YOU MUST BRING ORIGINAL & 2 ADDITIONAL COPIES OF ALL DOCUMENTS

THE FOLLOWING DOCUMENTS ARE NEEDED FOR YOUR CHILD TO PARTICIPATE IN ABBOTT PROGRAM:

ALL APPLICATION FORMS – all policies need to be signed

PLEASE BRING ORIGINAL & 2 ADDITIONAL COPIES OF THE FOLLOWING:

- **2 COPIES & ORIGINAL MEDICAL FORMS** – must be completed by PHYSICIAN & PARENT

- **2 COPIES & ORIGINAL BIRTH CERTIFICATE** *(MUST BE IN ENGLISH)*

- **2 COPIES & ORIGINAL IMMUNIZATION CARD** (all shots need to be updated)

- **2 COPIES & ORIGINAL PROOF OF RESIDENCE** *(EXAMPLES OF DOCUMENTS ATTACHED; DATED JANUARY / FEBRUARY / MARCH 2021)*
Proof Of Address Must Be Dated
January 2021 / Febraurt 2021 / March 2021

Proof of Residence

The following forms of documentation may demonstrate a student’s eligibility for enrollment.

- Benefit Statements
- Cable TV Bill
- Drivers License
- Employment Documents
- Evidence Of Property Ownership
- Financial Account Information
- Telephone Bill
- Medical Reports
- Notarized Letter From Private Homeowner Including Names Of All Persons Residing In Apartment
- Residency Evidence On Leasing Company’s Letterhead
- Unemployment Claims
- Utility Bills

The parent/guardian is required to have their photo I.D. and bring the original documents and a copy.
# Child’s Enrollment Application

<table>
<thead>
<tr>
<th>Date of Application</th>
<th>Date of Birth</th>
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</table>

<table>
<thead>
<tr>
<th>Child’s Name</th>
<th>Sex</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Address</th>
<th>(Street)</th>
<th>(City)</th>
<th>(State)</th>
<th>(Zip)</th>
</tr>
</thead>
</table>

## PARENT INFORMATION

<table>
<thead>
<tr>
<th>Father’s Name</th>
<th>Mother’s Name</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Home Address</th>
<th>Home Address</th>
</tr>
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</table>

<table>
<thead>
<tr>
<th>Home Phone</th>
<th>Home Phone</th>
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<table>
<thead>
<tr>
<th>Cell Phone</th>
<th>Cell Phone</th>
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<table>
<thead>
<tr>
<th>Father’s Occupation</th>
<th>Mother’s Occupation</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Place of Business</th>
<th>Place of Business</th>
</tr>
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</table>

<table>
<thead>
<tr>
<th>Business Address</th>
<th>Business Address</th>
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<table>
<thead>
<tr>
<th>Business Phone</th>
<th>Business Phone</th>
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</thead>
</table>

## Persons 18 YEARS OR OLDER Authorized to Pick up Child and / or Contact in Case of Emergency if Neither Parents is Available:

<table>
<thead>
<tr>
<th>Name</th>
<th>Name</th>
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</table>

<table>
<thead>
<tr>
<th>Relationship</th>
<th>Relationship</th>
</tr>
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</table>

<table>
<thead>
<tr>
<th>Address</th>
<th>Address</th>
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<table>
<thead>
<tr>
<th>Phone</th>
<th>Phone</th>
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</table>

<table>
<thead>
<tr>
<th>Child’s Doctor</th>
<th>Phone</th>
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</thead>
</table>

| Address | |
|---------| |

## Parents Signature:

<table>
<thead>
<tr>
<th>Parents Signature</th>
<th>Date:</th>
</tr>
</thead>
</table>
## Developmental Information

### Eating Habits

<table>
<thead>
<tr>
<th>Question</th>
<th>YES</th>
<th>NO</th>
<th>SOMETIMES</th>
<th>IF SO WHEN?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Does your child take a bottle?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Can your child feed him/herself?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Does your child use utensils?</td>
<td></td>
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<tr>
<td>Does your child have trouble chewing solid food?</td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Does your child have a good appetite?</td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

### Toileting Habits

<table>
<thead>
<tr>
<th>Question</th>
<th>YES</th>
<th>NO</th>
<th>SOMETIMES</th>
<th>IF SO WHEN?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Is your child potty-trained?</td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Does your child know how to clean self after toileting?</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Will your child inform teacher if he is wet/soiled?</td>
<td></td>
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</tr>
<tr>
<td>If your child is a boy, does urinate standing up?</td>
<td></td>
<td></td>
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</tr>
</tbody>
</table>

What word does your child use for urination? ____________________________
What word does your child use for Bowel movements?______________________
Any difficulties regarding toileting? (fears, constipation) YES ______ NO ______ if so, please explain: _____________________________________________________________

### Sleeping

<table>
<thead>
<tr>
<th>Question</th>
<th>YES</th>
<th>NO</th>
<th>SOMETIMES</th>
<th>IF SO WHEN?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Does child rest daily? At what time?</td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Does child sleep at rest time?</td>
<td></td>
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<tr>
<td>Does child usually take anything to bed with him/her?</td>
<td></td>
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<tr>
<td>Does child sleep in crib? own bed parent’s bed</td>
<td></td>
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</tr>
</tbody>
</table>
| Any difficulties regarding sleep (nightmares, fears, etc.) YES ______ NO ______ if so, please explain: __________________________

