



JONI'S CHILD CARE AND PRE-SCHOOL

MISSION STATEMENT

**... TO CREATE A HAPPY AND HEALTHY CHILD
CARE ENVIRONMENT BASED UPON POSITIVE RE-
ENFORCEMENT AND RESPECT.**

ENROLLMENT

Enrollment at Joni's Child Care and Pre-School is open to children from 6 weeks to 12 years of age. Enrollment shall be granted without regard to a child's race, color, creed, religion, national origin, gender, or disability; and without regard to a parent or guardian's race, color, creed, religion, age, national origin, gender, pregnancy or disability.

At the time of enrollment, we require the following:

- A one time registration fee of \$100.00 which is non-refundable
- A completed current health form
- Our registration packet completed and signed, including accurate emergency contact numbers.

The emergency information should be kept current at all times.

SCHEDULE

Joni's Child Care and Pre-School will be open year-round, Monday through Friday, 7:00 am - 6:00 pm. The center will be closed in observation of the following holidays:

LABOR DAY
THANKSGIVING DAY
FRIDAY FOLLOWING THANKSGIVING
12:00 NOON CHRISTMAS EVE
CHRISTMAS DAY
12:00 NOON NEW YEAR'S EVE
NEW YEAR'S DAY
GOOD FRIDAY
MEMORIAL DAY
INDEPENDENCE DAY

- Please note that holidays that fall on weekend days will be observed on the appropriate Friday or Monday.

TUITION

Your tuition rate is _____ per week and is due one week in advance. Payments are regularly due no later than the Friday before a week's attendance. A charge of \$10.00 per day will be assessed for all late payments. An additional charge of \$25.00 will be assessed for all returned checks. After two (2) returned checks, a money order, cashier's check or cash will be required for all further payments.

The tuition schedule will not be altered for sick days or voluntary non-attendance. All holidays have been calculated in advance and do not have any affect on the weekly tuition rate. This is true for both full and part-time enrollment.

1. Full-Time child care is represented by a time period not to exceed 9 1/2 hours per day over a 5 day time period. Overtime begins after this limit and will be charged at a rate of \$10.00 per hour or part of an hour in excess.
2. Part-Time child care is represented by any time period not to exceed 4 1/2 hours per day or for a time period of three (3) days or less. Service required above the limit indicates full-time care and will be charged accordingly.

A charge of \$15.00 per fifteen-minute interval will be assessed for the time after closing requiring staff supervision of children

Non-payment of tuition is grounds for immediate dismissal from the program. Timely payments are essential for continued enrollment; however if you anticipate difficulty with paying on time, please discuss the matter with the Center Director immediately. The Center Director must approve all alternate payment arrangements in advance.

Joni's Child Care and Pre-School offers a multiple child discount when two or more siblings are enrolled during the same time. The youngest sibling pays the full tuition rate and each additional child's tuition is discounted by 10% per child.

Joni's Child Care and Pre-School does accept the Connecticut child care subsidy, Care-4-Kids. Parents of children eligible for this program must complete all required paperwork on time to continue enrollment at the center. Parents are responsible for payment of regular center tuition until documentation of approval has been received by the center stating the exact amount that the State of Connecticut will pay for childcare. The parent is responsible for payment for any difference in payment by the State of Connecticut and center fees. After Care-for-Kids approval, money paid by the parent will be applied toward future parent charges.

VACATION

All full-time families (child is present 5 full days each week) are given two (2) weeks (10 days) vacation per calendar year (January through December) for which you are not required to pay the weekly tuition provided appropriate notice is given.

All part-time families (child is present less than 5 full days each week) are given a two (2) week schedule for vacation each calendar year (January through December) for which you are not required to pay the weekly tuition provided appropriate notice is given.

Example: If your child's schedule is regularly Tuesday and Thursday full days, you are given four (4) vacation days (a two-week schedule).

