

#### **Kangaroo Kids Child Care & Learning Center**

Selected as the #1 School in the United States of America by the National Association of Child Care Professionals (NACCP).

Dear Parents.

Welcome to Kangaroo Kids Child Care and Learning Center! Kangaroo Kids is one of only 7 % of the schools nationwide to be accredited by the National Association for The Education of Young Children (NAEYC). The award is only given to schools that achieve the highest standards for excellence for Early Childhood Education Programs.

#### "Your Child Will Be a Jump Ahead"

We know how important it is for your child to receive the highest quality of care and welcome your communication and input to assist us in making our program the best for your child. We will continuously strive to live up to the trust you have placed in us to care for your child. This booklet serves as a source of information to you about our Policies, Philosophies, and Goals regarding our care and education of your child.

We look forward to creating a happy, loving environment where children can learn to appreciate the color of a butterfly, develop lifelong memories with their friends, grow to trust others, and have confidence in themselves as well as developing the educational foundation they need for the future.

We would like to do everything we can to make your child's early years an enjoyable and memorable experience. Please review the enclosed information, complete the forms in the back of this booklet, and return them to the office.

#### **OUR PHILOSOPHY:**

Our goal at Kangaroo Kids is to provide a creative, safe, fun, family friendly educational experience where children develop a love of learning in an environment that is positive, caring, and professional.

The early nurturing of self-confidence and a love of learning will have benefits that can last a lifetime.



#### TABLE of CONTENTS

1.	FOR YOUR INFORMATION	PAGE
	• Parent Policies	3
	• Parent Involvement	3
	General Policies	3
	• Visitor and Guest Speaker Policies	8
	• Office of Licensing Information to Parents DCF Statement (formerly DYFS)	9
	• Discipline Policy	11
	• Policy on the Release of Children	12
	Health Requirements	13
	• Prevention and Management of Illness/Accidents	15
	• Standard Quarantine Guidelines for Typical Contagious Diseases	17
	Health and Hygiene Guidelines	18
	Choking Hazard Foods	19
	• Toilet Teaching	20
	Kangaroo Kids Curriculum	23
	• Kangaroo Kids School Calendar and Events	24
	• What To Bring	25
2.	THE FOLLOWING FORMS TO BE COMPLETED AND RETURNED TO THE SCHOOL OFFICE	
	• "Tell Us About Your Child"-for Infants, Waddlers and Toddlers	25
	• "Tell Us About Your Child" – for Preschool, Pre-Kindergarten and Kindergarten	26
	• Acknowledgment of Receipt of information	27
	• General Consent Forms	27
	• Parent Agreement Form	28
	• Parent Volunteer and Help Form	29
	Standard School Immunization Record	30
	Universal Child Health Record	32
	Permission to give Medication Form	33
	• Affidavit – for EMERGENCY Medical Treatment	34
	• Children's Enrollment Application	35

Updated: 2018-02-12

#### PARENT POLICIES

Kangaroo Kids has an open door policy where parents are welcome to visit at any time. Of course, we ask your cooperation in terms of minimizing distractions so as not to disturb the ongoing structure and safety of the class. We encourage parents to share any special talents with us. We will have educational events as part of our curriculum like Community Helpers month, where parents can come in to speak about their Careers, and Multicultural Events, where parents can talk or read and bring Show and Tell items about their heritage.

#### PARENT INVOLVEMENT

Your children flourish when you support them and their school. Be involved! We would like to be partners with you in the growth and development of your child and welcome your comments, suggestions, and visits at any time. We invite you to share your child's experience by visiting and observing his or her activities and adventures.

#### How can you help?

- Show your pleasure in their work and display it proudly.
- Read with your child.
- Attend special events at school.
- Grandparents are especially encouraged to have an active part.
- Attend Parent Conferences
- Parent Volunteers

Kangaroo Kids has numerous opportunity to partner with families beyond daily communications, tracking sheets and newsletters. Some additional partnerships and resources including special events, field trips, workshops, family events, Back to School Night, Conferences, Assessments, Referrals and resources of families, Meet the Teachers, social media and Home Visits. Please contact the office for details on any of these events. See Parent Communication and Involvement document.

#### **GENERAL POLICIES**

#### **Babysitting**

Kangaroo Kids Staff may not baby-sit for families of children enrolled at Kangaroo Kids.

#### **Behavioral Management**

A well-prepared class, with lots of structure, learning, creativity, and fun is the best strategy for avoiding discipline problems.

- Discipline should be fair, firm, short, and warned about in advance.
- Discipline should never be harsh.
- Look for and accent the good in every child.