### Social Relationships

<table>
<thead>
<tr>
<th>Question</th>
<th>YES</th>
<th>NO</th>
<th>SOMETIMES</th>
<th>IF SO WHEN?</th>
</tr>
</thead>
<tbody>
<tr>
<td>At what age did child begin to walk? Talk</td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Does child stutter? YES ______ NO ______</td>
<td></td>
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<tr>
<td>Does child use words phrases sentences</td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>Has child had experiences in playing with other children? YES ______ NO ______</td>
<td></td>
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<td></td>
<td></td>
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<tr>
<td>By nature is he/she friendly aggressive shy withdrawn</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>How does child get along with his brothers and sisters?</td>
<td></td>
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<td></td>
</tr>
<tr>
<td>Other adults</td>
<td></td>
<td></td>
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</tr>
</tbody>
</table>
Attendance, Absentee & Lateness Policy & Procedures

ATTENDANCE ON THE FIRST DAY OF SCHOOL IS MANDATORY. YOUR CHILD WILL BE DROPPED FROM THE PRESCHOOL PROGRAM IF NOT PRESENT ON THE FIRST DAY. PLEASE PLAN AHEAD. MORNING CARE AND AFTERCARE ARE NOT AVAILABLE ON THE FIRST DAY(S) OF SCHOOL.

The Growing Tree’s instructional hours are 8:30 am to 2:45 pm. Students who are signed in at 9:00 a.m. are late.

Regular school attendance is an important factor in children's social and cognitive development. Regular school attendance can provide students with various enriching opportunities and experiences that are beneficial to their social development and relationships with peers and adults. Excessive absenteeism whether sporadic or consistent can have long term effects on a child's educational path starting in the preschool. Chronic absenteeism sets the stage for poor attendance and inability to successfully do grade-level work in later grades (Attendance Works, 2013).

Lateness to school deprives the student from receiving necessary instruction and may set a negative tone for the learning process that day. Furthermore, lateness to school causes problems both for the student and the class. The student misses an opportunity to interact with his/her teachers and friends, and important morning activities are neglected.

The Division of Early Childhood Education regulations require parents and guardians to have the student in school daily and on time. It is in the best interest of the student that the school and home work together to minimize the frequency of lateness’s and absences.

Wrap Around hours are: 7:30-8:00 & 2:45-5:30. Parents may pay for wrap around privately or apply for assistance through the Urban League of Hudson County.

A late fee will be assessed for students picked up after these scheduled times; please see section titled Tuition and Fees. In addition, as required by New Jersey state law, DCF (DFYS) must be called when a student is not picked up an hour after the program’s closure, without notification by the parent or caregiver. Please refer the Information to Parent Document in this packet.

It is the parent’s responsibility to report a student’s absence. Parents must call the main office by 8:00 am and provide the student’s name and room number. Your call may be recorded on the answering machine or answered directly by school staff.

When a student is absent because of ILLNESS for 3 consecutive days, a doctor’s note must be presented (upon arrival) when the student returns to school. The student CAN NOT return to school with out a doctor’s note.
**Ten (10) CONSECUTIVE** absences that are **NOT ILLNESS** related will result in termination from the Growing Tree.

Please schedule family vacations accordingly as this is a district mandate and will be followed strictly.

I have read the Growing Tree Attendance, Absentee & Lateness Policy & Procedure and will abide by these requirements.

Child’s Name: ______________________________

Parent’s Name (Print):__________________________

Signature: __________________________ Date: ______________

**Procedure To Follow In The Event That The Parent(S) Or Authorized Person(S) Fail To Pick Up Or Is Late In Picking Up A Student At The Time Of The Center’s Closing.**

- Students not picked up by closing time will be supervised by two staff members in the general office area.
- Every effort is made by the center’s staff to contact the custodial parent and/or other persons authorized by the parents to care for the student.
- **A fee of $1.00 per minute** will be charged for late pick up, e.g. 5 minutes late will be charged $5.00. The late fee shall be paid at the time of pick-up. This fee is charged in an effort to encourage parents to pick up their children on time. Please arrange your schedules accordingly or find an alternate person (18 years or older) to pick up your child in a timely manner.
- Whenever the custodial parent or other person(s) authorized by the custodial parent fail to pick up the child one hour (6:30) or more after closing time, and provided that the Center staff members have been unable to make other arrangements for returning the child to his/her custodial parent, a staff member shall call **DEPT OF CHILDREN & FAMILIES (DCF) 24 hour Child Abuse Hot Line (1-877-652-2873)** to seek assistance in caring for the child until his/her custodial parents are available to care for child.

I understand I must pick up my child, ______________________________, by 2:45/or 5:30 pm every day. In addition, I agree to pay $1.00 per minute if my child is picked up late by myself or an alternate person. The Department of Children and Families will be notified if the student is not picked up within an hour of communication with parent.

