

HOUSE OF CHILDREN

APPLICATION/RECORD OF CHILD INFORMATION

Name of Child _____ Birthdate _____ Sex _____

Address _____

Date Child Received _____

INFORMATION ON PARENTS OR OTHER PERSON(S) ENROLLING THE CHILD:

Name _____ Name _____

Relation to Child _____ Relation to Child _____

Are Birth Parents Living together: Yes _____ No _____ (If not, legal custody arrangements must be provided.)

Home Address _____ Home Address _____

Phone Number _____ Phone Number _____

Place of Employment _____ Place of Employment _____

Address _____ Address _____

Work Number _____ Work Number _____

Working Hours _____ Working Hours _____

EMERGENCY CONTACT: PERSON TO NOTIFY IF PERSON ENROLLING THE CHILD CAN'T BE REACHED

Name _____ Address _____

Phone Number _____ Relationship _____

PHYSICIAN TO CALL IF CHILD BECOMES ILL OR INJURED

Name _____ Address _____

Phone _____ Hospital or Clinic _____

PROGRAM

Days per week _____ Hours of care _____

Fee (to be filled out during enrollment conference) _____

Signature of parent/person enrolling the child

Signature of Director

Enrollment information continued

Tell us about your child so that we can better meet their needs!

If your child has any of the following, please explain:

Medical Problems: _____

Physical “Special Considerations”: _____

Social (family) or Emotional “Special Considerations”: _____

Restrictions for play, either indoors or outdoors: _____

Allergies: _____

Food Dislikes: _____

Does the child Nap?_____ If yes, when & for how long on average?_____

Is the child Toilet Trained?: _____

Does the child have special names for objects, or speak in multiple languages?_____

If the child is an infant, what are specific feeding instructions (current)?_____

Other information that will help in meeting your child’s needs: _____

House of Children Illness Policy

In the interest of maintaining your child's health, we are putting our illness policy in a format that you and the other parents in your child's class can review & acknowledge.

Illness is an inevitable fact of life for young children in a group care setting. To reduce the incidents of illness at our center, we must however set some standards for attendance.

Standards for Illness Attendance:

- Children with a low fever (under 101) can be brought to school **unless** there is another symptom present that would indicate a potentially contagious condition ie; rash, lethargy, excessive irritability, vomiting, diarrhea.
- A child who has been sent home with a fever over 101 may not return until they have been fever free (without medication) for 24 hours.
- **Bringing a sick, medicated child to school is grounds for discharge from the program.** Fever-reducing medications mask symptoms and encourage parents to bring a child to school that is still sick and contagious. This is primarily why children become sick in a group setting. A child who comes to school apparently healthy, then spikes a fever is *always* suspected of being medicated.
- Children with open cold-sores, impetigo, or hand foot & mouth disease can not be brought to school until all blistering is healed over.
- Children with an unidentified rash can not be brought to school until the rash is clear, or has been identified as non-contagious.
- Children should not be brought to school if they have vomited within the past 24 hours.
- Children should not be brought to school if they have experienced diarrhea without a recovering firm bowel movement.
- Children with a repetitive cough can be brought to school *only if* they have a written Dr. note that they are not contagious. The school reserves the right to over-ride Dr's notes if a child is coughing frequently and/or the child is not mature enough to cover their cough.
- Children with chronically runny noses should be treated with over the counter medication to reduce discharge while at school. A child may be sent home due to severe runny nose. A nose that runs green through the entire day should be treated by a Doctor as this is clear indication of infection.

More than all of these standards, parents must use their own good judgment. When your child is sick by your standards, please don't expose them to other children. It's hard enough on you & your child, please don't put other parents & children through the same struggles.

Thank you for your assistance in implementing this policy.

The school reserves the right to deny admission to any child on any day, based on the opinion of the "Director in Charge" at the time a child is brought in.

I have read the Illness Policy and understand it completely. _____

Adult's Name

Child's Name

Adult's Signature & Date

Child's Name

Child's Name

House of Children

Expectations and Understandings

I am choosing to enroll my child into a program at House of Children. Whether temporary or long term, part-time or full-time, I have a certain set of expectations.

