that all documents are current and up-to-date, and that the facility is free of hazards.

I realize that by signing this document that I am agreeing that all required documents that are needed for a temporary, mid-year, and renewal inspection for a license are in place at this time.

Handre Shedd Director Signature

Date of Signature