Child’s Name: ______________________________

Parent’s Name (Print):__________________________

Signature: __________________________ Date: ______________
Parent Participation Policy

Parent participation in the learning center is necessary to help us achieve our goals in providing the best possible care for your child. It is important for us to know what your values are for your child, and we would like to share our plans and experiences with you. We do this through daily informal talks and periodic individual conferences that may be requested at any time, but are routinely scheduled twice a year, once in November and once in May. Parent Workshops are held on a monthly basis during the school year.

Parents are encouraged to participate by:

- Offering to volunteer in the classroom
- Volunteer to go on field trip to provide additional supervision for children
- Offer your special talents such as; singing, sewing, dancing, and story-telling, etc.
- Visit the Center at lunchtime to have lunch with your child
- Share cultural experiences with your child’s classmates
- Read books to the children
- Attend workshops
- Clerical work
- Helping the teacher with special projects
- Girl Scout – Daisy Leader
- Guest speaker to talk to the children about your occupation

While we understand that job schedules limit the amount of time you are available, we encourage each parent to become involved in some way with your child’s school. We welcome extended family members to volunteer and visit our center. All events will be announced in the weekly newsletter or on the parent bulletin board.

Please contact the director if you have any questions regarding parent participation.

If any parent or person volunteers at The Growing Tree, there will be a Mantoux and Physical Exam required. This document will be found with your child’s medical documents.

I have read the Growing Tree Parent Participation Policy and agree to participate in my child’s program.

Child’s Name: _______________________________________

Parent’s Name (Print): _______________________________________

Signature: __________________________   Date: ___________________
FOR PARENTS
HEALTH INFORMATION TO BE COMPLETED BY PHYSICIAN IF YOU WOULD LIKE TO VOLUNTEER.

Name: _________________________________________________________________

Address: ____________________________________________________________________________________

Phone: _______________________________________________________________________________________

Physician’s Name: ______________________________________________________________________________

Address: ______________________________________________________________________________________

Phone: ________________________________________________________________________________________

Mantoux Test
Date: ______________________   Date: ____________________
Results: ____________________   Results: __________________

Physical Exam: _____________
Date: _____________________

Is there any reason to preclude this person from working with young children?
Explain_____________________________________________________________________________________
________________________________________________________________________

I have examined _____________________________________________and found him/her to be in good health and to pose no health risk to others at the center.

Physician’s Signature: _____________________________________________

Date: _______________________________________________________________________________________

2021 – 2022 Parent Receipt of Information

Please Check All /Sign & Return:

□ Release of Children Policy
□ Consent For Medical Treatment In The Event Of An Emergency
□ Communicable Diseases Management Policy
□ Medication Administration Policy & Procedures
□ Positive Guidance and Discipline Policy
□ Expulsion and Suspension Policy
□ Technology and Social Media Policy
□ Video/Photo Release/Instagram & Jewelry, Blanket Permission forms
□ Methods of Parent Communication Policy
□ Lateness Policy
□ DCF Information to Parents Document
□ Parent Handbook

I have read & received a copy of the growing tree parent handbook & also a copy of the information & policies listed above:

Child’s Name: _________________________________ Room #_________

Parent’s Name (Print): ___________________________

Parent Signature: _____________________________ Date: __________
Release of Children Policy

Each child may be released only to the care of authorized custodial parent(s)/emergency contact person(s) who will remove child from center and will assume full responsibility for the child in the event of an emergency.

If a non-custodial parent has been denied access, or granted limited access, to a child by a court order the center shall secure documentation to that effect, maintain a copy on file, and comply with the terms of the court order.

If parent(s) or person(s) authorized by the parents(s) fail to pick up a child at the time of the center's daily closing, the center shall ensure that:
1. The child is supervised at all times.
2. Staff members attempt to contact the parent(s) or person(s) authorized by parent(s).
3. An hour or more after closing time, and provided that other arrangements for releasing the child to his/her parent(s) or person(s) authorized by the parent(s), have failed and the staff member(s) cannot continue to supervised the child at the center, the staff member shall call the Division’s 24 hour Child Abuse Hotline (1-877-652-2873) to seek assistance in caring for the child until the parent(s) or person(s) authorized by the child’s parent(s) is able to pick-up the child.

If the parent(s) or person(s) authorized by the parent(s) appears to be physically and/or emotionally impaired to the extent that, in the judgment of the director and/or staff member, the child would be placed at risk of harm if released to such an individual, the center shall ensure that:
1. The child may not be released to such an impaired individual.
2. Staff members attempt to contact the child’s other parent or an alternative person(s) authorized by the parent.
3. If the center is unable to make alternative arrangements, a staff member shall call the Division’s 24-hour Child Abuse Hotline (1-877-652-2873) to seek assistance in caring for the child.
4. For school-age childcare programs, no child shall be release from the program unsupervised except upon instruction from child’s parent(s).