**Appropriate notice is defined as a written statement announcing vacation time a minimum of two weeks in advance.

**Any additional time taken for illness or voluntary non-attendance does not have any affect on the weekly tuition.

RELEASE OF ALL CHILDREN

In order for a child to be released from the center at the close of his/her day, the following must be followed:

1. The parent or legal guardian of the child will sign the daily enrollment sheet upon arrival and upon dismissal for the day. The child's belongings will be organized and ready. Should the parent/guardian forget to sign the enrollment log, the director will assure that all children have been accounted for throughout the day.
2. If the individual picking up the child is not recognized by the staff, a photo identification will be required prior to release of the child. The photo ID will be matched with the registration authorization provided by the parent on the registration form. No child will be released to any individual who is not formally included on the registration information and without identification to verify identity.
3. Should the closing time of the center arrive with children in attendance, a phone call will be made to the parents to assure prompt pick-up. Should it be impossible to reach the parents, a phone call will be placed to any or all emergency contacts listed on the enrollment information. Should a time period of thirty minutes pass without contact being made, a phone call will be placed to the local police department and determination will be made regarding the involvement of the Department of Social Services for abandonment or neglect.
4. Should it become necessary for state and local authorities to become involved, full cooperation will be assured by center and staff.
5. Once a parent signs the child out of the center, the parent is responsible for the actions and behavior of their child.

OPEN DOOR POLICY

JONI'S BELIEVES IN AND ENCOURAGES A COMPLETE OPEN DOOR POLICY. ALL PARENTS/GUARDIANS ARE WELCOME THROUGHOUT THE DAY TO VISIT WITH YOUR CHILD, PARTICIPATE IN DAILY ACTIVITIES,OR SIMPLY WATCH AS THE DAY UNFOLDS. PLEASE FEEL FREE TO JOIN US.

For the safety of the children in our care, we request that parents/guardians sign children in and out if removing the children from the center during the day. We also request that guests be announced and accompanied by a parent/guardian if possible.

Guests are welcome to visit the center. We ask that the parents notify the center administrator so that we may anticipate their arrival and verify identity.

It is equally important that should there be any person who is not permitted to visit the center, the center administrator be notified.

ARRIVAL PROCEDURES

Upon arrival to the center, the parent or adult dropping-off the child must sign the child into care on the sign-in sheet located immediately inside the Pre-School door. Children are required to be escorted by their parent or the adult dropping them off, to their designated classroom. Children are required by law to be supervised at all times while in the child care facility.

DISCIPLINE

Joni's Child Care and Pre-School recognizes the importance of positive reinforcement and re-direction. The staff will not use abusive, neglectful, corporal, humiliating or frightening punishment. A child shall not be physically restrained unless it is necessary to protect the safety or health of the child or other children under the care of the center. The only form of discipline practiced by the staff will be an attempt at re-direction through communication, or, if necessary, a brief "time-out" session not to exceed 3 - 4 minutes. Parents will be informed of any action.

MANDATED REPORTING

Under the Child Protective Services Act, mandated reporters are required to report any suspicion of abuse or neglect to the appropriate authorities. The employees of Joni's Child Care and Pre-School are considered mandated reporters under this law. The employees of this center are not required to discuss suspicions with parents prior to reporting the matter to the appropriate authorities, nor are they required to investigate the cause of any suspicious marks, behavior or condition prior to making the report. Under the Act, mandated reporters can be held criminally responsible if they fail to report suspected abuse or neglect. We at Joni's Child Care and Pre-School take this responsibility very seriously and will make all warranted reports to the appropriate authority.

CONFIDENTIALITY

Within Joni's Child Care and Pre-School, confidential and sensitive information will only be shared with employees who have a "need to know" in order to most appropriately and safely care for your child. Confidential and sensitive information about staff, other parents and/or children will not be shared with parents as Joni's Child care and Pre-School strives to protect everyone's right of privacy. Confidential information includes, but is not limited to: names, addresses, phone numbers, disability information and health related information of anyone associated with the center.

WRITTEN PLAN FOR INCLEMENT WEATHER

In an emergency situation, the staff members will take whatever steps are necessary to protect the children in our care. Should an emergency or dangerous situation arise during operation hours, we will contact the parent or alternative contact. Two staff members will remain with the children until all have been picked up safely. If, however, it is believed that the safety of the children in our care can be best served by emergency evacuation, the staff members will remain with the children as they are moved to an emergency shelter and continue to stay with the children until they can safely be reunited with their families.

EMERGENCY PROCEDURES

MAJOR EMERGENCIES:

1. CHILD IS NOT BREATHING
2. COMPUND FRACTURE
3. NECK OR BACK INJURY
4. HEMORRHAGING
5. ELECTRICAL BURNS
6. POISONING

The Director or Acting Director will take whatever steps may be necessary to obtain medical treatment if warranted. We will contact parents or the designated alternative contact immediately. We may also:

1. Contact the child's physician
2. Call for an ambulance
3. Have the child transported to an emergency hospital in the company of a staff member. (All expenses incurred by any of the above actions will be the responsibility of the child's family.)