At Kangaroo Kids, we seek to build a child's self-esteem by helping him or her to develop self-control and responsibility for his or her actions. **We never use physical punishment or belittle any child.** A few simple, understandable rules are established which set the limits of behavior for the safety and protection of the children. Adults are firm, supportive, and consistent in their approach. Our goal is to help each child achieve self-control.

Children are encouraged to use language to resolve conflicts whenever possible, or are redirected to alternate activities as necessary. A child may be required to choose a different activity or refrain from interaction with other children until he or she can regain appropriate control. Children rejoin activities whenever they are able to cope. In this way, children learn acceptable group behavior and develop positive techniques to solve their own problems.

#### **Biting**

#### If Your Child is Bitten

Child development research indicates that approximately fifty percent of all children enrolled in childcare centers will be bitten. Waddlers and Toddlers especially will often use biting as a form of communication. Kangaroo Kids will strive to minimize biting accidents. However, it is highly likely that your child will be bitten at some time. If this should occur, we will do our best to comfort your child and care for his/her needs immediately. We will also inform the parents of the biter and work with them and their child to change this behavior. The 1993 United States Public Health Service Surgeon General's (Antonia Coello Novello, M.D., M.P.H.) Report to the American Public on HIV Infection and AIDS printed by the Centers for Disease Control (pg. 9) states there are no reported cases of HIV transmission from saliva, human bites or attending school with HIV-infected persons. If your child is bitten, you may want to contact your doctor to determine whether the nature of the bite requires medical attention.

#### If Your Child Bites another Child

Biting is not acceptable behavior. If your child should bite, you will be notified in writing. There will be THREE warnings. If the biting persists, the child may be dismissed if a solution cannot be found. See additional information in Kangaroo Kids Biting Policies and Procedures.

#### **Breastfeeding**

We welcome Mom's to breastfeed their babies whenever possible and will provide a comfortable, discreet area for you to bond with your baby. You may also send breast milk in a separate sealed container and we will warm in a separate bottle warmer to feed your baby. Please date and label all foods, drinks and milk that you bring to school for your baby. However, all milk is discarded after being unrefrigerated for one hour or longer.

#### **Car Safety**

Do not leave your car running. Never leave children unattended in the parking lot, and always wear seat belts.

#### **Closing Time Pick-up Policy**

We ask you to make every effort to pick up your child before the center's closing time. Policy dictates that our *staff may not take your child home* with them or make other baby-sitting arrangements.

If a child is left in the center after closing, the staff will take the following measures:

- 1. Try to contact you by phone.
- 2. Try to call your emergency contacts.
- 3. If unsuccessful, the Director will contact the appropriate community authorities as directed by DCF.

There will be late charges should you leave your child in the center past closing time.

#### Conferences

You will have many opportunities to meet with your child's teacher regarding your child's progress, curriculum and development in all the domains of learning. We will hold a "Back to School" night in the fall and formal conferences in the beginning of the calendar year. You may request a conference at anytime. Please see the Parent Involvement and Communication form for additional information. Assessment procedures form from your lead teacher.

#### **Confidentiality**

Kangaroo Kids respects the right of each family to privacy and confidentiality regarding all health, behavioral and developmental records, and information concerning their child. The only exception will be to administrators and on a need to know, approved basis teaching staff, parents or legal guardians, and regulatory authorities. These rights to privacy and confidentiality are protected by various federal and state statutes, local ordinances, and regulatory rules. If your child is involved in an altercation or biting incident with another child, Kangaroo Kids will not reveal your child's identity to the parents of the other child without your prior written consent, except as required by law. Any information that could be construed as confidential regarding children, parents, each other, or the program should be kept confidential.

#### **Diapering**

All children in diapers will be changed every 1 ½ to 2 hours, or as needed when wet or soiled and upon waking from a nap. We request that you bring in commercially available disposable diapers. We start toilet training in conjunction with the family's attempt to train and child readiness (please see toilet training section). If child has two accidents, we reserve the right to put him or her in a diaper or converter. We prefer a diaper or converter at training time instead of a pull-up. Please feel free to discuss any concerns with staff.

#### **Drop off and Pick Up**

For your peace of mind & the safety of your child, children must be signed in & out by parents, or a person you have specifically authorized, whose name you've listed on the Enrollment Application. **No child will be released to anyone without your authorization.** If custody is an issue, we must have a notarized court order on file outlining the custody arrangements. Identification will be requested from any person picking up your child.

Please sign your child in each morning. You should escort your child to the classroom and notify the caregiver of his or her arrival. No child may be left at the center without completing the sign-in process. **Please do not leave your child unattended or unsupervised for any reason.** At the end of the day, when you pick up your child and collect his or her belongings, notify the caregiver of your departure and sign out.