*CUSTODIAL INFORMATION:
If non-custodial parent is not included among those persons authorized by the custodial parent to pick up the child please explain below and attach a copy of appropriate documents (COURT ORDER)

Child’s Name:__________________________________________________________

Parent’s Name (Print):__________________________________________________

Signature: ___________________________ Date: ________________
Consent For Medical Treatment In The Event Of An Emergency

I, __________________________, hereby give my consent for emergency medical treatment of my son/daughter __________________________________________

Child’s Name

to any duly licensed medical doctor while under the care of the Growing Tree Learning Center. This medical care may include physical examinations and any necessary tests which, in the opinion of the physician, are deemed necessary and/or advisable. This does not include the right to perform surgical operations without any further consent, except in the case of an emergency when an effort has been made to locate me.

IN THE EVENT THAT AN EMERGENCY OCCURS I AUTHORIZE THE GROWING TREE LEARNING CENTER TO SEEK EMERGENCY MEDICAL CARE FOR MY CHILD AS DEEMED NECESSARY BY THE DIRECTOR.

CHILD’S NAME_________________________________________________________

MOTHER’S SIGNATURE__________________________________________________

ADDRESS_____________________________________________________________

HOME PHONE NUMBER_______________WORK PHONE NUMBER_________________

CELL PHONE NUMBER___________________________________________________

FATHER’S SIGNATURE___________________________________________________

ADDRESS_____________________________________________________________

HOME PHONE NUMBER_______________WORK PHONE NUMBER_________________

CELL PHONE NUMBER___________________________________________________

LEGAL GUARDIAN: ______________________________________________________
Communicable Diseases Management Policy

If a child exhibits any of the following symptoms, the child should not attend school. If such symptoms occur at school, the child will be removed from the group, and parents will be called to take the child home.

- Severe pain or discomfort
- Acute diarrhea
- Episodes of acute vomiting
- Elevated oral temperature of 101.5 degrees Fahrenheit
- Lethargy
- Severe coughing
- Yellow eyes or jaundiced skin
- Red eyes with discharge
- Infected, untreated skin patches
- Difficult or rapid breathing
- Skin rashes in conjunction with fever or behavior changes
- Skin lesions that are weeping or bleeding
- Mouth sores with drooling
- Stiff neck

Once the child is symptom-free, or has a health care provider’s note stating that the child no longer poses a serious health risk to himself/herself or others, the child may return to the center unless contraindicated by local health department or Department of Health.

EXCLUDABLE COMMUNICABLE DISEASES
A child or staff member who contracts an excludable communicable disease may not return to the school without a health care provider’s note stating that the child presents no risk to himself/herself or others. **Note: If a child has chicken pox, a note from the parent stating that all sores have dried and crusted is required.** If a child is exposed to any excludable disease at the center, parents will be notified in writing.

COMMUNICABLE DISEASE REPORTING GUIDELINES
Some excludable communicable diseases must be reported to the health department by the center. The Department of Health’s Reporting Requirements for Communicable Diseases and Work-Related Conditions Quick Reference Guide, a complete list of reportable excludable communicable diseases, can be found at: [http://www.nj.gov/health/cd/documents/reportable_disease_magnet.pdf](http://www.nj.gov/health/cd/documents/reportable_disease_magnet.pdf).

I have read the **Communicable Diseases Management Policy** and will abide by these requirements.

Child’s Name: __________________________________________________________

Parent’s Name (Print):__________________________________________________

Signature: __________________________   Date: ________________
Medication Administration in Child Care Policy and Procedures

PURPOSE: This policy was written to encourage communication between the parent, the child’s health care provider and the child care provider to assure maximum safety in the giving of medication to the child who requires medication to be provided during the time the child is in child care.

INTENT: Assuring the health and safety of all children in our Center is a team effort by the child care provider, family, and health care provider. This is particularly true when medication is necessary to the child’s participation in child care. Therefore, an understanding of each of our responsibilities, policies and procedures concerning medication administration is critical to meeting that goal.

GUIDING PRINCIPLES and PROCEDURES:

1. Whenever possible, it is best that medication be given at home. Dosing of medication can frequently be done so that the child receives medication prior to going to child care, and again when returning home and/or at bedtime. The parent/guardian is encouraged to discuss this possibility with the child’s health care provider.

2. The first dose of any medication should always be given at home and with sufficient time before the child returns to child care to observe the child’s response to the medication given. When a child is ill due to a communicable disease that requires medication as treatment, the health care provider may require that the child be on a particular medication for 24 hours before returning to child care. This is for the protection of the child who is ill as well as the other children in child care.

3. Medication will only be given when ordered by the child’s health care provider and with written consent of the child’s parent/legal guardian. A "Permission to Give Medication in Child Care" form is attached to this policy and will hereafter be referred to as Permission Form. All information on the Permission Form must be completed before the medication can be given. Copies of this form can be duplicated or requested from the child care provider.

4. "As needed" medications may be given only when the child’s health care provider completes a Permission Form that lists specific reasons and times when such medication can be given.

5. Medications given in the Center will be administered by a staff member designated by the Center Director and will have been informed of the child’s health needs related to the medication and will have had training in the safe administration of medication.