PROCEDURES FOR STAFF ACTION

1. Call ambulance or professional center. The nearest qualified staff member will administer first aid while a separate staff member places the emergency call.
2. Pull child's folder and present file to arriving medical personnel. The file will remain with the child at all times.
3. Contact parents. Inform them calmly of the situation and assure them that help is on the way.
4. A certified staff member will assist the professionals as directed.
4. If the child is transported to the hospital, the Director or Acting Director will select an appropriate staff member to accompany the child to the hospital and inform them of the anticipated arrival and the suspected problem.

FOODS

Joni's Child Care and Pre-School provides a nutritious morning and afternoon snack to the children in the center. Parents are responsible for providing their child with breakfast and/or lunch to be served at the center. All food items must be labeled with your child's name. Children are not permitted to share or exchange food items.

Parents are required to provide written notification of any food/dietary restrictions (i.e. lactose intolerance, vegetarian diets, wheat free/gluten free diets)

Joni's Child Care and Pre-School never uses food as a punishment. Children will never be denied participation in lunch or snack time for behavior reasons.

Infants – 3 years

- All food items must be prepared and labeled each day the child is in attendance. This includes formula/breast milk bottles, baby food, meals, snacks and juice bottles. The State of Connecticut requires that a fresh bottle or sippy cup be used for each feeding and servings should be prepared with this in mind.
- The center provides all bowls, spoons, bibs and paper cups for use by the children. Please label any special items brought from home with your child's name to prevent loss

3 years and older

- Joni's Child Care and Pre-School offers a morning snack at approximately 9:30 a.m., lunch at 11:30 a.m. and an afternoon snack at approximately 2:30 p.m. Breakfast may be served up to 8:30 a.m.
- All meals are family style with the children sitting at tables, to promote good manners, eating habits and socialization. Staff will encourage children to eat their main entrée first, followed by healthy snacks. Candy and "junk" foods will be served for a dessert when an adequate amount of their lunch has been eaten.
- The center and staff focus on developing healthy, well-balanced eating habits. Please provide a full, healthy lunch for your child each day they are in attendance. We encourage you to provide your child with choices that include fruits and vegetables, yogurts and cheeses, breads and crackers along with their main entrée.
- Please do not include full sized candies or sodas in your child's lunch.
- Please be aware of choking hazards when preparing your child's lunch. The teachers will be able to provide you with a list of potentially dangerous items.

LAUNDRY

For sanitation, Joni's Child Care and Pre-School provides bedding for each child. This bedding is changed regularly and is stored separately. We do, however, encourage a favorite blanket or stuffed toy from home. We ask only that you label and take these personal items home at the end of each week for laundering.

We have found that the most convenient storage of all personal items is in an individual box or container the size of a shoebox. This size fits comfortably in our area and allows enough storage space for a small blanket or toy plus an additional change of clothing to be used in the dace of an emergency.

PERSONAL ITEMS

Please label all personal items (boxes, clothing, blankets, special toys, lunch containers, etc) with your child's first and last name in order to ensure there is no confusion during the course of the day or during pick-up hours.

CLOTHING

- Children are engaged in various activities during the course of the day; some of these activities may be messy and/or athletic in nature. Additionally, children are engaged in outdoor play daily, weather permitting. Due to these activities, children are required to be dressed in seasonably appropriate, comfortable and safe clothing.
- Coats, hats, gloves and winter boots must be provided in the winter months.
- Children are not permitted to wear open-toed or open-backed shoes. The most appropriate type of shoes for participation in school activities are rubber-soled, sneakers or tennis shoes.

All clothing items must be clearly labeled with the child's first and last name. This includes coats, hats, gloves and boots. Joni's Child Care and Pre-School is not responsible for lost or damaged items of clothing.

JEWELRY/ACCESSORIES

- For the safety of your child and the other children enrolled in the center, jewelry is not permitted at any time. Many items may cause physical injury or become choking hazards. In addition, Joni's Child Care and Pre-School will not be responsible for lost or stolen valuables. It is the parent's responsibility to enforce this policy with their children.
- Hair beads, barrettes, bobby pins, etc are not to be worn by the children. These accessories are considered to be safety hazards. Please consult your child's teacher when choosing accessories to ensure the safety of your child and the other children within the center.