- I expect that my child will be cared for, not only taken care of.
- My child will receive adequate (& enjoyable) nutrition throughout the day, providing they are present at eating times.
- I expect that my child will be safe and not be exposed to anything that is in any way dangerous to him/her.
- I expect that my child will develop social, physical and intellectual skills at a developmentally appropriate rate, which is unique to each child.
- I expect that my child will be stimulated by new experiences on a daily basis, while still being made comfortable with the familiarity of his / her surroundings.
- I expect that my child's caregivers and teachers will communicate with me regularly on any and all issues that concern or affect my child.
- I expect my child's caregivers and teachers to act as professionals at all times and to use the knowledge that they have gained through experience and education, to the benefit of my child.
- I expect that my child and I will be treated with respect and consideration.
- I expect that my child will enjoy their experience at House of Children, and that I will experience the peace of mind that comes from knowing that my child is safe and happy.

House of Children has the following expectations in addition to other policies;

I understand that House of Children, in providing for the needs of my child has expectations as well, including;

- Regular communication from me, on issues at home or other, that might affect my child's disposition or behavior, or could call for additional attention to be needed by my child in any area.
- I will provide my child with clean and fresh clothing, and baths on a daily basis.
- I will maintain my child's supplies as requested by policies or caregivers and teachers.
- I will pay my tuition on time, so as not to adversely affect the program or my child's participation in the program.
- I will maintain a commitment to direct and immediate communication with the Center Director regarding any center-related issues that could affect the well-being of any child.

In order for House of Children to provide quality care for the children enrolled, certain understandings and agreements must also exist. Some of those agreements are indicated here, and require signed approval:

I understand that there is a non-refundable \$50 registration fee due at the time these documents are completed. This fee will serve to hold a space in class for my child. I will also pay my child's first week's tuition two weeks prior to their start date.
Initial Here, sign at end of document: _____

I understand that my child's tuition is _____ per week or _____ per month.

If I am paying monthly, tuition is due by me on the 25th of the month prior to services being provided.

If I am paying weekly, tuition is due on the Friday prior to the week services are provided.

I understand that late tuition will result in a \$10 late fee plus a fee of \$1 for each day that it is late.

I understand that if I am late picking up my child (after 5:50 pm), I will be responsible for a \$1 per minute charge due that evening or the next day of attendance.

Initial Here, sign at end of document: _____

Even if any subsidy, or other payment arrangement is in place, I remain personally responsible for seeing that the center is paid for services contracted here, by my request. This means that if I become disqualified from subsidies or other types of support, either temporarily or permanently, I will personally make full payment of the tuition amount agreed upon here in a timely manner (by the due date).

Initial Here, sign at end of document: _____

I agree that when my child's enrollment at House of Children is to end, I will give at least two weeks notification in writing to either my child's teacher, or the Center Director. Any lack of notice will result in charges accruing for the two weeks after my child ceases to attend. This is a matter of respect for the Center personnel, and for people who may be waiting for their child to be enrolled in the program.

Initial Here, sign at end of document: _____

Expectations & Understandings Continued

I agree that I will pay any nominal amount (under \$10) for field trips and class pictures when they are offered to my child's class as long as I have proper notification, unless I notify the center in writing that my child will not be participating in the additional activity prior to the day on which that activity will take place. These nominal amounts will be added to my tuition, or can be paid separately. This policy allows my child's caregiver time to make alternate arrangements for daily activities for my child (if they are available).

Initial Here, sign at end of document: _____

I understand that the center's employees are well trained and qualified for what they do, and that they are employed to serve the needs of the children enrolled in the program (including my own). Employees of the center are not available for hire during the work-day, which is 8am-6pm Monday thru Friday. If I choose to hire an employee or ex-employee of the center either while they are employed by the center, or within ninety (90) days of the end of their employment at House of Children, that I will pay the center a fee of \$2,000, to be paid within 10 days of the employee's leaving House of Children, or beginning in my employ, whichever occurs first.

Initial Here, sign at end of document: _____

Name(s) of Child(ren) _____

Parent / Guardian's Signature: _____ Date: _____

Name Printed: _____ Enrollment/Start Date: _____

House of Children Medication Policy

In the continuing effort to provide a safe and healthy environment for the children in our care, House of Children has implemented the following policy concerning medication.

The school will give medication as prescribed *and* as directed by parents within the following guidelines; Medications prescribed for once or twice per day will not be given at school unless a Doctor specifically states that the timing of the medication requires that it is given during the child's attendance. For medications required to be given three or more times per day, House of Children staff will give the dose once per day, unless otherwise required by a Doctor. Vitamin & nutritional supplements should be managed at home, not brought in to the center, unless the parent & Director meet & determine otherwise.

