



DO NOT PRINT THE PACKET 2-SIDED PLEASE!

LITTLE HEARTS PRESCHOOL
7904 Princeton Rd.
Liberty Township, OH 45044
513-759-8430 Fax 513-759-8436

ENROLLMENT PACKET CHECKLIST 2023-2024 School Year

Please complete the following check list and attach completed forms and other requested information. **THIS ENTIRE PACKET MUST BE COMPLETED PRIOR TO THE FIRST DAY OF ATTENDANCE. YOUR CHILD WILL NOT BE PERMITTED TO ATTEND SCHOOL UNTIL WE HAVE ALL NECESSARY FORMS AND INFORMATION ON FILE.**

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- ☐ Child Enrollment and Health Form (ODJFS form 01234, 4 pages, form must be dated Rev.10/2021)
- ☐ Child's Medical Statement (ODJFS form 01305, must be completed by physician and have immunization records attached, form must be dated Rev. 10/2021)
- ☐ Routine Trip Permission for Child Care Form
- ☐ Emergency Medical Authorization Form
- ☐ *Copy of Birth Certificate (not included in the packet but must be provided)
- ☐ *Copy of Health Insurance Card (not included in this packet but must be provided)
- ☐ Student Background Information Form (2 pages)
- ☐ Agreement Between Parent & Little Hearts Preschool (2 pages – sign and date)
- ☐ Parent Roster and Communication Agreement Form
- ☐ Photography Release Form
- ☐ Release Information Form
- ☐ Front Door Drop Off/Pick Up Procedures and Reminders (return signed portion only)
- ☐ Child Guidance and Behavior Policy (return signed portion only)
- ☐ Automated Payment Processing Form (required unless paying in full up front)
- ☐ ~~T-shirt order form and payment (optional)~~ **SOLD OUT!**
- ☐ Children's Theatre Season Ticket Order Form (optional for ages 3 and up; pay in cash only separately)
- ☐ *Supply fee (2 days: \$40, 3 days: \$50, 4 days: \$60) Payments may be combined and made through Procure.
- ☐ *First month's tuition (please refer to welcome letter for tuition amount)
- ☐ *Additional medical forms for special medical conditions and/or medicine to be kept on site (not included in this packet but must be provided if your child has ANY special medical conditions and/or ANY medicine to be kept on site. A link to these forms is provided on our website.)
- ☐ *Court Ordered Custody Agreement signed by judge (not included in packet but must be provided if there is a custody or shared parenting agreement currently in place for child being enrolled)

***These items are NOT included in this packet but are still necessary for enrollment if applicable.**

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"Growing in the grace and knowledge of our Lord and Savior Jesus Christ."

2 Peter 3:18

Ohio Department of Job and Family Services
**CHILD ENROLLMENT AND HEALTH INFORMATION
 FOR CHILD CARE**

This form shall be completed prior to the child's first day of attendance and updated annually and as needed.

Child's Name		Date of Birth		First Day at Program/Home	
Home Address				City	
State		Zip Code		Home Telephone Number	
Parent/Guardian Name #1				Relationship to Child	
Home Address <input type="checkbox"/> Same as Child's				Home Telephone Number <input type="checkbox"/> Same as Child's	
City			State		Zip
Email Address (if applicable)			Cell Phone (if applicable)		
Parent's Work/School Name			Parent's Work/School Telephone Number		
Parent's Work/School Address				City	
Please indicate if this name should be released if a parent/guardian, of a child attending the program/home requests contact information for other parents/guardians. <input type="checkbox"/> Yes <input type="checkbox"/> No If you answered yes, please indicate which information above to include on the list <input type="checkbox"/> Work # <input type="checkbox"/> Cell # <input type="checkbox"/> Home # <input type="checkbox"/> Email Where can you be reached while your child is in this program/home?					
Parent/Guardian Name #2				Relationship to Child	
Home Address <input type="checkbox"/> Same as Child's				Home Telephone Number <input type="checkbox"/> Same as Child's	
City			State		Zip
Email Address (if applicable)			Cell Phone		
Parent's Work/School Name			Parent's Work/School Telephone Number		
Parent's Work/School Address				City	
Please indicate if this name should be released if a parent/guardian, of a child attending the program/home, requests contact information for other parents/guardians. <input type="checkbox"/> Yes <input type="checkbox"/> No If you answered yes, please indicate which information above to include on the list <input type="checkbox"/> Work # <input type="checkbox"/> Cell # <input type="checkbox"/> Home # <input type="checkbox"/> Email Where can you be reached while your child is in this program/home?					
Emergency Contacts: Parents <u>cannot be listed</u> as emergency contacts. List the name of <u>at least one person</u> who can be contacted in the event of an emergency or illness if you cannot be reached . Any person listed should be able to assist in contacting you. At least one person listed must be able to take responsibility for the child in case the parent/guardian cannot be contacted and should be at least 18 years of age.					
Name			Name		
City		State		City	
Telephone Number		Relationship to Child		Telephone Number	
Other numbers where emergency contact can be reached (if applicable)			Other numbers where emergency contact can be reached (if applicable)		
Name of Physician or Clinic/Hospital					
Street Address					
City		State		Telephone Number	

Child's Name
Allergies, Special Health or Medical Conditions, and Medical Foods
<p>Fill in this section accurately and completely. Please note that if your child has a current health or medical condition requiring child care staff to perform child specific care, such as: to monitor the condition, provide treatment, care, or to give medication, the JFS 01236 "Child Medical/Physical Care Plan for Child Care" must be completed and be kept on file at the program/home.</p>
<p>Does your child have any food, medication or environmental allergies? <i>(check all that apply)</i></p> <p> <input type="checkbox"/> No <input type="checkbox"/> Yes - <i>check all that apply</i> <input type="checkbox"/> Food <input type="checkbox"/> Medication <input type="checkbox"/> Environmental Please list and explain: </p>
<p>Does your child's allergy/allergies require child care staff to monitor your child for symptoms to take action if a reaction occurs, or give emergency medication to your child? <i>(check one)</i></p> <p> <input type="checkbox"/> No <input type="checkbox"/> Yes - a JFS 01236 "Child Medical/Physical Care Plan for Child Care" must be completed. </p>
<p>Does your child have a developmental delay or special health or medical condition? <i>(check one)</i></p> <p> <input type="checkbox"/> No <input type="checkbox"/> Yes - please explain </p>
<p>Does the special health or medical condition require child care staff to perform a procedure, or perform child specific care such as: to monitor your child for symptoms or administer medication during child care hours? <i>(check one)</i></p> <p> <input type="checkbox"/> No <input type="checkbox"/> Yes - a JFS 01236 "Child Medical/Physical Care Plan for Child Care" must be completed. </p>
<p>Is your child currently using any medication or medical food? <i>(check one)</i></p> <p> <input type="checkbox"/> No <input type="checkbox"/> Yes - please explain </p>
<p>If yes, does this medication or medical food need to be administered at the child care program/home?</p> <p> <input type="checkbox"/> No <input type="checkbox"/> Yes - a JFS 01217 "Request for Administration of Medication" must be completed and kept on file for each medication and a JFS 01236 "Child Medical/Physical Care Plan for Child Care" must be completed for the medical food. </p>
<p>Does your child have any dietary restrictions, including those for medical, religious or cultural reasons? <i>(check one)</i></p> <p> <input type="checkbox"/> No <input type="checkbox"/> Yes - please explain </p>
<p>Does this dietary restriction require a modified diet that eliminates all types of fluid milk or an entire food group?</p> <p> <input type="checkbox"/> No <input type="checkbox"/> Yes - written instructions from the child's health care provider must be on file. <input type="checkbox"/> N/A - program does not provide meals or snacks to the child. </p>