#### **Enrollment**

Kangaroo Kids is an equal opportunity provider of childcare services. Applications for enrollment are accepted without regard to race, religion, sex, or national origin.

Kangaroo Kids reserves the right to refuse enrollment of any child or to ask parents to make alternative arrangements for the care of a child enrolled in the Kangaroo Kids program.

Kangaroo Kids requires a pre-admission visit with parent and child to acquaint the new family with the center environment, child's caregivers, and schedule for care.

#### **Emergency Evacuation**

Evacuation drills are held regularly at Kangaroo Kids. Should an emergency occur which requires evacuation of the center, you will be notified as soon as possible, and you will be asked to pick up your child if the emergency is expected to last a significant length of time. If you are at the center at the time of a drill or an emergency, you are requested to follow our procedures and evacuate the building immediately along with the children. If we need to evacuate the grounds our meeting point is up the street at the new Branchburg Firehouse, right on Rte. 28. If we need to evacuate our immediate area our second evacuation point is The Children's Campus at RVCC on Rt. 28 and our third is South Branch Reformed Church Preschool 870 River Road Hillsborough, NJ 08844. Ask for Maureen 908-369-7885. Your child can only be dismissed from that point and not during evacuation. Our emergency plans have been approved by the Branchburg Police Emergency Management Task Force.

#### **Expulsion**

The Department of Child and Family services (DCF, formerly DYFS) requires that we inform you regarding the possibility of expulsion. Kangaroo Kids reserves the right to dismiss a child or parent for inappropriate behavior, or for not abiding by the rules and policies of Kangaroo Kids including but not limited to actions by the child or parent that pose a risk of serious injury to self or others, threats or intimidating actions toward other children, staff, or families; verbal abuse, failure to pay or habitual lateness of payment, failure to complete required forms including child's immunization records, or habitual tardiness at pick up. If, after remedial actions have not worked, the parent/guardian will be advised verbally and in writing regarding the behavior warranting expulsion and will be informed regarding the expected behavioral changes required in order for the child or parent to return to the center. See detailed policy for more information.

#### **Grievance Procedures**

We have an open-door policy at Kangaroo Kids and are always interested in your comments, concerns, and questions. If you have any difficulties or differences, we are happy to discuss with you and negotiate a solution. For day-to-day events, your first contact should be with your child's lead teacher. You can also leave a message in the parent-teacher message book in your child's room. For more global or reoccurring issues please contact the director or assistant director. We will work together to find a translator to assist in communication, as needed. You may request a meeting verbally or in writing.

#### **Insurance Information**

If your child is injured while at Kangaroo Kids Child Care and Learning Center, Inc., the center provides a primary insurance policy on the students with a "zero" deductible.\* As soon as the office is notified of an injury, we will contact our insurance agent. Our office can supply you with an accident/medical claim form to submit to your doctor, to be sent with bills for treatment to the insurance company. (\*Contact our office to establish the limits of the policy/contract.)

Learning at Home: The philosophy of Kangaroo Kids is we want children to develop a life long love of learning. The best at home activities are reading with your child and having engaged conversations. Having back and forth conversations with your child not only teaches them language but also expands their education base by expanding their horizon and knowledge of the social skills of conversation. In addition, talking and listening with your child can boost their self- image when they see you are interested in their thoughts and what they have to say. Hands on and developmentally appropriate activities are best for young children. If you are baking cookies you can teach many math skills (measuring and counting) and science skills (understand what happens when 2 substances mix or why butter melts). Make sure you include some physical activities such as skipping, throwing and catching. Talk to your child's teacher about the best at home activities the age of your child.

#### **Medical Home**

All parents are encouraged to have a **medical home**. According American Academy of Pediatrics the medical home is a cultivated partnership between the patient, family, and primary provider in cooperation with specialists and support from the community. The patient/family is the focal point of this model, and the medical home is built around this center.

The medical home is best described as a model or philosophy of primary care that is patient-centered, comprehensive, team-based, coordinated, accessible, and focused on quality and safety. It has become a widely accepted model for how primary care should be organized and delivered throughout the health care system, and is a philosophy of health care delivery that encourages providers and care teams to meet patients where they are, from the simplest to the most complex conditions. It is a place where patients are treated with respect, dignity, and compassion, and enable strong and trusting relationships with providers and staff. Above all, the medical home is not a final destination instead, it is a model for achieving primary care excellence so that care is received in the right place, at the right time, and in the manner that best suits a patient's needs.

#### **Screen Time**

Policy Regarding Television, Computers & Other Video or Technology Equipment Any use of the above shall be limited to educational and instructional use, shall be age and developmentally appropriate, and shall not be used as a substitute for planned activities or for passive viewing.