All Medication to be left for a child at school must be signed in by the legal guardian of the child, on a form that is available on a clipboard in the front lobby, near the front door. The form & medicine must be taken by the guardian to the Director or to the Infant room staff, who will then immediately lock the medicine in a container set up specifically for that purpose.

The form must be filled out in it's entirety and dated. Each dose given to the child will be recorded on this form. The form will cease to be valid 14 days after it is originally filled out.

All parents are expected to sign this policy. A copy of the policy with their signature will be kept on file and a copy will be returned to them. Parents must be aware that violation of this policy ie; leaving Tylenol in a back-pack or diaper bag is grounds for immediate discharge from the program.

Parent/Guardian Name & Signature

Date

Child or Childrens' names;

Policy Notes for Parents:

House of Children's Phone Number is 815-337-HOME (4663).
Our mailing or delivery address is: 1033 Lake Avenue, Woodstock, IL 60098
Our Director is Deborah J. Louise
John R. & Deborah J. Louise are the owners of House of Children.

Holidays:

As a rule, House of Children is closed on the following Holidays:

- New Year's Day
- Memorial Day
- Fourth of July
- Labor Day
- Thanksgiving
- Day After Thanksgiving
- Christmas Eve
- Christmas Day
- New Year's Eve

All tuitions continue regardless of these holidays. Holidays are subject to change with limited advance notice.

Facility Closings:

House of Children will close two times each year for Curriculum Management. These closings will be announced in the Family Newsletter and will be posted in the Lobby as the date approaches.

On days when House of Children is closed due to emergency weather or infrastructure issues, the closing will be announced on Radio Station FM 105.5 (Star 105.5). The school will close for bad weather, when District 200 closes for bad weather.

Vacations

Once a child who is enrolled full time, has completed 12 months of consistent weekly attendance, they can take two weeks of vacation without paying for their space. These vacations must be taken in whole week increments, either one or two at a time. No one is required to take vacation time, and please remember that we will require at least 5 days advance notice when a week off will be taken in order for a credit to be applied. Time off due to illness is not eligible for reduction or elimination of tuition.

Registration:

Children will be accepted from House of Children's waiting list on a first come, first served basis, with the limited, occasional exception of a staff member's child requiring care. There is a one-time \$50 registration fee and the first week's tuition must be paid two weeks prior to their start date.

Arrival of Children:

When children arrive at the facility, they will require the person signing them in to escort them into their classroom. This escort will be required to sign them into their classroom computer prior to leaving them with their teacher.

Release of Children:

Children will only be released to the person that dropped them off, unless other arrangements have been made with the teacher that day or another arrangement has been established ie; mom drops off, dad picks up.

Required Documentation:

- All children will be required to have a signed physical (no older than 6 months) prior to entering the program.
- All children will be required to be current on their immunizations and this attested to by a physician. Failure to keep current on immunizations is grounds for discharge from program.
- All children require one emergency contact, and alternate pick-up contacts, complete with phone numbers.
- The enrollment form must be filled out in its entirety prior to entry into the program and
- All families will be required to keep required documentation up to date and to return requested documentation in a timely manner.

Personal Belongings brought to the Center

When a child brings personal items to the center, they will be stored in the child's backpack on the child's hook when not in use. The center discourages bringing items (other than personal comfort items) from home because they may become damaged, or lost, can not be shared, and may not be appropriate for use in the group setting. Please be sure to label any personal items, including pacifiers, blankets, bottles, cups, clothing, etc. . .

Medication:

Children requiring **medication of any kind, including over the counter medication, will require a parents note with dispensing instructions.** Only the Site Director or other Director Qualified staff members may dispense medication of any kind. Medication will only be dispensed orally and as directed in writing by parents and/or physicians.

Parent Policies Continued Pg. 2

Illness:

Illness is an inevitable fact of life for young children in a group care setting. To reduce the incidents of illness at our center, we must however set some standards for attendance. Those standards will be provided to parents and must be signed and returned with registration documentation.