Child's Name

List any history of hospitalization, outpatient surgery, or previous health concerns that would be needed to assist the staff or medical personnel in an emergency situation.

☐ Not applicable

List any additional information about your child that would be useful for staff to know, such as fears or ways that your child prefers to be comforted.

☐ Not applicable

List any additional information about your child that would be useful for staff to know, such as eating or sleeping habits.

☐ Not applicable

List any additional information about your child that would be useful for staff to know, such as special routines, or behavior needs.

☐ Not applicable

Child's Name

Diapering Statement

Is your child toilet trained? <input type="checkbox"/> Yes (If yes, skip to Emergency Transportation Authorization section) <input type="checkbox"/> No (If no, fill out the following:)	
The program's policy is to check diapers every <u>2</u> hours. Please indicate if you want your child's diaper checked according to the program's policy or another:	
<input type="checkbox"/> I agree with the program's schedule	<input type="checkbox"/> I do not agree, please check my child's diaper every _____ hours.

Emergency Transportation Authorization

Give <u>Permission</u> to Transport	OR	Do Not Give <u>Permission</u> to Transport				
Program or Home Name Little Hearts Preschool has permission to secure emergency transportation for my child in the event of an illness or injury which requires emergency treatment. The emergency transportation service will determine the facility to which my child will be transported.	Do not sign both	Program or Home Name Little Hearts Preschool does not have permission to secure emergency transportation for my child in the event of an illness or injury which requires emergency treatment. I wish for the following action to be taken:				
<table style="width: 100%;"> <tr> <td style="width: 70%;">Parent's Signature</td> <td style="width: 30%;">Date</td> </tr> </table>	Parent's Signature	Date		<table style="width: 100%;"> <tr> <td style="width: 70%;">Parent's Signature</td> <td style="width: 30%;">Date</td> </tr> </table>	Parent's Signature	Date
Parent's Signature	Date					
Parent's Signature	Date					

Acknowledgement of Policies and Procedures

I have reviewed and received a copy of the program's or home's policies and procedures/handbook. <input type="checkbox"/> Yes <input type="checkbox"/> No (check one)	
This form, after being completed and signed by the parent/guardian, must be reviewed for completeness and signed by the administrator/designee prior to the child receiving care.	
Parent/Guardian Signature(s)	Date
Administrator/Designee Signature	Date

The form is to be initialed and dated, at least annually, after it has been reviewed by the parent/guardian. This is to indicate all information has stayed the same or changes have been noted. If significant changes are needed, please complete a new form.			
Parent/Guardian Initials	Date of Review	Administrator/Designee Initials	Date of Review
Parent/Guardian Initials	Date of Review	Administrator/Designee Initials	Date of Review
Parent/Guardian Initials	Date of Review	Administrator/Designee Initials	Date of Review

Note:

This is a prescribed form which must be used by child care providers to meet the requirements to rules 5101:2-12-15, 5101:2-13-15, and 5101:2-14-04. This form must be on file at the program or home on or before the child's first day of attendance and thereafter while the child is enrolled.

Ohio Department of Job and Family Services
CHILD MEDICAL STATEMENT FOR CHILD CARE

Child's Name (<i>print or type</i>)	Date of Birth
Note: Sections A and B must be completed by the examining Health Care Practitioner (Physician/Physician's Assistant/Advanced Practice Registered Nurse/Certified Nurse Practitioner):	
Section A- EXAMINATION	
√ The above named child has been examined.	
√ The above named child is in suitable condition for participation in group care (i.e. free of infectious disease, mentally and physically fit to be in group care).	
√ The above named child does not have allergies OR is allergic to the following (<i>please list in space below</i>):	
Check below, if applicable:	
<input type="checkbox"/> Additional information that will assist the child care program in providing appropriate child care for the above named child (special health care and developmental considerations) accompanies this form.	
Optional: Measurements and Recommended Assessments/Screenings	
Height _____	Vision _____ <input type="checkbox"/> Yes <input type="checkbox"/> No
Weight _____	Lead _____ <input type="checkbox"/> Yes <input type="checkbox"/> No
BMI _____	Hearing _____ <input type="checkbox"/> Yes <input type="checkbox"/> No
Dental _____	Hemoglobin _____ <input type="checkbox"/> Yes <input type="checkbox"/> No
Other: _____	
Notes:	
Signature of Examining Health Care Practitioner	Date of Examination
Name of Examining Health Care Practitioner	Telephone Number
Street Address	City, State and Zip Code

ATTACH A COPY OF THE CHILD'S IMMUNIZATION RECORD INCLUDING DATES (MM/DD/YYYY FORMAT) OF DOSES OF ALL IMMUNIZATIONS.