Computers,	Ipads, Videos and other Technology
	Educational
	Short (a maximum of 10-15 minutes)
	Related to your curriculum
	Sign up for ipads on the door of the ipad shelf. Be sure to instruct children in the proper use. Mini
	ipads should be used at the table, with clean hands, and in a developmentally appropriate manner.
	Should only be used for interactive educational purposes
Reminders:	
	Feature length films are not permitted.
	Do not use as a babysitter.
	Children must have other options during video than sitting to watch the video.
	Do not use technology or videos during meal or snack time.
	Children two and under should not use technology or Tv
	Children should be sitting at the table with the ipad.
	Wash and dry your hands thoroughly before using the ipad.
	Wipe down the computer and ipad after each use with wipes specifically designed for the computer.

Close all apps at the end of each use.
Return all ipads to the office at the end of your use.
If you do take a picture on the ipad it will automatically go to dropbox on the rear computer. You
should take it from dropbox and put it in your classroom folder on the rear computer and then delete
it from dropbox and from the ipad.

#### Security

There are four doors that lead to the outside of the building. All doors remain locked at all times throughout the school day when all classes are inside. When classes go outside, the door remains unlocked until the class comes back inside. There is an access code for the front door that is given only to parents of currently enrolled children. We change the code in the fall at the beginning of the school year. We request that you do not give your code to children or to other people who might pick up your child. Anyone besides parents and staff should ring the buzzer to gain admittance so we can check their identification. Each parent/guardian is provided a personalized fingerprint sign-in/out at the start of their child's enrollment. If the parent/guardian requests a new or additional emergency contact, the parent must provide the office with written notification and the new contact must provide the office with a photo ID. Kangaroo Kids also requires a code word to be filled out on the child's enrollment application for identification purposes.

Kangaroo Kids has a camera security system in place, in which all parking lots, outdoor play areas, the pool, and the classrooms are accessible to designated office staff only.

**Social Media Policy:** Kangaroo Kids has a school facebook, Instagram, twitter, google, pinterest, linkedin and You tube page. In addition, we have a blog and website. We photograph, video and post information from time to time for news articles, displays, our website, online photo galleries, and social media. Our social media pages are open to the public, but does not include children's names. If you would like you child to be included please be sure to sign our social media permission form. There are some children at the school that cannot be photographed so please only include your child in any social media posts. Parents are prohibited from posting photos or children other than their own.

#### **Special Needs**

At your request, Kangaroo Kids Staff will work with a professional specialist to carry out any specialized individual plans for your child. You must give us written permission to share any information about your child. If you need help advocating for your child, please let us know and we will assist you.

#### **Toys**

Except for toys that are needed to help ease your child's transition from home, we ask that toys be left at home until "Sharing Time." Check with your child's caregiver for the specific day. Any item brought from home should be clearly labeled with your child's name. Guns, war toys and other toys of a violent nature are not considered appropriate tools for learning and **may not be brought to the center.** Please understand we cannot be responsible for lost toys and unlabeled articles.

#### **Transition**

Kangaroo Kids has one major transition each year in September during which children, based on chronological age and readiness, move to the next class level. Individual transitions may occur as space allows. If space becomes available during the school year, the next oldest child, based on chronological age and readiness, will be offered the opportunity to progress to the next class.

We do not operate on the same age cut off date as the local public school systems. Their cut off date is unbendable and is usually the end of September. After a child graduates from our Pre-K program, he/she can enter our kindergarten, regardless of birthday. A child will not be admitted to the public school if he/she does not meet the age cut off for your town. Our Staff is diversified and skilled at meeting the individual needs of any child in the class and our small group size allows for individualized instruction. We will provide information about your child to public schools or other schools your child transfers to, with your written request. We will assist you with information regarding tours and enrollment for public schools.

#### **Waiting List**

If a class is filled, your child will be placed on our waiting list after receipt of your non-refundable registration fee of \$55 and your pre-enrollment form. You will be notified when an opening is available. Before your child starts attending, all paperwork including immunization records must be complete.

#### **Weather Emergencies**

In the event of severe weather conditions, please call ahead to make sure staff have arrived and that there are no prohibitive problems which prevent the center from opening. If school is closed, there will be a message on our voicemail by 6:30 AM. Likewise, should severe weather conditions make it necessary for the center to close early; you will be notified by phone so that you can make appropriate arrangements for picking up your child.

#### **VISITOR and GUEST SPEAKER POLICIES**

#### **Discipline**

A well-prepared class, with lots of structure, learning, creativity, and fun is the best strategy for avoiding discipline problems.