Medical Care:

- If a child is injured, but not seriously, an injury report will be prepared. If a child complains of illness with or without symptoms, an illness report will be prepared. Teachers will use their best judgment as to when a parent should be notified, and when a parent is involved in illness or injury management, the center will respect the parent's wishes unless the parent's wishes conflict with the teacher's or Site Director's professional training, or with licensing requirements.
- If a child is injured seriously or becomes ill with significant symptoms, parents will be contacted, and the appropriate measures will be taken. If a child appears to be in immediate need of medical care, 911 will be called, and then the parent. The parent will be encouraged to meet the child at the local hospital to participate in the child's care there.
- If a child will require the care of an "alternative Certified Practitioner", that Practitioner's name and contact information must be provided to the center upon registration of the child. DCFS licensing requirements must be followed unless the choice of care is a matter of religion. Additional parent releases will be required to adjust our emergency response procedures.

Discipline:

Guidance is the course of action used by House of Children's staff. For example; when a child hurts another child or negatively disrupts another child's attempt at play or learning, teachers will intervene to assist the children in problem solving. If no resolution exists between the two, they will be re-directed into another activity separately. Children are provided with modeling to encourage socially acceptable behavior. When a child is old enough to understand (varies by child) any mistaken behavior will be discussed with them. If a behavior continues, the child will be given time alone to relax and re-direct themselves, or will be taken for a walk to "cool off" and with consistently mistaken behavior, parents will be involved as a solution is sought

Discharge from Program:

Any child who, after attempts have been made to meet the child's individual needs, demonstrates inability to benefit from the type of programming offered by the facility, or whose presence is detrimental to the group, may be discharged from the program. In all instances, when administration decides that it is in the best interest of the child or program to terminate enrollment, the child's & parents' needs will be considered by attempting to plan with the parents, to meet the child's needs when he or she leaves the facility, including assisting with referrals to other agencies.

Complaints:

If a parent has a complaint about a child, they are recommended to discuss it directly with their child's teacher. If a parent has a complaint about their child's or another teacher or assistant, or the program, policy or facility, they are requested to discuss it with the Site Director. Complaints will be dealt with promptly and with confidentiality.

Mandated Reporter Status:

House of Children's employees are legally required to be Mandated Reporters. This means that if any employee suspects neglect or abuse, or sees signs indicating the same, but doesn't even suspect it, they are required to, and will report to the Department of Children and Family Services. Parents can avoid unnecessary calls to DCFS by providing proof of treatment if a child is injured while at home.

Transportation:

House of Children will utilize staff parents, and our own passenger van for field trips.

District 200 busses will pick up and drop off children registered for District 200 Early Childhood Programs ie; Kindergarten & Pre-Kindergarten, in the am and pm.

Field Trips:

Field Trips will be scheduled occasionally for all children in the Pre-School, Pre-Kindergarten & Kindergarten Programs. Field Trips will reflect the interests of the children and will be planned ahead of time, so that all scheduled events either on-site or off-site will be communicated to the parents / guardians of the children well in advance of their scheduled dates. Parent volunteers are encouraged, and may be requested to accompany the groups.

Communication:

Teachers and parents will communicate one on one, both verbally and in writing on the child's daily logs. The computerized sign-in system will be the means used to communicate about immunization, documentation or tuition issues so as not to create discomfort in the Teacher/Parent or Director/Parent relationship. The Site Director has an "open door" policy and is eager to communicate with parents regarding their needs, available resources, the programming, or other center or care related issues.

Confidentiality:

The staff at House of Children is required prior to hire, to agree to a statement of confidentiality. Within this agreement is specific recognition of the sanctity of the homes of our children and their families. Young children often say things that are not meant to be repeated. These comments, if not reflecting situations dangerous to the child, will go unrepeated. Our staff will not discuss any confidential comments by or issues concerning, any of our children or their families either among themselves or outside of the facility. Issues that cause concern by a staff member may be discussed between that staff member and the Site Director.

Insurance:

Children enrolled at House of Children have accident insurance available to them for injuries incurred during a center-sponsored activity. This plan is included in the cost of tuition, and has been established as a secondary insurance policy for each enrolled child. If you would like further information about this plan, please contact our Site Director.

Religion:

We understand that each child will bring with them some form of religious beliefs and/or knowledge. House of Children respects the beliefs of all children and adults involved in our programming and will make every effort to include references to those beliefs at times that are appropriate, ie; holidays, birth's, deaths, etc. . . There will be no formal religious training associated with our programming. Various holidays may be celebrated, upon the discretion of the Site Director, but will be celebrated without formal religious curriculum.

At House of Children . . .