IMMUNIZATION (Complete ONLY ONE SECTION below)	
Section 5104.014 of the Ohio Revised Code requires immunizations against the following diseases:	
Chicken pox, Diphtheria, Haemophilus influenzae type b, Hepatitis A, Hepatitis B, Influenza, Measles, Mumps, Pertussis, Pneumococcal disease, Poliomyelitis, Rotavirus, Rubella and Tetanus.	
Section B - To be completed by the EXAMINING HEALTH CARE PRACTITIONER: <input type="checkbox"/> The above named child has been immunized against the diseases listed above. <i>If an immunization is medically contraindicated or not medically appropriate for the child's age, note any exceptions by listing the specific immunization(s):</i>	Initials of Examining Health Care Practitioner Date
Section C - To be completed by the child's parent ONLY IF WAIVING AN IMMUNIZATION(S): <input type="checkbox"/> I have declined to have my child immunized for reasons of conscience, including religious convictions against all of the diseases listed above or against the following disease(s):	Signature of Parent Date

Ohio Department of Job and Family Services
ROUTINE TRIP PERMISSION FOR CHILD CARE

Routine Trip Information	
Routine Trip Destination(s) Areas within Liberty Heights Church not in preschool wing	
Date of Permission (<i>valid for one year</i>) 8/28/2023	
Mode of Transportation (<i>walking, school bus, public transportation, parent vehicles, provider vehicle and driver</i>) walking or riding in a stroller	
During this trip children will have access to water that is 18 inches or more in depth. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Are water activities planned in water that is 18 inches or more in depth? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If yes, a swimming permission slip is required)	
Child's Information	
Child's Name	
My child is <input type="checkbox"/> not over 4 years and/or 40 lbs <input type="checkbox"/> over 4 years and 40 lbs <input type="checkbox"/> 8 years and/or over 4' 9"	
Signature	
I grant permission for my child to participate in the routine trips described above.	
Parent's Signature	Date



Little Hearts Preschool

Emergency Medical Authorization

Name: _____ Age: _____

Address: _____ City: _____ State: _____ Zip: _____

Date of Birth: _____ Sex (M/F): _____ Phone: _____

Purpose-To enable parents and guardians to authorize the provision of emergency treatment for children who become ill or injured while under church authority when parents or guardians cannot be reached.

Father's Name: _____ Work #: _____ Cell #: _____

Father's Medical Insurance Information: _____

Mother's Name: _____ Work #: _____ Cell #: _____

Mother's Medical Insurance Information: _____

In case of a Medical Emergency, or misconduct of my child, in which a parent/guardian cannot be reached, please call:

Name: _____ Relation: _____ Phone: _____

Please list any medical information pertinent to your child: _____

In the event of a medical emergency, I understand that every effort will be made to contact the above listed persons. In the event that none of the above can be reached, I hereby give permission to any competent and licensed medical personnel to transport, hospitalize and secure proper treatment, order proper injection, anesthesia and surgery for the above named child.

Date: _____ Signature of Parent/Guardian

Address: _____



Little Hearts Preschool

Student Background Information

Child's Name: _____

Date of Birth: _____ Gender: M/F

Mother's Name: _____ Occupation: _____

Father's Name: _____ Occupation: _____

Marital Status: _____ Email: _____

Siblings and their ages: _____

Is this your child's first preschool experience? _____ If no, what is their experience?

Is child toilet trained? _____ Describe assistance needed and words used: _____

Does your child have specific fears? _____

Does your child have vision or hearing problems? If so, please explain:

Does your child have health problems that we should be aware of?

Does your child have any allergies? _____

Are there any foods or drinks your child should not have? _____

Does your child take any regular medication? _____

Are there any special medical, physical or emotional needs that the school should be aware of? _____

Do you have any concerns about any aspect of your child's development?

Does your child play well alone? _____ In groups? _____

Does your child accept corrections easily? _____

What is the method of behavior control used in your home? _____

Please circle items below that describe your child:

Happy	Aggressive	Friendly	Moody	Clumsy
Dependent	Stubborn	Impulsive	Fearful	Quiet
Good Natured		Attentive	Sympathetic	Shy
Even Tempered		Other: _____		

Has your child learned to:

Say nursery rhymes? Y/N Sing Songs? Y/N Listen to stories? Y/N

Say his/her name? Y/N State his/her age & sex? Y/N Dress self? Y/N

Throw & catch a ball? Y/N Name basic colors? Y/N Hop on one foot? Y/N

Balance on one foot? Y/N Ride a tricycle? Y/N Write name? Y/N

Draw a person? Y/N Count? Y/N If yes, how far? _____

Recognize and name common objects? Y/N Follow simple directions? Y/N

Please list 2 goals that you have for your child for this school year:



AGREEMENT BETWEEN PARENT AND LITTLE HEARTS PRESCHOOL

The following terms and conditions involved in the care of _____ (child's name) are understood and agreed upon between _____ (Parent's/Guardian's name) and Little Hearts Preschool referred to hereafter as "Program."

The program agrees that:

1. The Program will provide your child with a valuable learning experience.
2. The Program will provide excellent care and judgment in all matters related to the welfare and safety of the child.
3. In addition to physical care, the Program will provide the child with emotional, social, spiritual and mental development opportunities in a group situation.
4. The Program will not release the child to anyone other than the parent or guardian unless there is written permission from the parent or guardian.
5. In case of an accident or illness, the teacher will promptly take such reasonable measures as are in her judgment, in the best interest of the child, and will notify the parents as soon as possible.
6. The teacher will examine the children daily for symptoms of contagious diseases or illnesses. If a child has a fever or other symptoms, he/she will not be permitted to return to the Program until free of fever or symptoms for 24 hours without the aid of fever reducing medication.
7. The Program will give written notice to the parents of any known exposure to a contagious disease by more than one child.
8. The Program will provide toys and equipment in sufficient quantity to allow for a variety of play and learning activities during the day.
9. The Program will not be responsible for items brought to school by their child.

The Parent agrees that:

1. The parent will pay the tuition as follows: tuition is divided into monthly payments. The parent will pay the Program in advance on the first (1st) school day of every month for regular care given to the above child. Tuition is paid by the month based on a yearly fee. Responsibility for payment on time is that of the parent or guardian who signs this entrance agreement form. A late tuition fee of \$10.00 will be charged if payment is received after the tenth (10th) of the month. If an acceptable arrangement for payment has not been made upon payment due date plus two weeks of grace, the contract for services to the child may be terminated.

2. The parent will not violate the hours of care agreed upon. A late charge of \$1.00 per minute per child will be charged after the designated pick-up time.
3. If the child is ill and unable to participate in regular classroom or playground activities, he/she will remain at home until his/her condition improves. Children with temperatures above 100 degrees, diarrhea, vomiting, or other symptoms of illness will not be brought to the Program. If the child becomes ill at the Program, the parent will be notified and will come for their child as soon as they are contacted.
4. In case of illness or accident, when a parent cannot be contacted by the Program and in judgment of the teacher the illness or accident requires a physician, the children's physician listed on the Child Enrollment and Health Information Form may be called at the parent's expense. The parent is responsible for updating addresses and phone numbers when changes occur.
5. In the event that a child has a contagious illness, the parent will notify the Program. The child will not be allowed to return until all danger of contagion has passed. A release form from the doctor may be required.
6. In all emergencies, the Program has permission to take such reasonable measures as are, in the judgment of the teacher, necessary for the welfare and safety of the child.
7. The Program reserves the right, after evaluation and conference with the parent, of dismissing any child if after entering, he/she is unable to participate in group experiences.
8. Liability for the acts of the child while under care of the Program is the parent's responsibility.
9. The Program is not liable for accidents occurring to the child while he/she is in its care, unless it can be proved that the accident was a direct result of the teacher's negligence.
10. The parent will give a 30-day notice when the child is to be withdrawn.

