

# My Place Family Day Care Glass Management Plan

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Educator Name \_\_\_\_\_

Address \_\_\_\_\_

**Low glass –that is less than 75 cm. from floor level & accessible to children e.g., in play/sleep areas (including sliding doors, other doors with glass, cabinets, tables)**

Child Care Area	Is it safety glass?			Action Plan If safety film not applied what is in place	Actions Completed & Date
	A Yes Stamped/ code	B Yes Audited by Glazer	C Yes Safety Film Applied		

Educator Signature: \_\_\_\_\_

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

Name of Company used: \_\_\_\_\_

Receipt attached: Yes  No