6. Any prescription or over-the-counter medication brought to the child care center must be specific to the child who is to receive the medication, in its original container, have a child-resistant safety cap, and be labeled with the appropriate information as follows:
   - Prescription medication must have the original pharmacist label that includes the pharmacists phone number, the child’s full name, name of the health care provider prescribing the medication, name and expiration date of the medication, the date it was prescribed or updated, and dosage, route, frequency, and any special instructions for its administration and/or storage. It is suggested that the parent/guardian ask the pharmacist to provide the medication in two containers, one for home and one for use in child care.
   - Over-the-counter (OTC) medication must have the child’s full name on the container, and the manufacturer’s original label with dosage, route, frequency, and any special instructions for administration and storage, and expiration date must be clearly visible.
   - Any OTC without instructions for administration specific to the age of the child receiving the medication must have a completed Permission Form from the health care provider prior to being given in the child care center.

7. Examples of over-the-counter medications that may be given include:
   - Antihistamines
   - Decongestants
   - Non-aspirin fever reducers/pain relievers
   - Cough suppressants
   - Topical ointments, such as diaper cream or sunscreen

8. All medications will be stored:
   - Inaccessible to children
   - Separate from staff or household medications
   - Under proper temperature control
A small lock box will be used in the refrigerator to hold medications requiring refrigeration.

9. For the child who receives a particular medication on a long-term daily basis, the staff will advise the parent/guardian one week prior to the medication needing to be refilled so that needed doses of medication are not missed.

10. Unused or expired medication will be returned to the parent/guardian when it is no longer needed or be able to be used by the child.

11. Records of all medication given to a child are completed in ink and are signed by the staff designated to give the medication. These records are maintained in the Center. Samples of the forms used are attached to this policy and include:
   - Permission to Give Medication in Child Care
   - Universal Child Health Record
   - Emergency Contact Sheet
   - Medication Administration Log
   - Medication Incident/Error Report

12. Information exchange between the parent/guardian and child care provider about medication that a child is receiving should be shared when the child is brought to and pick-up from the Center. Parents/guardians should share with the staff any problems, observations, or suggestions that they may have in giving medication to their child at home, and likewise with the staff from the center to the parent/guardian.

13. Confidentiality related to medications and their administration will be safeguarded by the Center Director and staff.
   Parents/guardians may request to see/review their child's medication records maintained at the Center at any time.

14. Parent/guardian will sign all necessary medication related forms that require their signature, and particularly in the case of the emergency contact form, will update the information as necessary to safeguard the health and safety of their child.

15. Parent/guardian will authorize the Director or Director Designee to contact the pharmacist or health care provider for more information about the medication the child is receiving, and will also authorize the health care provider to speak with the Director or Director's designee in the event that a situation arises that requires immediate attention to the child's health and safety particularly is the parent/guardian cannot be reached.

16. Parent/guardian will read and have an opportunity to discuss the content of this policy with the Director or Director's designee. The parent signature on this policy is an indication that the parent accepts the guidelines and procedures listed in this policy, and will follow them to safeguard the health and safety of their child. Parent/guardian will receive a copy of the signed policy including single copies of the records referenced in this policy.

17. The Medication Administration in Child Care Policy will be reviewed annually by the following:

<table>
<thead>
<tr>
<th>EFFECTIVE DATE OF THIS POLICY:</th>
<th>PARENT SIGNATURE:</th>
<th>DATE:</th>
</tr>
</thead>
<tbody>
<tr>
<td>9/1/2021</td>
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<table>
<thead>
<tr>
<th>FAMILY WORKER:</th>
<th>DATE:</th>
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</table>

<table>
<thead>
<tr>
<th>CENTER DIRECTOR/DESIGNEE SIGNATURE:</th>
<th>DATE:</th>
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Positive Guidance & Discipline Policy

The High/Scope Curriculum provides us with a preventive approach to child behavior problems in which teachers and staff work to avert difficulties and conflicts by creating a supportive classroom environment and an orderly daily routine. When prevention fails, the adults help the children resolve their own conflicts and frustrations through problem solving rather than through adult-imposed control or punishment. The goal of this approach is to help children become aware of how their own actions affect others and of how the choices they make can help those overcome difficulties and conflicts.

- Teachers will not discuss a child’s behavior(s) with a parent without consulting the Director first.
- There will be NO PHYSICAL PUNISHMENT of any kind to any child.
- Children learn through repetition. Children should be reminded of classroom rules on a daily basis.
- Teachers will not discuss a child’s behavior in front of the child.
- No food or rest shall be denied.
- Positive reinforcement and role playing will be used for discipline rather than negative statements and punishments.
- Each classroom teacher will discuss and reinforce “classroom rules” through morning meeting activities, role playing, socialization activities, and visual aids such as pictures, study and films, and music and songs.
- Teachers will set limits in the classroom, by encouraging and modeling positive behavior.

While these approaches enable most children to function fairly smoothly in most early childhood settings, sometimes staff finds themselves spending a disproportionate amount of time dealing with the problems created by one or two challenging children. When faced with one child’s severe behavior problems, the teacher will record daily observations/incidences of the child in the classroom, then they will consult with the Director. The Director will observe the child to give the teachers additional strategies. We realize, however, that such efforts are not always successful. Our next step is to schedule a conference with the child’s parent(s) and teacher. The conference will include a discussion of effective and consistent methods to resolve the child’s behavior problems, and possible referral to the Pre-School Intervention Team (PIRT).