Joni's Child Care and Pre-School is not responsible for lost or damaged clothing or accessories.

TOYS FROM HOME

Due to the risk of damage, sharing issues, and loss, children are not permitted to bring in toys from home, unless specifically requested by the classroom teacher for use as part of the curriculum. Parents are responsible for enforcing this policy with their child.

Children are permitted to include with their bedding supplies, one plush/non musical toy with which to nap/rest. This toy is to be placed with the bedding supplies and used only at the nap/rest time.

All toys brought in for use as part of the curriculum, and./or for nap/rest time will be inspected by the classroom teacher for safety and appropriateness, and may be prohibited at the sole discretion of the teacher. Please do not allow your child to bring in any toys that represents inappropriate or violent actions, characters or words.

BABYSITTING

Babysitting services are a private contract between parent and caregiver. Despite a caregiver being employed by the center, Joni's Child Care and Pre-School will not be responsible for any accident, injury, etc. which is the result of a staff member being hired to do personal baby-sitting. If at any time a member of the staff is to accompany your child from the facility, they must be authorized by the parent (see registration packet). The parent will assume all responsibility events occurring as a result of this personal arrangement.

HEALTH POLICY

In general, a child with a mild illness such as a cold, bronchitis or a treated ear infection may remain in the child care center if the child is well enough to participate in the daily activities of the center, if the child does not require one-to-one care, and if the child does not represent a new source of infection. Joni's believes in open and honest communication between parent and center with regards to the health issues of the individual child and the health concerns of the group setting. We encourage the parent to call or visit if they suspect that the child may not feel well, has had a difficult night or shows early signs of illness. The center will initiate calls to parents with center observations and concerns regarding the individual child and the health of the group setting. Should a child show symptoms which make it necessary for them to leave the center and the parents are unable to be contacted, the center will make contact with the emergency contacts as listed on the registration information so that a timely departure can be assured for the best interest of the child and the center.

Staff is properly trained in CPR and Connecticut Child Care First Aid. In addition, staff is instructed regarding signs and symptoms of those illnesses and conditions which could affect the children in their care. The nurse consultant maintains all health records for staff and children to assure compliance with Department of Health regulations. Her

weekly visits allow the center an opportunity to use her expertise to address any areas of concern, issues of health or safety and to educate the staff regarding specific needs. In addition, she is available for telephone consultation at any time.

There are times when a child should stay home or will be sent home if already in the center.

1. An infant under four (4) months of age has an axillary temperature of 101 or higher.
2. A child between the ages of 4 months and 24 months has an axillary temperature of 101 or higher or a rectal temperature of 102 or higher.
3. A child over 24 months of age has an oral or axillary temperature of 102 or higher.
4. A child has a serious or contagious illness.
5. A child who is unable to participate in the daily activities and whose needs cannot be met within the context of the group setting.

Please remember that the child care setting serves the needs of children within a group setting. The health of all of the children depends upon the cooperation of all parents with regards to the Health Policy.

The center is not equipped with an isolation area. A child who is ill will be separated from the group setting to the best of our ability until the child can safely leave the setting. Trained staff will remain with the child at all times and state mandated ratios will be maintained.

The following is a list of illnesses that require treatment. Any child having any of these illnesses will not be allowed at the child care center until treatment is given and/or a release is provided by your child's pediatrician stating he/she is safe / able to return to the child care center.

1. Chicken Pox - The child must remain out of the center while actively developing blisters. The child may return after all pox have crusted over (usually 7 days)
2. Impetigo - The child may return 24 hours after treatment has begun.
3. Conjunctivitis (pink eye) - The child may return 24 hours after treatment has begun.

4. Diarrhea - bowel movements must stay in the diaper or the child must be able to make it to the toilet. If diarrhea is accompanied by abdominal cramping, vomiting or significant behavior changes, the child must leave the center.
5. Lice / Scabies - The child may return 24 hours after treatment has begun.
6. Strep Throat / Scarlet Fever - The child may return 24 hours after antibiotic treatment has begun.
7. Hand / Foot / Mouth Disease - A child with signs or symptoms indicative of the disease must remain out of the child care environment during the active "blister" phase.