Both parties, Little Hearts Preschool and the Parent understand and agree that:

1. This agreement is a contract binding for both operator and parent.
2. Either the parent of the Program upon notification of intention may terminate the contract at least two weeks in advance, or at a time by mutual agreement of both parties.

I have read and understood the Little Hearts Preschool Parent Handbook and Parent/Program Agreement.



(Authorized Signature of Program)

6/30/23

(Date)

(Signature of Parent or Guardian)

(Date)



Parent Roster

I agree to have additional information (parents' names, telephone number **plus** child's name, class placement, home address) included on the parent roster which will be made available upon request to any parent whose child is enrolled in the center. If you checked "no" on the Child Enrollment and Health Information Form that neither mom's nor dad's name should be released if another parent of a child attending the program requests contact information, then please check "no" here, too, and your family will be left off of the parent roster. If you checked "yes" on the Child Enrollment and Health Information Form that either mom's and/or dad's name can be released if another parent of a child attending the program requests contact information, then this box either gives or denies permission for us to also include your child's name, class and home address on the parent roster.

<input type="checkbox"/> Yes <input type="checkbox"/> No	Parent/Guardian Signature:	Date:
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Communication Agreement

Communication between school and home is very important. In addition to the parent handbook and other information included in the enrollment packet, you will receive a monthly newsletter from the Director as well as newsletters and other reminders and notes home from your child's classroom teachers. In order to be aware of policies and events, it is very important that parents make a commitment to read *everything* that comes from preschool each day. In order to conserve resources, all director newsletters and other school-wide communication will be sent via email from Constant Contact email service. The emails will be addressed from "Little Hearts Preschool" and have Beth's email, bethr@lhpreschool.org, attached to them. As well, our teachers use electronic resources to communicate with parents. By signing below, you agree to this commitment.

I have read the parent handbook (available on our website or by request) and all information included in the enrollment packet and commit to read all newsletters and notes from school that are sent home or emailed throughout the 2023-2024 school year. I will share all LHP policies and procedures with everyone who transports my child to/from preschool or comes to the school for parties, field trips, etc.

Parent Signature

Date

Photography Release Form

PLEASE CHOOSE ONE

I, _____, Parent/Guardian of _____ hereby authorize and consent to the use of his/her visual image by Little Hearts Preschool for appropriate purposes, including but not limited to: still photography, videotape, electronic and print publications and websites. I give this consent with no claim for payment.

Parent/Guardian's Signature

Date

OR

I, _____, Parent/Guardian of _____ hereby do NOT authorize or give consent to the use of his/her visual image by Little Hearts Preschool for appropriate purposes, including but not limited to: still photography, videotape, electronic and print publications and websites. I give this consent with no claim for payment.

Parent/Guardian's Signature

Date

OR

I, _____, Parent/Guardian of _____ hereby do NOT authorize or give consent to the use of his/her visual image by Little Hearts Preschool for appropriate purposes, including but not limited to: still photography, videotape, electronic and print publications and websites **EXCEPT for the use of private password protected class websites.** I give this consent with no claim for payment.

Parent/Guardian's Signature

Date



Little Hearts Preschool Release Information Form 2023-2024

Please complete the following form completely. In the event that someone other than those listed on this form needs to pick up your child, you must send a written note or email and the person will be asked to show a picture ID or have your child's car tag.

Child's Name: _____
(Last) (First) (Middle)

The above child may be released from "Little Hearts Preschool" to the following person(s):

Mother: _____ Yes ___ No ___ Legal Custody or Shared Parenting: Yes ___ No ___
(Complete below if NO is checked)

Father: _____ Yes ___ No ___ Legal Custody or Shared Parenting: Yes ___ No ___
(Complete below if NO is checked)

- If "No" is checked above, please fill-in the following two blanks:
Explanation of custody: (A copy of the custody order signed by the judge must be provided BEFORE the child's first day of preschool.)

- Residential/Custodial Parent: _____

Please list **AT LEAST TWO (2)** other adults who have permission to pick-up your child from the Little Hearts Preschool Program.

Name: _____ Relationship: _____

Phone: _____

Name: _____ Relationship: _____

Phone: _____

Name: _____ Relationship: _____

Phone: _____

Name: _____ Relationship: _____

Phone: _____

Is there anyone who is **NOT** permitted to pick up your child?

Name: _____ Relationship: _____

Office Use ONLY: If there are people not permitted to pick this child up, will the child participate in front door drive through pick up? Yes ___ No ___

If No, do NOT make car tags.

Front Door Drop Off/Pick Up

2023-2024 Procedures & Reminders

Please be sure to share the following information with **EVERYONE** who will be dropping off/picking your child.