- Discipline should be fair, firm, short, and warned about in advance.
- Discipline should never be harsh.
- Look for and accent the good in every child.

At Kangaroo Kids, we seek to build a child's self-esteem by helping him or her to develop self-control and responsibility for his or her actions. We never use physical punishment or belittle a child in any way.

A few simple, understandable rules are established which set the limits of behavior for the safety and protection of the children. Adults are firm, supportive, and consistent in their approach. Our goal is to help each child achieve self-control. We use redirection instead of reprimanding.

Children are encouraged to use language to resolve conflicts whenever possible, or are redirected to alternate activities as necessary. A child may be required to choose a different activity or refrain from interaction with other children until he or she can regain appropriate control. Children rejoin activities whenever they are able to cope. In this way, children learn acceptable group behavior and develop positive techniques to solve their own problems.

#### **Confidentiality**

Any information that could be construed as confidential regarding children, parents, each other, or the program should be kept confidential. Discussions about personal issues are inappropriate at all times.

#### **Emergencies**

It is important to follow the instructions of the In-Charge person in any emergency. Please report any injury, illness, or abusive situations to the In-Charge person immediately.

#### **Health & Safety**

Children and adults must wash hands before and after eating and/or feeding a child, before and after administering and/or taking medication, after handling garbage, after toileting, and after using cleaning products. Please review all abuse and neglect procedures as posted in the Parents Manual. Always be aware of the number of children in your group. Always count if on field trips when getting off on on the bus and throughout the day. Children should never be in a secluded area with an adult. If children need to go to the bathroom take another adult with you.

#### **Supervision**

Children must be CONSTANTLY supervised. They cannot be out of your sight for one second!

#### **Smoking**

Kangaroo Kids maintains a smoke-free environment. There is no smoking anywhere in the school, on the grounds, or the playground.

#### Siblings

When possible, try to arrange for sibling care so that your day at school can be a special experience with your enrolled child.

### 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 <a href="http://www.nj.gov/dcf/providers/licensing/laws/CCCmanual.pdf">http://www.nj.gov/dcf/providers/licensing/laws/CCCmanual.pdf</a> 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 and will not have any repercussions for reporting. 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/.

#### **DISCIPLINE POLICY**

We strive to create an atmosphere that keeps children active, interested, curious and loving the process of learning so there isn't time for misbehavior. In this type of environment, the child is anxious to comply with appropriate behavior standards. We believe discipline is "an opportunity to teach," not to reprimand. Our procedures for managing behavior are:

- Ask the child to behave and explain why, when appropriate.
- Re-direct or distract the child and encourage enthusiastic involvement in a new activity.
- If there is misbehavior or a dispute, the toy or object of disagreement will be removed to rest on a shelf for a while.
- If behavior problems continue, the problem will be discussed with the parents.

#### Our philosophy:

- Discipline must be positive, clear, short, enforced and prepared in advance. It should lead to the child's ability to develop self-control.
- The methods of guidance and discipline used shall be positive, consistent with the developmental needs of the child, applied with full knowledge and understanding of the parents.
- There shall be <u>no</u> use of hitting, corporal punishment, abusive language, ridicule, or harsh, humiliating, or frightening treatment, or any other kind of child abuse, neglect, or exploitation.
- Discipline shall not be associated with rest, toilet training, or food.
- Children shall not be isolated without supervision.
- Discipline shall not be associated with the withholding of emotional responses or stimulation and shall not require the child to remain silent for long periods.
- We believe in encouraging positive behavior. For example, instead of saying, "You can't go outside," we would say, "As soon as you put away your toy, we'd love to go outside."
- Catch them doing something right!

#### POLICY on the RELEASE of CHILDREN

A. Each child may be released only to the child's custodial parent(s) or person(s) authorized by the custodial parent(s), to take the child from the center and to assume responsibility for the child in an emergency if the custodial parent(s) cannot be reached;

The provision that a child shall not be visited by, or released to, a non-custodial parent unless the custodial parent specifically authorizes the center to allow such visits or release in writing. This written authorization, including name, address and phone number shall be maintained in the file.

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

- B. Written procedures to be followed by staff member(s) if the parents(s) or person(s) authorized by the parent(s), as specified in (A) above, fails to pick-up a child at the time of the center's daily closing. The procedure shall require:
  - 1. The child is supervised at all times; and
  - 2. Staff members attempt to contact the parent(s) or person(s) authorized by the parent(s);
  - 3. After an hour or more past closing time, and provided that other arrangements for releasing the child to his/her parent(s) or authorized person(s) have failed and the staff member(s) cannot continue to supervise the child at the center, the staff member shall call the Division's 24-hour Child Abuse Hotline (1-800-792-8610) 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;
- C. Written procedures to be followed by a staff member(s) if the parent(s) or person(s) authorized by the parent(s) appear 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 procedures shall require 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 alternate person(s) authorized by the parent(s); and
  - 3. If the center is unable to make alternative arrangements, as noted in (A) above, 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.
- D. DISMISSAL: No child should be dismissed to anyone not on their approved list! If any problems arise, or if you are unsure, check with the office before a decision is made. Even if they are on the list and you are not familiar with them, they must be IDed.