MEDICATION ADMINISTRATION

The staff members of Joni's Child Care and Pre-School will not administer medication - prescription or non-prescription - with the exception of the following:

1. Non-prescription diaper ointments and powders
2. Sunscreen
3. Insect repellent
4. Epi-Pen for life threatening allergic reactions -- This requires a physician's authorization on file and is to be updated as necessary. The parents are responsible for providing the Epi-Pen.

PARENT CODE OF CONDUCT

Joni's Child Care and Pre-School requires the parents of enrolled children at all times, to behave in a manner consistent with decency, courtesy and respect. One of our goals is to provide the most appropriate environment in which a child can grow, learn and develop. Achieving this ideal environment is not only the responsibility of the staff, but is the responsibility of each and every parent or adult who enters the facility. Parents who violate the Parent Code of Conduct will not be permitted in agency property thereafter and their child may be dis-enrolled.

1. **Swearing/Cursing** – no parent or adult is permitted to curse or use other inappropriate language on agency property at any time, whether in the presence of a child or not. Such language is considered offensive by many people and will not be tolerated. At No time shall inappropriate language be directed toward members of the staff.
2. **Threatening of employees, children, other parents or adults** – Threats of any kind will not be tolerated. All threats will be reported to the appropriate authorities and will be prosecuted to the fullest extent of the law. While apologies for such behavior are appreciated, the center will not assume the risk

of a second chance. PARENTS MUST BE RESPONSIBLE FOR AND IN CONTROL OF THEIR BEHAVIOR AT ALL TIMES.

- 3. Physical/verbal punishment of your child or other children at the center** – corporal punishment is not permitted at Joni's Child Care and Pre-School. Parents are prohibited from addressing, for the purpose of correction or discipline, a child that is not their own. If a parent should witness another parent's child behaving in an inappropriate manner, or is concerned about behavior reported to them by their own child, it is most appropriate for the parent to direct their concern to the classroom teacher and/or Center Director.

DIS-ENROLLMENT POLICY

While we believe very strongly in the policies and the ideals of this center, we recognize that there may arise certain circumstances, which would allow for the best interest of your child to be served at another location or center. We regret that this might become the case, however, in an effort to communicate clearly, the following written policy does exist.

Should payment be withheld by the parent or legal guardian for services already rendered, the center will have the right to require the child or children to find alternative child care arrangements. The director will notify the parent(s) following the first week of non-payment by written communication. Should payment not be received by the end of the second week of service already rendered, the center will dis-enroll the child(ren) immediately. The child(ren) will not be accepted after this date. No further grace period will exist.

Should a child become a threat to the safety of the other children in our care, the center has the right to require that the parents make alternative child care arrangements. Verbal and written communication will be made by center staff regarding specific instances. Excessive violence toward other children, biting, kicking or any physical outburst, which could cause personal harm to the other children in our care, is grounds for dis-enrollment. Should the center or staff communicated with the parent on three previous occasions, and the behavior continue, the center will notify the parents or guardian and a period of one week will be given for alternative arrangements to be made.

Should it become evident by the behavior of any child that they are unhappy or uncomfortable with the atmosphere of this center, a written statement will be sent to the parents voicing certain comments or behavior, which would support our observations. With the overall well-being and development of your child as our primary concern, we understand that this center may not serve the emotional or social needs of all children. We will suggest that an alternative arrangement be made in the best interest of your child. Open communication will be held to determine the next step.

**As parents, you have the right to withdraw your child from our program without explanation or notice. While we would appreciate your insight, it is not required. We do not hold a security deposit for this reason: No financial obligations should or will enter into a parental decision of this nature.

JONI'S CHILD CARE AND PRE-SCHOOL

Acknowledgement of Receipt of Parent Handbook

I/We, _____, the parent(s)/legal guardian(s) of _____, acknowledge that I/We have received a copy of the Joni's Child Care and Pre-School's Parent Handbook and have been give the opportunity to read the manual and ask questions about and understand the policies it contains. Furthermore, I/We agree to abide by the policies set forth in the manual.

I/We understand that the policies described in the Parent Handbook are not conditions of enrollment, and the language does not create a contract between Joni's Child Care and Pre-School and the parents. Joni's Child Care and Pre-School reserves the right to alter, amend, or otherwise modify these guidelines, in its sole discretion, without prior notice.