- Front door drop off and pick up will start on the first day of preschool, August 28.
- If your child is in one of the Younger 2's (Puppies), 2's (Ducklings) or Older 2's (Monkeys) classes, you will need to park in a designated spot and come in and drop off/pick up your child from his/her classroom. The doors to the preschool wing will open for drop off at 9:15AM and at 11:55AM for pick up. Photo ID or LHP issued car tag is required every day during pick up.
- Front door drop off will take place from 9:15AM-9:30AM for our morning session and from 12:50PM-1:00PM for our afternoon session. If you arrive after 9:30AM/1:00PM, you will need to park your car in a designated parking space and walk your child inside. A staff member will close the line at 9:30am by walking behind the last car with a yellow vest indicating drop off is now over. If you pull up behind her, please go ahead and pull around and park by door 7 to walk your child into school. No additional cars will be taken after that time!
- Front door drop off and pick up is available to all students in 3's classes and up and is **OPTIONAL** but **highly recommended**. If you do not wish to participate in front door drop off/pick up, you will need to park in a designated parking spot and come in to drop off/pick your child up. **Drop off and pick up for students in 3's, 4's and 5's classes will take place in the Ministry Mall starting on August 28.** Each 3's, 4's and 5's class will have an assigned spot in the Ministry Mall, where they will sit during drop off and pick up. **You will drop off/pick up your child from his/her teacher in the Ministry Mall, NOT in his/her classroom.** At drop off, please hand off your child to the staff member working at the yellow rope and she will escort your child to his/her class. If you walk in to drop off/pick up your child, please use door #7 on the south side of the building. The front doors are used for car line children only, and it becomes a safety issue to have other parents and children using those doors. If you walk in to pick up your child, please sign-in on the sign-in sheet near the yellow rope. Students will be retrieved by a staff member in the order in which they are listed. You will need to show your car tag or ID each day to pick up. Please wait patiently outside of the yellow rope for your child to be released to you.
- You will need to arrange your child's car seat so that it sits on the passenger side of your vehicle. **Students will NOT be permitted to exit or enter vehicles on the driver's side.** This is for safety reasons – we cannot have children walking between cars in the drop off/pick up line. **Parents are not permitted to exit their vehicles at any time during drive through drop off/pick up. This is for safety reasons and so we can expedite our drop off and pick up procedures as quickly as possible.** Please situate your child in such a manner that the driver while remaining in the vehicle or a staff member from the passenger side can easily get to your child and help him/her unbuckle. It is helpful if you can have your child unbuckled before pulling under the portico if you feel comfortable doing so. If you are transporting more than 1 child to preschool and it is impossible to have them all sitting on the passenger side, those sitting on the driver's side will need to exit the vehicle on the passenger side. **Please also make sure that your child's backpack and any other belongings needed for school are within easy reach of the child or the staff member helping the child out of the vehicle. Please do NOT put your child's belongings for school in the trunk of your vehicle.** We need all belongings to be within easy reach so drop off can run smoothly and quickly.
- It is very common and normal for preschool-aged children to have separation anxiety when being separated from parents/care-givers. We have found that children actually separate easier when dropped off through carline! If there are tears, especially at first, they usually subside very quickly. We will do all that we can to make your child feel comfortable, safe, and excited about coming to school. If your child does have separation anxiety at drop off, the best thing to do is to make your goodbye quick, reassure the child that he/she will have fun and let him/her know you will be back soon! We will notify you if your child does not calm down by the time the students have been taken to their classrooms (or within a reasonable period of time).
- When using the front door drop off/pick up, please pull your car under the portico by the front doors of the church and wait for a Preschool staff member to open your car door. We will help get your child and his/her belongings out of the car. **Do NOT allow a child to get out of the car without the help of a Preschool staff member. Students should also not be permitted to have their heads, arms, legs hanging outside open vehicle windows while the vehicle is in motion.** Once your child has exited the vehicle and your child and staff member have moved away from the vehicle, please exit the drop off loop as quickly and safely as possible.
- Front door pick up will take place at 12:00PM for our morning session and at 3:30PM for our afternoon session. Cars **MUST** be in line at 12:00PM/3:30PM in order to not incur late pick up charges. Our late pick up fee is \$1 per child for every minute past our dismissal time (12:00PM/3:30PM). If an isolated, unforeseen circumstance arises in which you are going to be late picking up your child for preschool (car trouble/accident, illness, etc.), please call the preschool office ASAP.
- During our Meet the Teacher event your child will receive his/her security tag. If your child's security tag gets lost during the school year, you will need to notify the Director so a new security tag can be made. **The backpack tags and car tags get matched up by staff upon placing students in vehicles at pick up and are very important components of our security**

system at dismissal. Any child who does not have a security tag on his/her backpack or does not bring their backpack will NOT be permitted in front door pick-up. If your child does not have his/her security tag with him/her, or if your child's security tag is lost and you are waiting for a new one to be made, you will need to park and come in to pick-up your child.

- At our Meet the Teacher event on August 24th, 2 parent/guardian security car tag cards (per child) will be issued to each family. 1 of these cards should be placed on your front passenger side window in clear view during pick up each day – we prefer it be placed in plain sight on your front passenger side window area. (Please be careful when you place the card in your front passenger side window and roll down the window. Many people have lost car tags down inside their vehicle door). **If you are picking up more than 1 child, 1 parent/guardian security card for EACH CHILD should be placed on your window in clear view.** We have issued 2 parent/guardian security cards for each child so 2 people who will normally be picking up your child can each have 1. Please be sure to only give a parent/guardian security card to a person who has been placed on your child's release form. If your parent/guardian security card is lost or additional car tags are needed, you will need to notify the Director. It typically takes 1-2 preschool days to make and issue new/additional car tags. Only LHP created and issued car tags are permitted. Handmade car tags or car tags issued in previous school years are not permitted.
- You, or whomever comes to pick your child up, should have a LHP security car tag card out and ready each day during pick up for the entire school year. In addition to checking the car tag, photo ID may also be requested and checked. We will only release children to people who have the child's LHP issued car tag. It is very important that parents do not give LHP issued car tags to anyone not listed on the child's Release Form. You can add people to your child's Release Form throughout the school year by sending in a written note signed by the parent or emailing the Director. Only a child's parents can add people to or delete people from the child's Release Form. Grandparents and other caregivers are not permitted to add people to or delete people from students' Release Forms unless they are a legal guardian or custodial parent.
- When your car pulls up, we will call for your child (who will be waiting inside the Ministry Mall with his/her teacher). We will help your child get into the vehicle, but we are NOT permitted to buckle a child into his/her car seat or fasten his/her seatbelt (for liability reasons). **If your child needs assistance getting buckled or fastened in, we will ask you to pull your vehicle all the way forward in the drop off loop, into an available parking space, or onto the driveway off of Princeton Rd. so you can help your child get buckled.** Please do NOT get out of your car while you are still in line to buckle your child! This holds up the entire car line and stops the flow of traffic. Please do not pull off the drive and into the grassy area. This causes ruts in the grass.
- We realize one of the drawbacks of a front door drop off/pick up is that you won't be seeing your child's teachers face to face as often. Our staff is committed to being accessible and available to you. Your child's teachers will give you their preferred way(s) to be contacted at our Meet the Teacher event. You can also call or email the Director with any questions or concerns.
- **PLEASE USE CAUTION** when driving in and around our parking lot. Your safety and the safety of all of our students, parents, and staff is of utmost importance to us so please drive slowly. **Allowing children to hang out of the vehicle through an open window or door while in car line is prohibited.** In addition, children are not permitted to play or run around outside the vehicle at any time once cars are in line for drop off or pick up – this includes the time before staff begin taking students out of vehicles.
- **Cell phones (phone calls, texting, or web surfing) are not to be used in car line once it has begun (for drop off & pick up) for the safety of our students, staff, and people picking up/dropping off preschoolers.**
- If your child participates in an after/before school special, you will walk in to pick him/her up at 1:00pm if he/she is a morning student or walk in to drop him/her off at noon if he/she is an afternoon student.
- If you arrive late, please bring your child to the preschool check-in desk and an office staff member will assist your child to his/her class. Parents will not be allowed to take their child to his/her classroom late.
- If your child comes to school without a backpack and/or backpack security tag, you will need to park and come in to pick up your child. You will not be allowed to sign out your child at the rope. You will need to come to the preschool check-in desk with your ID and show it to the staff member working the desk. She will need to pull your child's file and check your ID against their pick up list. When she has confirmed your identity, she will go and collect your child for you and return he/she to you.