I have read the Positive Guidance & Discipline Policy and will abide by these requirements.

Child’s Name: ________________________________________________

Parent’s Name (Print): ________________________________________

Signature: ____________________________ Date: __________
**Expulsion and Suspension Policy**

Under state regulations, *N.J.A.C. 6A:13A-4.4(g)*, "Preschool students in a general education program or special education program shall not be suspended, long-term or short-term, and shall not be expelled." Our goal at the Growing Tree is to prepare young children to succeed in school and suspending or expelling children fails to accomplish that goal. More importantly, suspending or expelling preschoolers is not an age-appropriate method for addressing behavioral problems. There are no short-term or long-term outcomes that will benefit a child when he/she cannot be in school to receive the needed support services due to out of school disciplinary measures.

Challenging behaviors exhibited by preschool children must be addressed in the context of a comprehensive approach to behavior support that is designed to teach, nurture and encourage positive social behaviors. The Growing Tree Learning Center would like each child to achieve his/her maximum potential. The Preschool Intervention and Referral Team (PIRT) will be contacted to further evaluate specific circumstances pertaining to the child and work closely with the teacher and the parents.

**A CHILD WILL NOT BE EXPELLED:**
If a child’s parent(s):
- Made a complaint to the Office of Licensing regarding a center’s alleged violations of the licensing requirements.
- Reported abuse or neglect occurring at the center.
- Questioned the center regarding policies and procedures.
- Without giving the parent sufficient time to make other child care arrangements.

**PARENTAL ACTIONS FOR CHILD’S EXPULSION:**
- Failure to pay/habitual lateness in payments will result in termination from wrap around program **NOT THE PRE-SCHOOL PROGRAM**.
- Failure to complete forms required by the JCBOE / Growing Tree including the child’s immunization records.
- Verbal /physical/abuse towards staff.

**SCHEDULE OF EXPULSION:**
- If after the remedial actions above have not worked, the child’s parent/guardian will be advised verbally and in writing about the child’s or parent’s behavior warranting an expulsion/ or new placement in another school.
- Suspension of a parent is meant to be a period of time so that the parent/ guardian may work on obtaining required documents that are deficient.
- The parent/guardian will be informed regarding the length of the suspension period.
- The parent/guardian will be informed about the expected changes required in order for parent to return to the center.

I have read the **Expulsion & Suspension Policy** and will abide by these requirements.

Child’s Name: ____________________________________________

Parent’s Name (Print):_____________________________________

Signature: __________________________   Date: ________________
Technology & Social Media Policy

The Growing Tree Learning Center recognizes that access to technology in school gives students, parents and teacher’s greater opportunities to learn, engage, communicate, and develop skills that will prepare them for work, life, and citizenship. We are committed to helping students develop 21st-century technology and communication skills.

To that end, this Growing Tree Technology Policy outlines the guidelines and behaviors that users are expected to follow when using school technologies or when using personally-owned devices on school property.

- Students, parents and teachers are expected to follow the same rules for good behavior and respectful conduct online as offline.
- Misuse of social media can result in disciplinary action.
- The Growing Tree makes a reasonable effort to ensure students’ safety and security online, but will not be held accountable for any harm or damages that result from misuse of social media technologies.

We encourage teachers, students, staff, and other school community members to use our Instagram page: @gt_class_of_2022 as a way to connect with others, share educational resources, create and curate educational content, and enhance the classroom experience. While social networking is fun and valuable, there are some risks you should keep in mind when using these tools. In the social media world, the lines are blurred between what is public or private, personal or professional.

I have read the Technology & Social Media Policy and will abide by these requirements.

Child’s Name: _________________________________________________________

Parent’s Name (Print):____________________________________________

Signature: __________________________   Date: _____________________
Video/ Photo/Instagram Release Policy

The Growing Tree Learning Center staff will take photographs and record videos of the students during school hours and on trips. Parents acknowledge that said photographs and videos will be used for school displays, and/or training purposes. Signatures are required on the school application, and are kept in the student file.

I, ___________________________________, hereby consent that The Growing Tree Learning Center, may take photographs and record video of my child during school hours and on trips. I acknowledge that said photographs and videos will be used for school displays, and/or training purposes. I also understand the television and technology policy.

Parent Signature: _________________________________Date_____________

Witness: ___________________________Date: _______________________

Jewelry Policy

It is not possible to keep track of your child’s jewelry and it may get lost, damaged or stolen. In order to avoid this, please do not bring your child to the learning center wearing any type of jewelry. The Growing Tree Learning Center will not be responsible for the replacement of any lost jewelry or injury caused by jewelry.

If you should have any questions, please come to the office and we will be glad to help you.

Parent Signature: _________________________________Date: ____________

Blanket Permission For Walking Trips

I hereby give permission for my child _____________________________________ to participate in walking trips in The Growing Tree Learning Center neighborhood.

I understand that the walking route includes no safety hazards, and that the walks will not involve entrance into any facility.