**We provide Developmentally Appropriate and enjoyable programming for children!
We offer a comfortable environment for parents, our staff and the children in our program!
We emphasize professionalism in our staff, as Teachers of Quality Early Childhood Programming.**

Fee Notes:

- Registration for any program requires a one time \$50 non-refundable deposit.
- We accept subsidy assistance payments to supplement tuition. Please inquire about eligibility. We will assist you in applying!
- There is a 10% discount for the second, third and fourth member of the same family enrolled at least ½ time.
- Tuition is to be paid Weekly or Monthly, in advance.
- Payments can be made via EFT, Check or Cash.
- Our hours of operation are 7:00 am thru 6:00 pm, Monday thru Friday
- There is a \$10 late fee for tuition not received by the due date & \$1/day until it is received. Children will not be admitted to the program after the second day of late tuition.
- There is a \$1/minute fee for children not picked up by our closing time of 6pm. This fee must be paid in cash, before the child returns on their next scheduled day.

CONSENTS TO CHILD CARE PROVIDERS

Name of Child _____

PARENT(S) OR LEGAL GUARDIAN PLACING THE CHILD MAY SIGN ANY OR ALL OF THE FOLLOWING CONSENTS:

EMERGENCY MEDICAL CARE

This authorizes House of Children, Inc. to secure EMERGENCY medical care for my child when I cannot be immediately reached at the time of the emergency. I will be responsible for the emergency medical charges upon receipt of the statement.

My preferred doctor/clinic/hospital is: _____

Date _____

Signature of parent/guardian

Relationship to child

ADMINISTER PRESCRIPTION and/or PATENT MEDICINE

I authorize House of Children, Inc. to administer prescribed medicine to my child as specified in the prescription's directions for administration.

I authorize House of Children, Inc. to administer patent medicine to my child as specified in written instructions.

Date _____

Signature of parent/guardian

Relationship to child

VISION & HEARING SCREENINGS

The McHenry County Department of Health holds a vision and hearing screening each year. I authorize my child to participate in the screening, unless he/she is already under the care of an eye/ear doctor, or has been screened at another location. This is a state mandated program.

Date _____

Signature of parent/guardian

Relationship to child

(over)

PHOTOGRAPHS, VIDEOTAPES and ART PROJECTS

I authorize the House of Children, Inc. staff to take photographs and/or videotapes of my child during their time at the center. My consent is given for those photographs and videotapes to be used in publications, shown at meetings, in settings where development of children is being studied, or used in publicity for the staff, including, but not limited to displays in the community, newsletters, fliers and the like or in publicity for the center.

Date _____

Signature of parent/guardian

Relationship to child

FIELD TRIPS

I authorize House of Children to take my child on walking trips, special excursions, and to nearby public park facilities. I understand all such trips will be under the supervision of House of Children, and that health and safety precautions are taken in compliance with DCFS standards for licensure.

Date _____

Signature of parent/guardian

Relationship to child

PERSONS AUTHORIZED TO PICK UP CHILD

I authorize ONLY the following person(s) to pick up my child when I am unavailable:

Name _____

Home Phone _____

Address _____

Work Phone _____

Name _____

Home Phone _____

Address _____

Work Phone _____

Date _____

Signature of parent/guardian

Relationship to child



I authorize House of Children, Inc. to deduct _____ for my child's tuition, from the account indicated or photocopied below. I understand that a 2% discount will be applied for payment through Electronic Funds Transfer, but that no discount and a \$15 fee will be applied if the transfer is denied due to insufficient funds.

I elect to have my tuition drawn as follows

- A. _____ Weekly on Friday for the following week, or the day before a holiday if the center is closed on any given Friday.
- B. _____ Bi-Weekly on Friday for the coming two weeks, or the day before a holiday if the center is closed on any given Friday.
- C. _____ Monthly on the last business day of the month for the coming month.

I understand that this deduction will continue regularly on the schedule indicated above until House of Children, Inc. receives my written request for it to cease or be adjusted.

I also understand that annual rate increases will be automatically applied after public notification, and that when my child changes rooms through transition of age, that the appropriate decrease in tuition will also be applied. Increases or decreases due to schedule changes will require a new signed EFT authorization.

Name of Account holder; _____

Signature of Account holder; _____ Date; _____

Account information (or attach a voided check here)

Bank name; _____

Account number: _____ Routing number: _____