Please detach and sign this portion and return it with your enrollment packet.

I have read and understand the front door drop off/pick up procedures of Little Hearts Preschool.

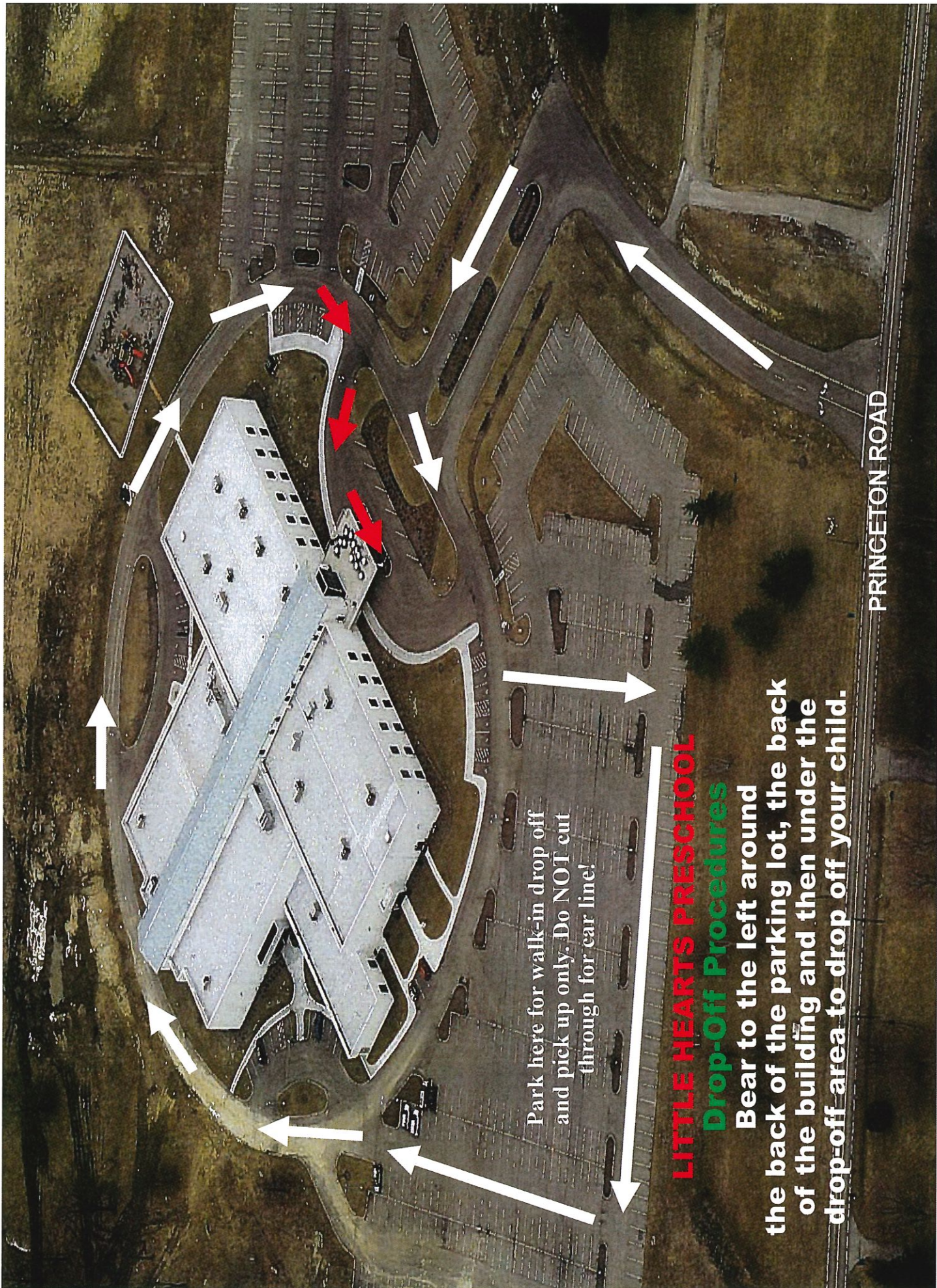
Child's Name

Parent's Name Printed

Parent's Signature

I request ____ extra car tags. (2 issued to all families)

*Only request extra if absolutely necessary! Thanks!



PRINCETON ROAD

Park here for walk-in drop off
and pick up only. Do NOT cut
through for car line!

LITTLE HEARTS PRESCHOOL **Drop-Off Procedures**

**Bear to the left around
the back of the parking lot, the back
of the building and then under the
drop-off area to drop off your child.**

Child Guidance and Behavior Policy

Guiding behavior is part of the teaching and is the responsibility of all of our staff members. Some of the guiding techniques we use include, but are not limited to, setting clear limits; redirecting to an appropriate activity; showing positive alternatives; modeling desired behavior; encouraging children to control their own behavior; cooperate with others; solve problems by talking; and using Green instead of Red choices. Teaching Red and Green choices encourages the teacher and child to talk through the choices the child has made.

If the behavior doesn't improve, then separation from the situation shall last no more than 1 minute per each year of the child's age and shall not be used with children under two years of age. Upon the child's return to the activity, the teacher shall review the reason for the separation and discuss the expected behavior. If the child is in danger of hurting himself or others, he may be held for a short period of time, such as a protective hug, so that he may gain control.

If the child's behavior doesn't improve, using the guidance and discipline techniques, and/or is harmful to other students and/or Little Hearts Preschool staff then a conference will be scheduled with the parents/guardians, teachers and administrator. In consultation with the parents/guardians, LHP staff will implement a behavior management plan specific to the child. The plan may require a consultation and evaluation from an outside entity of the parents/guardians choosing or, depending on the behaviors exhibited, a recommendation from LHP staff. A time limit will be given for the completion of obtaining the evaluation and/or consultation. The plan will be in writing and signed by the parents/guardians and LHP staff. The plan will be consistent with the requirements of the ODJFS rule 5101:2-12-19 (listed in the back of this packet).

