

ABC Preschool

407.250 I 3800 N Austin Ave. Chicago, IL 60634

THIS FORM MUST BE COMPLETELY FILLED OUT BY PARENTS

| A. Child Inforn | nation | | | | |
|--------------------------------------|------------------------------------------------------|--------------------|---------------------------|--------------------|----------|
| Child's Name | | | Gender | | |
| Child's Date of Birth Place of Birth | | | | | |
| B. Enrollment/I | Discharge | | | | |
| Enrollment Date | ; | Dis | scharge Date | | _ |
| C. Hours of Car | re | | | | |
| Please complete they will attend | the following char ABC Preschool. | t. Write your chil | d's drop off and p | pick up time for e | ach day |
| Monday | Tuesday | Wednesday | Thursday | Friday | Saturday |
| AM | AM | AM | AM | AM | AM |
| PM | PM | PM | PM | PM | PM |
| SingleM Parent's InformaMother Name | us of Parent/GuardarriedSeparate ation: _StepmotherF | edDivorced _ | Widowed Legal Guardiar | 1 | |
| | | | | | |

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F. Employment Information:

| Place of Employment Work Hours | |
|-------------------------------------------------|-------------------------|
| Address of Place of Employment | <u> </u> |
| Employment Phone #: | |
| FatherStepfatherFoster Fa | therLegal Guardian |
| Name | |
| Home Address | |
| Home Phone # Cell | Phone # |
| Email | |
| Place of Employment | Work Hours |
| Address of Place of Employment | |
| Work Phone # | |
| F. Health Care Information | |
| Name of Family or Child's Physician Or Christia | nn Science Practitioner |
| Address | Phone# |
| Mental or Physical Characteristics | |
| Allergies | |



1. Please add any individuals other than the child's parents that are able to pick up the child

G. Pick Up Authorization:

regularly. Individuals on the list will have to provide a photo ID in order to guarantee the child's safety. A copy of the individual's photo ID will be added to the child's file for future pick-ups. I hereby authorize the following individuals to pick up my child when I am unavailable. Phone # Name Address 2. Please add any individuals other than the child's parents that are able to pick up the child occasionally. Individuals on the list will have to provide a photo ID in order to guarantee the child's safety. A copy of the individual's photo ID will be added to the child's file for future pick-I hereby authorize the following individuals to pick up my child when I am unavailable. Address Phone # Name H. Emergency Contacts (other than parents): Please add two people that ABC Preschool can notify in case there is an emergency and parents are unavailable. Address Phone #_____ 2. Name______Relationship to Child_____ Address______ Phone #_____



I. Child's Individual Development

| Does child have any medical restrictions: Ye | es No | | | |
|-------------------------------------------------|-------------|-----|----|------|
| If yes, please explain and provide note from ph | nysician | | | |
| | | | | |
| Does child have chronic illness: | Yes | No | | |
| If yes, explain and provide physician note and | action plan | | | |
| | | | | |
| | | | | |
| Does your child receive social services from an | n agency: | Yes | No | |
| If yes, explain | | | | |
| | | | | |
| Does your child have an IEP: Yes N | o | | | |
| If yes, explain and provide IEP | | | | |
| | | | | |
| | | | | |



2. Written Agreements and Consents:

A. Field Trip Authorization

| I authorize ABC Preschool to take mand specially arranged outings. | ny child on walking trips, to nearby public parks/playgrounds, |
|----------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Signature | Date |
| Signature | Date |
| B. Emergency Medical Authorizat | ion |
| Camp) care, you are hereby authoriz physician or medical facility selected | ll or meets with an accident in your (ABC Preschool and Day led, without liability, to obtain medical care for my child. Any d for the aforementioned purpose is hereby authorized, my child medical aid, first aid, and CPR as needed in the best |
| Signature | Date |
| Signature | Date |
| C. Research Involvement | |
| ABC Preschool does not participate | in Child Research. |
| Signature | Date |
| Signature | Date |
| D. Prayer Authorization | |
| I authorize my child to say grace bef religious instruction. | Fore meals in English and in Spanish without any formal or |
| Signatura | Date |

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Signature______Date_____



E. Photograph, Video, and Film Authorization

I authorize to take pictures, videos, and/or film of my child and place in the daycare for educational purposes only and not to be used for any other purpose.