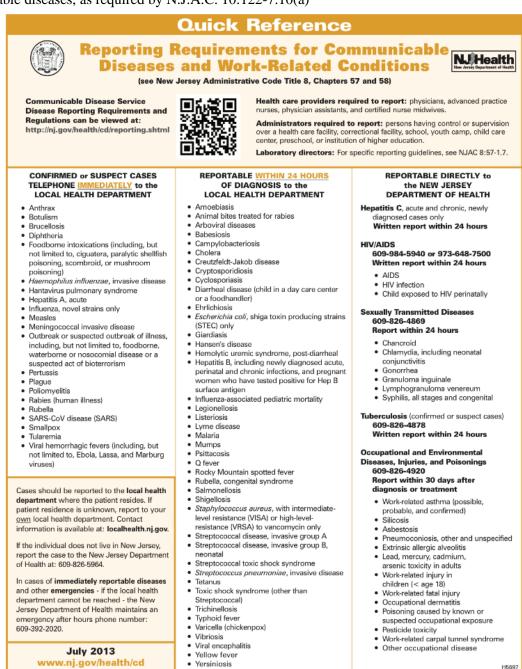
#### **HEALTH REQUIREMENTS**

#### 10:122-7.1 Illnesses/Communicable Diseases

- (a) A center that seeks to serve any children who have any of the illnesses, symptoms of illness or diseases specified in (c) and (d) below shall meet all applicable provisions of this subchapter and all provisions of N.J.A.C. 10:122-8.
- (b) Under no circumstances shall any center serve or admit any child who has any illness, symptom of illness or disease that a physician has determined require the child to be:
  - 1. Confined to home under a physician's immediate care; or
  - 2. Admitted to a hospital for medical care and treatment.
- (c) The following provisions relate to illness and/or symptoms of illness:
  - 1. A center serving well children shall not permit a child who has any of the illnesses or symptoms of illnesses specified in (c) 1i through xv below to be admitted to the center on a given day unless medical diagnosis from a licensed physician, which has been communicated to the center in writing, or verbally with a written follow-up, indicates that the child poses no serious health risk to himself or herself or to other children. Such illnesses or symptoms of illness shall include, but not be limited to, any of the following:
    - i. Severe pain or discomfort;
    - ii. Acute diarrhea, characterized as twice the child's usual frequency of bowel movements with a change to a looser consistency within a period of 24 hours;
    - iii. Two or more episodes of acute vomiting with a period of 24 hours;
    - iv. Elevated oral temperature of 101.5 degrees Fahrenheit or over or axillary temperature of 100.5 degrees Fahrenheit or over, in conjunction w/ behavior changes;
    - v. Sore throat or severe coughing;
    - vi. Yellow eyes or jaundiced skin;
    - vii. Red eyes with discharge;
    - viii. Infected, untreated skin patches;
    - ix. Difficult rapid breathing;
    - x. Skin rashes, excluding diaper rash, lasting more than one day;
    - xi. Weeping or bleeding lesions that have not been treated by a physician or nurse;
    - xii. Swollen joints;
    - xiii. Visibly enlarged lymph nodes;
    - xiv. Stiff neck; or
    - xv. Blood in urine.
  - 2. Once the child is symptom-free, or a licensed physician indicates that the child poses no serious health risk to himself or herself or to other children, the child may return to the center.
  - 3. If a child who has already been admitted to the center manifests any of the illnesses or symptoms of illness specified in (c)1 above, the center shall remove the child from the group of well children to a separate room or area, as specified in N.J.A.C. 10:122-5.2(q)4 until:
    - i. He or she can be taken from the center; or
    - ii. The director or her designee has communicated verbally with the licensed physician, who indicates that the child poses no serious health risk to himself or other children, at which time the child may return to the group.

- (d) The following provisions relate to excludable communicable diseases:
  - 1. The center shall not permit a child or staff member with an excludable communicable disease, as specified in the table below, to be admitted to or remain at the center, until:
    - i. A note from the child's or staff member's licensed physician states that the child or staff member, respectively, has been diagnosed and presents no risk to himself, herself, or to others; or
    - ii. The center has contacted the State Department of Health's Communicable Disease Program or local health department pediatric health consultants and is told the child or staff member poses no health risks to others.