If the recommendations are such as:

1. The child would benefit from remaining in the program and having an aide (not the parent) – the parent/guardian will assume the financial responsibility. If an aide cannot be hired, then the parent/guardian will have to make other arrangements.
2. An outside entity, such as the child's school district, would service the child – LHP will cooperate and work with the entity to the best of our ability but in such a way as not to be an added burden to the classroom.
3. There are no recommendations or diagnosis from the outside entity – the behavior management plan may need to be revised.
4. If the recommendation is to place the child in another program – LHP will not require the normal months' notice.

If after all of these steps have been exhausted and the behaviors have not improved, the child will be removed from the program.

I have read and understand the Child Guidance and Behavior Policy as documented on the previous page and in the Parent Handbook.

Parent/Guardian Signature

Date

Parent/Guardian Signature

Date

Automated Payment Processing

Safe. Convenient. Easy.



We are excited to offer the safety, convenience and ease of Tuition Express-a payment processing system that allows secure, on-time tuition and fee payments to be made from either your bank account or credit card.

I hereby authorize Little Hearts Preschool to initiate credit card charges to the below-referenced credit card account (Section A) OR initiate debit entries to my checking or savings account indicated below (Section B). To properly affect the cancellation of this agreement, I am required to give 10 days notice.

PLEASE FILL OUT **ONE** OF THE FOLLOWING SECTIONS:

Section A (Credit Card)

Cardholder Name

Phone #

Cardholder Address

City

State

Zip

Credit Card Number

Expiration Date

CVV

Cardholder Signature

Date

Section B (Bank Account)

Your Name

Phone #

Your Address

City

State

Zip

Bank or Credit Union Name

Bank Address

City

State

Zip

Routing Transit Number

Bank Account Number

☐ Checking

☐ Savings

Authorized Signature

Date

Would you like us to automatically process your monthly tuition using the information on this form?

- ☐ Yes, please automatically process my monthly tuition using the above information on the 10th of every month August 2023-April 2024 (or the last preschool business day before the 10th.)
- ☐ No, I will initiate my own payments via Procure and/or in person on or before the 10th of each month. Only use this information in case of non-payment by the last day of the month.

Peanut-Free Snacks-Please Keep!

Little Hearts Preschool is a peanut-free preschool.

When packing your child's snack for school each day, please choose snacks that are peanut free. (Some foods that do not contain peanuts themselves have been processed in a factory that makes other foods which do contain peanuts. Please keep this in mind and check food labels as you prepare your child's snacks).

Because many foods that appear on this list and others may have been processed in a place with peanuts, if your child's snack does NOT have an ingredient listing printed on the package you send it in to school, **we are asking you to please include a picture or copy of the ingredient listing with your child's snack each day.** We have many students who if given even a trace amount of a food could have a serious allergic reaction. So, our staff will be checking the ingredient listing of each child's snack every day to ensure all of our children are safe. There are several ways you can include the ingredient listing: take a picture and text or email it to your child's teacher (check with your child's teacher first); take a picture, print it out and include it with your child's snack; copy it and include it with your child's snack or cut it out and include it with your child's snack. Obviously if you are sending in a fruit* or vegetable*, this does not apply unless it is prepackaged with other foods. If your child does come to school without some type of label with ingredients on his/her snack, the snack will be sent back home with a reminder note and your child will be provided an alternate snack. Please help us as we try to keep all of our students safe and healthy.

PLEASE ONLY PACK 1 SNACK FOR YOUR CHILD EACH DAY. CHILDREN WILL ONLY BE GIVEN 10 MINUTES TO EAT THEIR SNACK EACH DAY.

The following is a list of snacks that are peanut-free.

Rold Gold Pretzels

Fruit chews (except for generic brands)

Plain Ritz Crackers

Keebler Club Crackers

Keebler Club Snack Sticks (Original, Honey Wheat)

Cheez-Its

Cheese Nips

Saltines

Goldfish (Original, Pretzel, Pizza, Colors, Cheddar)

Wheat Thins

Triscuits

Teddy Grahams (Chocolate, Chocolate Chip, Honey, Cinnamon)

Honey Maid Graham Crackers/Sticks

Cheese

*Fruit (grapes, apple slices, orange slices, bananas, watermelon, cantaloupe, honeydew, strawberries, blueberries, pineapple)

*Vegetables (carrots, broccoli, cucumbers, cauliflower, bell peppers, celery, tomatoes)

Little Hearts Preschool

2023-2024 School Calendar-subject to change

*Tuition is always due at the beginning of each month (August-April).
It is considered late after the 10th of each month & a \$10 late fee should be included.

August 1-3	<u>Enrollment Packet Drop Off Days</u> Tuesday, August 1: 10:00am-2:00pm Wednesday, August 2: 4:00-7:00pm Thursday, August 3: 9:00am-1:00pm
August 24	Back to School Meet the Teacher Open House
August 28-31	First Week of School
September 5-7	Session 1 of Specials Begins-7 weeks (Fall Soccer Shots is only 6 weeks)(no class on October 17-19)
September 4	Labor Day-No School
September 11	Please include a \$10 late fee if paying your child's October tuition after Sept. 10.
September 18-21	<u>Class and Individual Pictures (by Little Rascals Photography)</u> <u>Monday:</u> M/W Ducklings, M/W Monkeys, M/W Tigers, Pandas and Elephants <u>Tuesday:</u> T/Th Puppies, T/Th Tigers, AM Ladybugs, AM Owls, AM Hippos, PM Tigers, PM Ladybugs, PM Owls and PM Hippos <u>Wednesday:</u> M/W Puppies, AM Turtles, Zebras, AM Bears, AM Sheep, PM Turtles, PM Llamas, PM Bears and PM Sheep <u>Thursday:</u> T/Th Ducklings, T/Th Monkeys, AM Llamas and Leopards
September 27-28	Literacy and Language Event (each LHP student can be accompanied by one adult) <u>September 27, 11:00am-12:00pm:</u> M/W Tigers, Leopards, Llamas, Pandas and Elephants <u>September 27, 11:30am-12:00pm:</u> M/W Puppies, M/W Ducklings, M/W Monkeys <u>September 28, 11:00am-12:00pm:</u> T/H Tigers, Turtles, Zebras, Owls, Ladybugs, Bears, Hippos and Sheep <u>September 28, 11:30am-12:00pm:</u> T/Th Puppies, T/Th Ducklings, T/Th Monkeys <u>September 28, 2:30-3:30pm:</u> all PM classes
October 2-5	<u>Barn-n-Bunk Farm field trips-3's and Transitions' classes only (AM at 9:30 and PM at 1:00)</u> Monday, October 2-Elephants and Sheep (AM and PM) Wednesday, October 4-Leopards, AM Llamas and M/W Tigers Thursday, October 5-T/Th Tigers, Zebras and AM Turtles-AM and PM Tigers, PM Llamas and PM Turtles
October 11-12	<u>Firefighters visit</u> <u>Wednesday, Oct. 11:</u> M/W Puppies, M/W Ducklings, M/W Monkeys, M/W Tigers (10:00-10:30am) Leopards, AM Llamas, Pandas and Elephants (10:30-11:00am) <u>Thursday, Oct. 12:</u> T/Th Puppies, T/Th Ducklings, T/Th Monkeys, T/Th Tigers, Zebras, Turtles, (10:00-10:30am) Ladybugs, Owls, Bears, Hippos, Sheep (10:30-11:00am) All PM classes (1:30-2:00pm)
October 11	Please include a \$10 late fee if paying your child's November tuition after October 10.
October 16-17	No School-Lakota Fall Break/Teacher PD day
October 11-26	<u>Raymond's Pizza Field trips-4's classes only</u> Wednesday, Oct. 11 th Owls Thursday, Oct. 19 th Ladybugs Tuesday, Oct. 24 th Pandas Wednesday, Oct. 25 th Hippos Thursday, Oct. 26 th Bears
October 24-26	Session 1 of Specials Ends
October 31-Nov. 2	Session 2 of Specials Begins-7 weeks (no class on Nov. 7-9, Nov. 21-23, Dec. 19-21, Dec. 26-28, Jan. 2-4)
November 7	No School-Election Day & Lakota Schools Teacher PD
November 11	Please include a \$10 late fee if paying your child's December tuition after Nov. 10.
November 22-23	No School – Thanksgiving Holiday