Signature: _____ Date: _____

Print Name: _____

Signature: _____ Date: _____

Print Name: _____

PROFILE

NAME: _____ NICKNAME: _____

DOB: _____ RELIGION: _____

CHILD LIVES WITH: MOM _____ DAD _____ BOTH _____ OTHER _____

SIBLINGS (NAMES AND AGES):

INTERESTS: _____

FEARS / DISLIKES: _____

FOOD PREFERENCES: _____

FOOD DISLIKES: _____

MEDICATIONS: _____

ALLERGIES: _____

THINGS OUR STAFF SHOULD KNOW: _____

SIGNATURE: _____ DATE: _____

Start Date _____

REGISTRATION INFORMATION

DATE _____ REFERRED BY _____
CHILD'S NAME _____

CHILD'S ADDRESS _____

AGE _____ BIRTH DATE _____ SEX _____

SOCIAL SECURITY NUMBER _____

PARENTS/GUARDIANS

Name _____

Address _____

Home Phone _____

Employer (1) _____

Address _____

Phone _____

Employer (2) _____

Address _____

Phone _____

Signature (1) _____

Signature (2) _____

RELEASE OF CHILD/EMERGENCY CONTACTS

The following individuals are authorized to pick-up my child. I understand that they must provide proper photo identification and that I must provide prior written authorization. There must be two (2) people listed other than the parents.

EMERGENCY CONTACT

*Name _____ Phone _____

Signature _____

*Name _____ Phone _____

Signature _____

*Name _____ Phone _____

Signature _____

Child's Physician _____ Phone _____

Child's Dentist _____ Phone _____

May we contact another physician/dentist in an emergency if we are unable to reach your designated professional? YES _____ NO _____

May we call 911 in an emergency? YES _____ NO _____

Are there any special circumstances of which we should be aware in the event of an emergency? (Religious objections, etc) YES _____ NO _____

Medical conditions? _____

Allergies? _____

I give permission for the director or authorized personnel to take necessary steps to ensure the safety of my child at all times and to obtain any necessary medical treatment in the event of an emergency as outlined in the parent handbook.

_____ Initials

I give permission for any properly certified staff member to apply first aid as needed for my child.

_____ Initials

I accept that the center is not responsible for any accident, injury, or mishap that occurs due to the lack of pertinent information.

_____ Initials

I give permission for my child to participate in all activities and to use all play equipment involved with the program.

_____ Initials

I have read and understand the above information. I have received a parent handbook and have read and understand the information included therein. I have had the opportunity to ask questions.

Signature

Signature

PARENTS

We are required by State of Connecticut regulations to have your written permission for the children to go on any excursion or field trip. Recent interpretation of this regulation includes the necessity of you written permission for the children to go on a buggy ride or walk. Please complete and sign/date the following so that we may include it in the children's file and remain in compliance with State of Connecticut regulations.

NAME OF CHILD _____

I GIVE THE STAFF OF JONI'S PERMISSION TO TAKE MY SON/DAUGHTER ON A WALK OR BUGGY RIDE.

Signature of Parent

Date

Connecticut Early Childhood Health Assessment Record

To Parent or Guardian:

In order to provide the best experience, early childhood providers must understand you child's health needs. This form requests information from you (part I) which will also helpful to the health care provider when he or she completes the health evaluation (part II). State law requires complete primary immunizations and a health assessment by a legally qualified practitioner of medicine, an advanced practice registered nurse, a physician assistant or the school medical advisor prior to entering and early childhood program in Connecticut.

Please Print

Name of Child (Last, First, Middle)		Social Security Number	Birth Date	Sex
Address (Street)			Home Telephone Number	
(Town and Zip Code)	Early Childhood Program		Program Number	
Parent/Guardian (Last, First, Middle)	Home Telephone Number		Work Telephone Number	
Medicaid Number*if applicable			Health Insurance Company/Number	

If your child does not have health insurance, call 1-877-CT-

HUSKY

Part I – To be completed by parent

**Important: Complete Part I before your child is examined.
Take this form with you to the health care provider's office.**

Please check answers to the following questions in columns on the left.
(Explain all "yes" answers in the space provided below.)