Parent Signature: _________________________________Date: ____________
Methods of Parental Notification Policy

The Growing Tree acknowledges the important partnership between the school and families in promoting a healthy, safe, and successful experience and learning environment for its students. To promote the health, safety, and well-being of its students, The Growing Tree has implemented this Parental Notification Policy in compliance with Manual of Requirements for Child Care Centers (N.J.A.C. 10:122). Every licensed child care center in New Jersey must provide to parents of enrolled children a policy to inform parents or guardians about their child’s behavior, allegations, activities, or performance. A hard copy of The Growing Tree Parent Handbook stating all school policies and procedures is distributed to Parent upon enrollment.

The Growing Tree staff will inform parents about the following circumstances which include but are not limited to:

- a student’s attendance is past the 10 day absenteeism policy
- when there is a health, medical, or safety incident or concern involving the child (except in those instances in which the school has reason to believe that the parent is involved in making a student unsafe)
- concerning the rights and procedural safeguards of parents related to assessment referrals and special education services. Concerning a student’s assessment results
- concerning immunization requirements
- concerning early dismissal and/or emergency closings

Process of Notification:

The Growing Tree staff will notify a parent by phone, in writing (email or traditional letter), or in person concerning classroom news, incidents, or circumstances that require notification.

I have read the Methods of Parent Notification Policy and will abide by these requirements.

Child’s Name: ______________________________________________

Parent’s Name (Print):______________________________________

Signature: ____________________________________  Date: ________________
Lateness Policy

New Jersey School regulations require parents and guardians to have the student in school daily and on time. It is in the best interest of the student that the school & home work together to minimize the frequency of lateness’s.

We understand that there are unusual circumstances that occasionally arise in the home that may prevent the student from arriving to school on time. However, excessive lateness shows a lack of responsibility towards the educational process.

Lateness to school deprives the student from receiving necessary instruction and may set a negative tone for the learning process. It has been shown that pupils' performance and enjoyment of school are both reduced by poor attendance and punctuality.

Good communication between teachers and parents encourages strong foundations between school and home. If you're encompassing a family situation that impedes you from bringing your child to school on time, I encourage you to speak to your teacher, your family worker or myself.

The school doors open at 8:30 a.m. Breakfast is served daily at 8:30 and class activities start at 9:00 a.m. sharp, therefore, when a child is late, he/she misses out. Late arrivals can be a disruption to other students, teachers and overall classroom learning environment.

**The third occurrence of a lateness will result in a mandatory conference with the parent, classroom teacher and family worker.**

I have read the Lateness Policy and will abide by these requirements.

Child’s Name: _______________________________________________

Parent’s Name (Print):_________________________________________

Signature: __________________________   Date: ________________
Department of Children and Families  
Office of Licensing  
INFORMATION TO PARENTS

Under provisions of the Manual of Requirements for Child Care Centers (N.J.A.C. 3A:52), every licensed child care center in New Jersey must provide to parents of enrolled children written information on parent visitation rights, State licensing requirements, child abuse/neglect reporting requirements and other child care matters. The center must comply with this requirement by reproducing and distributing to parents and staff this written statement, prepared by the Office of Licensing, Child Care & Youth Residential Licensing, in the Department of Children and Families. In keeping with this requirement, the center must secure every parent and staff member’s signature attesting to his/her receipt of the information.

Our center is required by the State Child Care Center Licensing law to be licensed by the Office of Licensing (OOL), Child Care & Youth Residential Licensing, in the Department of Children and Families (DCF). A copy of our current license must be posted in a prominent location at our center. Look for it when you’re in the center.

To be licensed, our center must comply with the Manual of Requirements for Child Care Centers (the official licensing regulations). The regulations cover such areas as: physical environment/life-safety; staff qualifications, supervision, and staff/child ratios; program activities and equipment; health, food and nutrition; rest and sleep requirements; parent/community participation; administrative and record keeping requirements; and others.

Our center must have on the premises a copy of the Manual of Requirements for Child Care Centers and make it available to interested parents for review. If you would like to review our copy, just ask any staff member. Parents may view a copy of the Manual of Requirements on the DCF website at http://www.nj.gov/dcf/providers/licensing/laws/CCCmanual.pdf or obtain a copy by sending a check or money order for $5 made payable to the “Treasurer, State of New Jersey”, and mailing it to: NJDCF, Office of Licensing, Publication Fees, PO Box 657, Trenton, NJ 08646-0657.

We encourage parents to discuss with us any questions or concerns about the policies and program of the center or the meaning, application or alleged violations of the Manual of Requirements for Child Care Centers. We will be happy to arrange a convenient opportunity for you to review and discuss these matters with us. If you suspect our center may be in violation of licensing requirements, you are entitled to report them to the Office of Licensing toll free at 1 (877) 667-9845. Of course, we would appreciate your bringing these concerns to our attention, too.

Our center must have a policy concerning the release of children to parents or people authorized by parents to be responsible for the child. Please discuss with us your plans for your child’s departure from the center.

Our center must have a policy about administering medicine and health care procedures and the management of communicable diseases. Please talk to us about these policies so we can work together to keep our children healthy.