Little Hearts Preschool

2023-2024 School Calendar-subject to change

December 11	Please include a \$10 late fee if paying your child's January tuition after December 10.
December 20-Jan.4	No School – Christmas Vacation (please note, Lakota DOES have school on Jan. 4, but LHP does not)
January 8	School resumes
January 11	Please include a \$10 late fee if paying your child's February tuition after January 10.
January 16-18	Session 2 of Specials Ends
January 15	No School – Martin Luther King Jr. Day
January 23-25	Session 3 of Specials Begins-7 weeks
Feb. 5-6	<u>Dentist Visits</u> <u>Feb. 5-10:00AM:</u> M/W Puppies, M/W Ducklings, M/W Monkeys, M/W Tigers 10:20AM: Pandas, Ladybugs, Bears, Owls, Sheep and Elephants <u>Feb. 6-10:00AM:</u> T/Th Puppies, T/Th Ducklings, T/Th Monkeys, T/Th Tigers 10:20AM: Leopards, Llamas, Zebras, Turtles, Hippos 1:30PM: Tigers, Llamas, Turtles and Hippos 1:50PM: Owls, Ladybugs, Bears and Sheep
February 11	Please include a \$10 late fee if paying your child's March tuition after February 10.
February 19	No School – President's Day
March 4-7	Scholastic Book Fair
March 6-7	STEAM Event (each LHP student can be accompanied by one adult) <u>March 6, 11:00am-12:00pm:</u> M/W Tigers, Leopards, Llamas, Pandas and Elephants <u>March 6, 11:30am-12:00pm:</u> M/W Puppies, M/W Ducklings, M/W Monkeys <u>March 7, 11:00am-12:00pm:</u> T/H Tigers, Turtles, Zebras, Owls, Ladybugs, Bears, Hippos and Sheep <u>March 7, 11:30am-12:00pm:</u> T/Th Puppies, T/Th Ducklings, T/Th Monkeys <u>March 7, 2:30-3:30pm:</u> all PM classes
March 5-7	Session 3 of Specials Ends
March 11	Please include a \$10 late fee if paying your child's April tuition after March 10.
March 12-14	Session 4 of Specials Begins-7 weeks (Spring Soccer Shots is only 6 weeks)(no class March 19-21, March 26-28, May 7-9)
March 11-12	Graduation Cap & Gown Pictures by Erin Jackson Photography (all 4's and 5's classes)
March 19	No School-Election Day
March 25-28	No School – Spring Break
April 8	No School-Lakota Professional Development Day
April 11	Please include a \$10 late fee if paying your child's May tuition after April 10. Last tuition payment!
April TBD	Niederman Farm Field Trip-4's classes only (see individual newsletters for exact date)
May 6-10	Teacher Appreciation Week
May 7	No School-Lakota Teacher PD
May 13-16	Last Week of School
May 14-16	Session 4 of Specials Ends
May 15	Graduation – all 4's and 5's classes participate AM classes-10:30AM

Appendix A to Rule 5101:2-12-19

Allowable Discipline Techniques

The following techniques or practices may be used by all child care staff members and employees of a licensed child care center as a means to guide or discipline children. Any technique or practice used shall be developmentally appropriate, consistent and shall occur at the time of the incident.

1. Setting clear limits.
2. Redirecting to an appropriate activity.
3. Showing positive alternatives.
4. Modeling the desired behavior.
5. Reinforcing appropriate behavior.
6. Encouraging children to control their own behavior, cooperate with others and solve problems by talking.
7. Separation from the situation, if used, shall last no more than one minute per each year of the child's age and shall not be used with infants. Upon the child's return to the activity, the provider shall review the reason for the separation and discuss the expected behavior with the child.
8. Holding a child for a short period of time, such as in a protective hug, so that the child may regain self-control.

Prohibited Discipline Techniques

The following techniques or practices shall not be used by any child care staff member or employee of a licensed child care center as a means to control or discipline children:

1. Abuse, endanger or neglect of children, including shaking a baby.
2. Utilize cruel, harsh, unusual, or extreme techniques.
3. Utilize any form of corporal punishment.
4. Delegate children to manage or discipline other children.
5. Use physical restraints on a child.
6. Restrain a child by any means other than holding children for a short period of time, such as in a protective hug, so that the children may regain control.
 - o Prone restraint of a child is prohibited. Prone restraint is defined as all items or measures used to limit or control the movement or normal functioning of any portion, or all, of a child's body while the child is in a face-down position.
 - o Prone restraint includes physical or mechanical restraint.
7. Place children in a locked room or confine children in any enclosed area.
8. Confine children to equipment such as cribs or high chairs.
9. Humiliate, threaten or frighten children.
10. Subject children to profane language or verbal abuse.
11. Make derogatory or sarcastic remarks about children or their families including but not limited to cultures, nationalities, race, religion, or beliefs.

12. Punish children for failure to eat or sleep or for toileting accidents.
13. Withhold any food (including snacks and treats), beverages or water, rest or toilet use.
14. Punish an entire group of children due to the unacceptable behavior of one or a few.
15. Isolate and restrict children from any or all activities for an extended period of time.