| Signature | Date |
|--------------------------------------------------------------------------------------------|----------------------------------------------------------------------------|
| Signature | Date |
| Website and Social Media Release | |
| I authorize ABC Preschool to take pictures, v and social media for educational and promoti | video, and/or film of my child and release on website ional purposes only. |
| Signature | Date |
| Signature | Date |
| F. School-Age Children | |
| ABC Preschool does not provide transportation before/after school program please complete: | |
| Name of Person/Agency responsible of picki | ng-up child: |
| Phone # of person/agency picking-up child: _ | |
| What time will child depart from ABC Presch | hool? |
| Name of Person/Agency responsible of dropp | ping-off child: |
| Phone # of person/agency child: | |
| What time will child arrive back to ABC Pres | school? |
| School Name | |
| School Address | |
| School Phone# | |



G.

ABC Preschool will not provide drop off or pick up services for extra curriculum activities before or after regular school schedule.

3. Health Reports

All children enrolled in ABC Preschool must have a health examination on file unless it is waived in accordance with section 407.310(a) (c). Children must also have a dental examination on file.

4. Proof of Identity

- A. ABC Preschool requests a certified copy of child's birth certificate and social security card to be submitted within 30 days of child's start date. The daycare center will return original documents after making copies by the next business day.
- B. The parent will be notified that the ABC Preschool will be required by law to notify the Illinois State Police or local law enforcement agency if the parent fails to submit proof of child's identity. After the Illinois State Police or local law enforcement agency has been notified, the parents will be given an additional 10 days to comply by submitting the required documentation.
- C. Any inaccurate or suspicious affidavit received will be reported by ABC Preschool to the Illinois State Police or local law enforcement.
- D. ABC Preschool will flag the record of a child enrolled at the center that is reported by Illinois State Police as a missing person and shall immediately report to the Illinois State Police any request concerning flagged records or knowledge as to the where about of any missing child.

J. Discharge from ABC Preschool

ABC Preschool will discharge any child after attempts have been made to meet the child's individual needs, demonstrates inability to benefit from the type of care offered by the center, or whose presence is detrimental to the group.

K. ABC Preschool will help parents create a plan for the child after discharge. Parents will also be provided with resources and referrals from other agencies or facilities in the best interest of the child's needs.



407.260 f

Late Pick-up & Late Drop-off Policy

All parents are responsible for notifying in the event of a late pick up or drop off. If a phone call is not received from the parent advising that they will be late. The following plan of action will apply to the parent or responsible person who consistently pick-up and drop off the child after the time slot determined at enrollment and the given grace period of time has been exceeded.

- The first late arrival or pick-up, the parent or adult will be given a **verbal reminder** of the designated time slot and reminded of their tardiness.
- After the second late arrival or pick-up, the person will be given a written late pick-up notice with a charge of \$1.00 per minute late. We understand that emergencies can occur; we strongly encourage parents to call ahead of time and add the hourly rate of \$15.00 per hour/ per child.
- \$1.00 per minute late will be charged for every minute past your time slot. These late fee will be applied **every time** the child is picked-up late, unless parents make arrangements in advance. These fees are due immediately or the next day the child attends.
- If child is not picked up by scheduled time set during enrollment ABC Preschool staff will call parents immediately.
- If unable to contact parents on phone numbers provided, ABC Preschool staff will call 1 emergency contact on list, if unable to communicate 2 emergency contact will be called.
- All calls made to parent/guardians, emergency contacts and pick-up authorization contacts will be documented with time, name of person being contacted, conversation and or message, name of person making call.
- If parents and emergency contacts cannot be reached with in the first 30 minutes after set scheduled pick up time ABC Preschool will than proceed to contact local law enforcement and or DCFS. Staff will continue to make attempts to reach the parent and/or the child's emergency contacts. Staff cannot keep the center open in order to provide care and shelter for the child.
- Staff will keep a written record of the attempts to contact authorized persons and the eventual manner of discharge and will involve the Site Director. Sign-out sheets have to be signed by the authorized person who picks up the child this may include a Naperville Police Officer or DCFS representative.
- In this situation the most appropriate course of action is to contact the local law enforcement, and/or (DCFS) Department of Children and Family Services.