Our center must have a policy concerning the expulsion of children from enrollment at the center. Please review this policy so we can work together to keep your child in our center.
Parents are entitled to review the center’s copy of the OOL’s Inspection/Violation Reports on the center, which are available soon after every State licensing inspection of our center. If there is a licensing complaint investigation, you are also entitled to review the OOL’s Complaint Investigation Summary Report, as well as any letters of enforcement or other actions taken against the center during the current licensing period. Let us know if you wish to review them and we will make them available for your review or you can view them online at https://data.nj.gov/childcare_explorer.

Our center must cooperate with all DCF inspections/investigations. DCF staff may interview both staff members and children.

Our center must post its written statement of philosophy on child discipline in a prominent location and make a copy of it available to parents upon request. We encourage you to review it and to discuss with us any questions you may have about it.

Our center must post a listing or diagram of those rooms and areas approved by the OOL for the children’s use. Please talk to us if you have any questions about the center’s space.

Our center must offer parents of enrolled children ample opportunity to assist the center in complying with licensing requirements; and to participate in and observe the activities of the center. Parents wishing to participate in the activities or operations of the center should discuss their interest with the center director, who can advise them of what opportunities are available.

Parents of enrolled children may visit our center at any time without having to secure prior approval from the director or any staff member. Please feel free to do so when you can. We welcome visits from our parents.

Our center must inform parents in advance of every field trip, outing, or special event away from the center, and must obtain prior written consent from parents before taking a child on each such trip.

Our center is required to provide reasonable accommodations for children and/or parents with disabilities and to comply with the New Jersey Law Against Discrimination (LAD), P.L. 1945, c. 169 (N.J.S.A. 10:5-1 et seq.), and the Americans with Disabilities Act (ADA), P.L. 101-336 (42 U.S.C. 12101 et seq.). Anyone who believes the center is not in compliance with these laws may contact the Division on Civil Rights in the New Jersey Department of Law and Public Safety for information about filing an LAD claim at (609) 292-4605 (TTY users may dial 711 to reach the New Jersey Relay Operator and ask for (609) 292-7701), or may contact the United States Department of Justice for information about filing an ADA claim at (800) 514-0301 (voice) or (800) 514-0383 (TTY).

Our center is required, at least annually, to review the Consumer Product Safety Commission (CPSC), unsafe children’s products list, ensure that items on the list are not at the center, and make the list accessible to staff and parents and/or provide parents with the CPSC website at https://www.cpsc.gov/Recalls. Internet access may be available at your local library. For more information call the CPSC at (800) 638-2772.

Anyone who has reasonable cause to believe that an enrolled child has been or is being subjected to any form of hitting, corporal punishment, abusive language, ridicule, harsh, humiliating or frightening treatment, or any other kind of child abuse, neglect, or exploitation by any adult, whether working at the center or not, is required by State law to report the concern immediately to the State Central Registry Hotline, toll free at (877) NJ ABUSE/(877) 652-2873. Such reports may be made anonymously. Parents may secure information about child abuse and
neglect by contacting: DCF, Office of Communications and Legislation at (609) 292-0422 or go to www.state.nj.us/dcf/.
Our center is required, at least annually, to review the Consumer Product Safety Commission (CPSC), unsafe children’s products list, ensure that items on the list are not at the center, and make the list accessible to staff and parents and/or provide parents with the CPSC website at www.cpsc.gov/cpsc.gov/cpscpub/prerel/prerel.html. Internet access may be available at your local library. For more information call the CPSC at (800) 638-2772.

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Parents may secure information about child abuse and neglect by contacting: DCF, Office of Communications and Legislation at (609) 292-0422 or go to www.state.nj.us/dcf/ and select Publications.

Please complete (PLEASE PRINT)

Name of Child: _________________________________________

Name of Parent(s): ______________________________________

I have read and received a copy of the Information to Parents document prepared by the Bureau of Licensing in the Division of Youth and Family Services.

Parent Signature: _______________________________ Date: ____________
PLEASE BRING THE FOLLOWING ITEMS & LABEL EACH ITEM WITH YOUR CHILD’S NAME:

1----Toothbrush & toothpaste (not electrical)

1----CRIB Sheet & 1---- CRIB blanket
   • Every Monday, clean linens should be sent to the center with your child and every Friday the linens will be sent home to be washed.

1----LARGE book bag to fit sheets in.

2----complete sets of clothes in season  (including underwear & socks)

1----pair of Sneakers or running shoes

1----Hat (for protection from the sun)

1----un-used package of wipes

IT IS IMPERATIVE THAT PARENTS SUBMIT THEIR EMERGENCY CONTACT PHOTOS ON PARENT ORIENTATION DAY.
Pick-up Emergency Contact List

18 years & older & MUST HAVE PHOTO ID required

The Growing Tree Learning Center

Allergies: __________ Food Restrictions: ________________ Medications: __________

Child’s Name: __________________________ Date of Birth: __________
Child’s Address: __________________________
Class Teacher: __________________________
Doctor’s Name: __________________ Doctor’s Address: __________________________
Doctor’s Telephone Number: _____________

**Note: List the following people you DO NOT want the Growing Tree to release your child to. (if necessary supporting documents should follow)
Name: ___________________ relationship to child: ________________________________
Name: ___________________ relationship to child: ________________________________

I __________________________ understand all names and numbers will be updated if any changes occur.

Signature: __________________________ Date: __________________
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