- | | Yes | No | |
|-----|--------------------------|--------------------------|---|
| 1. | <input type="checkbox"/> | <input type="checkbox"/> | Do you have any concerns about your child's general health (eating and sleeping habits, weight, teeth, etc.)? |
| 2. | <input type="checkbox"/> | <input type="checkbox"/> | Do you have any concerns about your child's development or behavior? |
| 3. | <input type="checkbox"/> | <input type="checkbox"/> | Does your child have any allergies (food, insects, medication, etc.)? |
| 4. | <input type="checkbox"/> | <input type="checkbox"/> | Does your child take any medication (daily or occasionally)? |
| 5. | <input type="checkbox"/> | <input type="checkbox"/> | Does your child have any problems with vision, hearing or speech (glasses, contacts, ear tubes, hearing aids)? |
| 6. | <input type="checkbox"/> | <input type="checkbox"/> | Has your child had any hospitalization, operation, or major illness (specify problem)? |
| 7. | <input type="checkbox"/> | <input type="checkbox"/> | Has your child had any significant injury or accident (specify problem)? |
| 8. | <input type="checkbox"/> | <input type="checkbox"/> | Is your child receiving any special services? |
| 9. | <input type="checkbox"/> | <input type="checkbox"/> | Does your child have any other specific illness or problem? |
| 10. | <input type="checkbox"/> | <input type="checkbox"/> | Would you like to discuss anything about your child's health with the child care provider or health consultant? |

(Please explain any "yes" answers here. For illness/injuries/etc., include the year and/or your child's age at the time.)

I give permission for the release of information on this form for confidential use in meeting my child's health and educational needs in the early childhood program.

Signature of Parent/Guardian
To be maintained in child's Health Record

Date

Part II – Health Evaluation

To the Health Care Provider: Please complete all sections and sign. Explain any screenings required by age but not conducted.

_____ has had a complete history and physical exam on _____
 Child's Name _____ Birth Date _____ Month/Day/Year _____

Health history and medical information pertinent to routine care, special diet, and Emergencies: _____ None _____			Allergies to food, medicine, or insects: _____ None _____		
Length/Height _____ IN/CM _____ %ile		Weight _____ lb/kg _____ %ile		Head Circumference _____ IN/CM _____ %ile	
				Blood Pressure _____ / _____	
Physical Examination		Normal _____ Abnormal/Comments _____			
Head/Ears/Eyes/Nose/Throat					
Teeth					
Cardiorespiratory					
Abdomen/GI					
Genitalia/Breasts					
Extremities/ Joints/ Back/ Chest					
Skin/ Lymph Nodes					
Neurologic /Tone					
Development					
Immunizations	Date	Date	Date	Date	Comments
DTP/DtaP					
Polio					
HIB					
HEP B					
MMR					
Varicella					
Pneumococcal					
Other					
Disease Hx of above or contagious disease Specify _____ Date _____ Confirmed by _____			Exemption Religious __ Medical __ Permanent__ Temporary __ Date _____		
Screening Tests		Results		Date	
Abnormal/Comments					
Vision (type of Screening _____)2					
Hearing (type of Screening _____)3					
Lead 4					
Anemia (HGB/HCT)4					
Urinalysis (UA)5					
TB (risk? Yes/No)5					
Developmental Assessment 6					
Date of last dentist examination 7					

Minimum requirements: 1-Up to 2 years, 2- annual, 3-annual at 4 years, 4- 9-12 months, 2 years, 5- as needed, 6-each visit through 5 yrs, 7- annual at 2-3 years Prior to Public School Entry: Same as Above and Hgb/hct

This child has the following conditions which may affect the educational experience:
 ___ Vision ___ Auditory ___ Speech/Language ___ Physical Dysfunction ___ Emotional/Social ___ Behavior
 Re: Licensing: Does this child have a medical or emotional illness/disorder that now poses a risk to other children or affects the child's ability to participate safely in the program? ___ Yes ___ No

___ This child has a health condition which may require emergency action at school, e.g., seizures, allergies, asthma. Specify Below.
 ___ The child is on long-term or emergency medication. Specify Below

Comments and recommendations (attach additional sheet if necessary):

___ This child may participate fully in the early childhood program.
 ___ This child may participate in the early childhood program with the following restrictions/adaptations: (specify reason and restriction)

___ Yes ___ No Based on this comprehensive health history and physical examination, this child has maintained his/her level of wellness.

___ I would like to discuss information in this report with the early childhood provider and/or health consultant/coordinator.

Signature of Health Care Provider MD/DO NP PA	Name (please print or type)	Phone Number
Address	Next Appointment (Mo/Yr) Next Appointment for Immunizations (Mo/Yr)	