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- It is the parent/guardian responsibility to update any changes in phone numbers and or addresses. This includes updating information for emergency contacts and pick-up authorizations.
- ABC Preschool has the responsibility to maintain the safety and well-being of the child (ren) who are waiting to be pick-up by parent/guardians or outside authorization.
- ABC Preschool Site Director or Staff must discuss the situation with parent/guardians ONLY. No child (ren) should be held accountable for any situation.

| Child Name: | Classroom: |
|--------------------------|------------|
| Parent Signature: | Date: |
| Site Director Signature: | Date: |



407.270a

Guidance and Discipline Policy

ABC Preschool understands that sometimes children need help to build their self-control. Discipline at ABC Preschool will be used to help children balance their needs with those of others, to feel good about them, and to become increasingly independent. At ABC Preschool is important for every staff member to build a positive relationship with the children. Positive guidance includes creating an atmosphere of quiet firmness, clarity, and relationship with the children. Positive guidance includes creating an atmosphere of quiet firmness, clarity, and conscientiousness, while using reason, Effective discipline requires follow through; time and patience are required for these ideas to be effective, Progress may be slow; it often takes a long time for children to understand self-control, instead of adult-imposed discipline.

The following behaviors are prohibited, in accordance with State of Illinois Licensing Standards for Day Care Centers; -Corporal punishment; including hitting, spanking, seating, beating, shaking, pinching and other measures intended to induce physical pain or fear;

- -Threatened or actual withdrawal of food, rest or use of the bathroom;
- -Abusive or profane language;
- -Any form of public or private humiliation, including threats of physical punishment;
- -Any form of emotional abuse, including shaming rejecting terrorizing or isolating a child.

GUIDANCE AND DISCIPLINE POLICY IMPLEMENTATION PROCEDURES:

ABC Preschool, depends on full enrollment of all its programs, because of the number of children involved maintaining control can occasionally become a problem for any teacher.

Rules of Behavior Written rules are established which set limits of behavior required for the protection of the group and individuals. These rules are developed by program staff and children, and posted in each classroom. The rules are written so as to be understood by children, and may be accompanied by pictures to help illustrate the rule.

<u>Oral Reprimand:</u> When the child disobeys a program rule established to provide the safest and most beneficial environment for all, the staff member or Site Director will speak to the child and remind the child of the rules.

<u>Consequence:</u> When a child's improper action or behavior occurs a second time, the child is reminded again and given a consequence. Reflective Time may be used as a change for the child to gain control, regroup, and ponder his/her behavior. The number of minutes of Reflective Time should never be longer that the age of the child.

<u>Incident Report:</u> A teacher may write an official incident report if a child's behavior warrants such. This may occur if a child injures or causes injury to another child, is involved in a physical fight, exhibits other serious behavioral problems. Incident report will be signed by teacher, Site Director, and parent. The original report will be given to the parent and a copy will be kept in the child's file.



<u>Phone call home:</u> If a child's pattern of unacceptable behavior continues, the staff member will discuss the situation with the Site Director. The parent is made aware of the situation by the Site Director and asked to discuss the situation with the child.

<u>Weekly Observation Report:</u> When a child exhibits a pattern of unacceptable behavior, staff may choose to write daily observations pertaining to the child's overall behavior in the program.

<u>Parent Conference</u>: Under certain circumstances a parent conference may be scheduled, giving the parent and staff the opportunity to discuss the pattern of unacceptable behavior and develop a plan for responding to the behavior. A behavior management plan must be agreed on by the parent, documented in the child's file, and implemented by all staff working with the child.

Exclusion from program: After previous warnings, and if the action or behavior continues, ABC Preschool reserves the right to exclude any child from attending the program. A child will be excluded from the program only after exhaustive efforts have been made to manage the child's behavior. This final step may be necessary to ensure the safety and well-being of each and every child. The Site Director will make every effort to identify and provide referrals and/or resources to the parent in placing the child in the appropriate setting.

| Child's Name: | Classroom: | |
|---------------------|------------|--|
| Parent's Signature: | Date: | |
| | | |
| | | |

407.310A

Health Requirements for Children

ABC Preschool requires a complete Medical Exam that includes:

- Hemoglobin/Hematocrit
- Lead Screening with numerical results
- Tuberculin screening results/Questionnaire
- Hearing/Vision Screening
- Dental Exam

Immunizations include:

- Poliomyelitis
- Measles
- Rubella
- Mumps
- Diphtheria
- Pertussis
- Tetanus
- Hemophilic influenza B
- Hepatitis B



• Varicella (chickenpox)

ABC Preschool will provide approved DHS

Children enrolled in ABC Preschool are required to have a completed medical exam less then 6 months prior to enrollment date on original DHS form.