\*Reportable diseases, as required by N.J.A.C. 10:122-7.10(a)



If your child is exposed to any communicable disease at school, you will be notified in writing.

#### PREVENTION and MANAGEMENT of ILLNESS and ACCIDENTS

5A 802

For the health and safety of all children, we ask that you follow Kangaroo Kids' health policies for immunization, reporting of communicable diseases, and prevention and management of illness.

#### **Immunization of Children**

All parents should make certain that their child is immunized according to the schedule recommended by the NJ Department of Health to protect against polio, measles, mumps, rubella (German Measles), whooping cough (pertussis), diphtheria, tetanus, and Haemophilus (HIB) infections. Kangaroo Kids supports the Department's recommendation for Hepatitis B (HBV) immunization of infants. Without the required immunizations, these childhood illnesses can cripple or kill. If your child's immunizations are not completed following the recommended schedule, Kangaroo Kids may exclude your child for the protection of the other children until such immunizations are current. If a vaccine-preventable disease to which children are susceptible occurs in the program parents with a underimmunized child will be called promptly to take their child home. Children entering Kindergarten must meet state requirements, which relate to hepatitis B vaccination. Please ask office for advisory letter from the Department of Health or check with your physician. Immunization records must be updated as new immunizations deadlines occur and annually in September.

Is your child fully protected? Ask the office for an **Immunization Schedule Table**. Contact your childcare health provider to ensure your child's vaccines are current.

#### **Management of Illness/Accident**

- 1. Kangaroo Kids' policy for the care of ill children is based on insuring that facilities and staff available can meet the needs of all children in the group. Children will be excluded if:
  - a. the child's illness prevents the child from participating in routine activities.
  - b. the illness requires more care than the staff is able to provide without compromising the needs of the other children in the group;
  - c. keeping the child in care poses as increased risk to the child or other children or adults with whom the child comes into contact.
- 2. Do not bring your child to the center if he or she is **not well enough to participate in a normal day's activities or is exposed** to a contagious disease, develops **symptoms** of a contagious disease or is **diagnosed** by a physician as having a contagious disease.
- 3. Apply the <u>Guidelines for the Management of Illnesses</u> (below) in determining when your child should attend school.
- 4. Should your child become sick during the day, you will be notified as soon as possible. Upon notification, parents are required to promptly pick up their child from the center. You child will be kept as comfortable as possible with a familiar person in an area that reduces the exposure to new individuals until you arrive. In case of illness or injury to a child, where parents are not available, a person on your emergency list will be notified.
- 5. In the event of a serious illness or injury, at the discretion of the Director or her designee, paramedics will be called and your child will be transported to an emergency medical facility.
- 6. For minor injuries, like a scrapped knee, you will receive an **Incident and Injury Report** in your child's cubbie at the end of the day.

#### **Required Reporting**

- 1. For the protection of all children and staff, we ask that you notify the center within 24 hours after your child has developed a known or suspected communicable disease, or if any member of the child's immediate household has a communicable disease. If your child has a disease requiring exclusion, we ask that you inform the Center Director of the diagnosis.
- 2. If we become aware of a communicable disease affecting children in the center, a health alert will be posted. We will attempt to indicate the earliest symptoms so that additional exposures can be avoided.

#### **Guidelines for the Management of Illnesses**

Please keep your child at home if he/she develops any of these symptoms of contagious disease **until symptoms disappear or your physician decides your child can return to the center:** 

- Diarrhea (more than one loose stool or increased number of stools)
- Severe coughing
- Difficult or rapid breathing (especially in infants under 6 months)
- Yellowish skin or eyes (may be signs of Hepatitis)
- Tearing eyes, redness of eyelids, with discharge (pink eye)
- Mouth sores with drooling

Also, please keep your child home if your child has:

- **Fever of 101.5°F or above**, oral thermometer; 100.5° F or above, axillary);
- Unusual spots or rashes
- Sore throat or trouble swallowing
- Infected skin patches
- Tea-colored urine
- Unusually cranky, less active behavior
- Headache and stiff neck
- Vomiting
- Severe itching of body or scalp
- Loss of appetite
- Grey or white stool

#### STANDARD QUARANTINE GUIDELINES for TYPICAL CONTAGIOUS DISEASES

ILLNESS KEEP YOUR CHILD AT HOME:

DIARRHEAL DISEASES Until child no longer has diarrhea, or physician/Health

(Salmonella, Shigella, Giardia, Department says it is safe.

Campylobacter)

BACTERIAL MENINGITIS Until Health Department indicates it is safe.

