

**South Carolina Department of Social Services**  
**SHAKEN BABY VIDEO**

The South Carolina Department of Social Services, Adoption Services (DSS), requested that I/we view the video pertaining to the dangers associated with shaking infants and young children and the importance of parents and caregivers learning CPR. I/we acknowledge that I/we have been offered the opportunity to view the above-referenced video.

Name of Foster/Adoptive Parent: \_\_\_\_\_  
(Print or type)

Signature of Foster/Adoptive Parent: \_\_\_\_\_

Date: \_\_\_\_\_

Name of Foster/Adoptive Parent: \_\_\_\_\_  
(Print or type)

Signature of Foster/Adoptive Parent: \_\_\_\_\_

Date: \_\_\_\_\_