Children transferring form another center into, will accept medical exam if less then one year prior to enrollment date. Medical exam must be on original DHS form.

Medical Exams are valid for two years with the exception of the subsequent examinations for school-age children. School-age children medical exams shall be in accordance with the Illinois School Code [105ILCS 5/27-8.1] and the Child Health Examination Code (77 111.Adm.Code665).

Medical Exam should list all received immunizations with dates immunizations where given to child. Parents may also provide Immunization record book. Required immunizations required by the Illinois Department of Public Health in its rule (77 111.Adm. Code 695, Immunization Code, must be up to date.

Children enrolled in ABC Preschool in a high-risk group determined by examining physician required to have Tuberculin Skin test conducted and test results should be recorded on original DHS Medical Exam Form.

Children enrolled in ABC Preschool #1, Inc. of the age of one to six years old must be screened for Lead Poisoning if residing in areas defined as high-risk by the Illinois Department of Public Health. A completed Lead Risk Assessment is required for children residing in low-risk areas by the Illinois Department of Public Health.

According to Illinois state law, children may be exempt from immunizations and/or examinations under two conditions: 1) if it is certified in writing by the child's physician to be medically contraindicated; and/or 2) if the parent objects on religious grounds and provides a written statement. In each, the specific immunization/examination must be identified and the medical condition or the specific religious belief must be stated. ABC Preschool requires that parents provide an original written statement that sets forth fully the religious belief that is the basis for their objection, instead of relying on a prepared form which may not accurately or sufficiently describe their religious belief.

Children enrolled in ABC Preschool, exempt from immunizations and/or the physician on original DHS Medical Exam Form must indicate tuberculin test for any medical reason.

ABC Preschool will maintain an accurate list of children enrolled who are not immunize as Illinois Department of Public Health requires. Number of non-immunized children enrolled at ABC Preschool will be available to parents if requested.

Original DHS Medical Exam Form must be dated and sign by the child's examining physician. Form must include name, address, and telephone number of examining physician responsible for child's health care.

| Child Name: | Classroom: |
|-------------------|------------|
| | |
| Parent Signature: | Date: |



Pesticides Policy and Procedures

To protect the health and well being of children, parents and staff, ABC Preschool implements an integrated pest and rodent control plan. ABC Preschool. Site Director and Maintenance staff examines the facility monthly for any trace of rodents, roaches, and insects. When applying nontoxic pesticides strict compliance with label instructions and toys items handled by children and staff will be removed. Maintenance staff will insure no pesticide residues are left in areas accessible to children or staffs before areas are used. Parents and staff will be notified of the circumstances that prompt the need for pesticides. ABC Preschool maintains monthly inspection log of services is available at the Front Desk.

In order to prevent infestation of any kind, the following preventative steps are taken:

- * All garbage and refuse shall be collected and discarded daily and after meals and stored in a manner that will not provide harborage for insect's rodents or other pests. An adequate number of covered, durable watertight insect and rodent-proof garbage and refuse containers are provided for use. Garbage and refuse containers used to discard supplies, food products or disposable meal service supplies shall be tightly covered and lined with plastic and discarded immediately.
- * The center shall be cleaned daily and kept in a sanitary condition at all times. Appropriate sanitation procedures are implemented equipment. Toys, table, tops, furniture and other similar equipment used by children shall be washed and disinfected when soiled or contaminated with matter such as food, body secretions or excrement.
- * Cleaning of food particles and grease from kitchen appliances such as toasters, ovens stoves, refrigerators and microwaves is done on a daily basis.
 - * Windows are securely screened to prevent the entrance of insects.
 - * All doors are securely closed.

| Child Name: | Classroom: |
|-------------------|------------|
| | |
| Parent Signature: | Date: |



Food Agreement

ABC Preschool will do all possible to provide meals for children with allergies, food restrictions due to religious and or cultural believes. In the case ABC Preschool cannot make menu modifications due to monitory harshness, multiple allergies; parent/guardians are responsible of providing meals. Provided meals must comply with licensing standards and nutritional guidelines. Meals provided by parents must be label with food name, preparation date, child name, and meal prepared by.

| Child Name: | DOB: |
|-------------------|-------|
| Parent Signature: | Date: |