CHICKEN POX For one week after rash begins or chicken pox are scabbed.

DIPTHERIA Until your physician tells you it is safe.

HEPATITIS A Until one week after the illness begins.

IMPETIGO Until 24 hours after treatment was begun.

INFESTATION (Head Lice or Until 24 hours after treatment was begun.

Scabies)

MEASLES For 5 days after rash appears.

RUBELLA (German Measles) For 7 days after rash appears.

MUMPS Until swelling is gone or 9 days after swelling begins.

PERTUSSIS (Whooping Cough) For 3 weeks after intense coughing begins or 5 days after

antibiotic treatment begins, or until physician states it is

non-infectious.

CONJUNCTIVITIS (Pink Eye) Until examined by a physician who states it is non-

infectious.

HAEMOPHILUS If <u>not</u> due to H-flu, until physician tells you it's safe.

INFLUENZAE TYPE B If due to H-flu, until the Health Department indicates it is safe.

(HIB, Pneumonia, Meningitis, Epiglottis, Arthritis, Cellulitis)

STREP THROAT Until 24 hours after antibiotic treatment is begun.

PINWORM and RINGWORM Until 24 hours after treatment is begun.

TUBERCULOSIS (TB)

Until after treatment is begun, fever gone and health

official states in writing person is non-infectious.

#### Sources:

1. U.S. Department of Health and Human Services. Public Health Service, Centers for Disease Control.

 Report of the Committee on Infectious Diseases, 1991, Division of Child and Adolescent Health, American Academy of Pediatrics.

3. American Academy of Pediatrics/U.S. Department of Health & Human Services, et al. *Healthy Young Children: A Manual For Programs*, National Association for the Education of Young Children, 1991.

4. Model Child Care Health Policies, ECELS, Pennsylvania Chapter, American Academy of Pediatrics, 1993.

#### **HEALTH and HYGIENE GUIDELINES**

Kangaroo Kids implements the national health and safety standards and embeds practices into daily routines.

#### **Soiled Clothing**

The Centers for Disease Control of the United States Public Health Service require that clothing or cloth diapers soiled with bodily fluids (stool, urine, blood, vomit) be placed, *unrinsed*, *in a sealed plastic bag*, labeled with the child's name, to be picked up by the parent or guardian at the end of the day. Kangaroo Kids follows these recommended precautionary guidelines for the safety of the children and staff.

#### **Allergies**

If your child has allergies, please discuss this with the Center Director and your child's caregiver and give written information to the office. We will make every effort to accommodate your child's special needs.

#### **Peanut Allergies**

Kangaroo Kids is a peanut free school. Some students have a life threatening allergic reactions from coming in contact with any peanut products. To ensure a safe learning environment for all children we ask that you not bring any foods that contain nuts or nut products to school.

#### **Nutrition/Snacks**

There is a documented need to limit children's sugar intake to prevent obesity, avoid dental cavities and insure adequate intake of nutritious foods. The policy of Kangaroo Kids is to limit high fat and high sugar foods. We serve a variety of nutritious snacks and suggest that, when observing special occasions, these guidelines be followed. Peanut butter will not be given to any child. While acknowledging that parents are the ones primarily responsible for the food eaten by their children, as a childcare facility we will support these healthy food policies as we take on part of this responsibility for the children in our care. The snacks we provide will be crackers, fruits, or healthy snacks. All fruit that is provided and/or brought in from home are thoroughly washed before serving. Any foods that are expired or have noticeably gone bad are discarded. Staff prepping and providing meals are required to wash their hands prior to putting gloves on to handle food products. Staff are required to change gloves for specific allergy cases. Kangaroo Kids refers to the USDA guidelines when providing food to children and has copies of the guidelines in the office for parental use.

#### **Smoke-Free Environment**

Kangaroo Kids maintains a smoke-free environment. We ask that you do not smoke in the center or its grounds or in view of the children, as you drop off or pick up your child.

#### Medication

It is extremely helpful when you can administer medication before or after center hours. There may be times, however, when your child needs medication during the day. Kangaroo Kids staff will administer medication prescribed by your child's health care provider if you have completed a CHILD MEDICATION AUTHORIZATION AND LOG for both prescribed and over-the-counter medications.

Only designated staff may administer medication. **Give all medication to the Office.** It will be stored in a locked cabinet and administered properly. Do not send medication in your child's bag or coat pocket.

**For prescribed medications,** give the Director or designated person-in-charge *the* medication in the original child-resistant container, labeled by a pharmacist with your child's first and last name, date prescription was filled, name of the health care provider who wrote the prescription, medication's name, expiration date, administration, storage & disposal instructions.

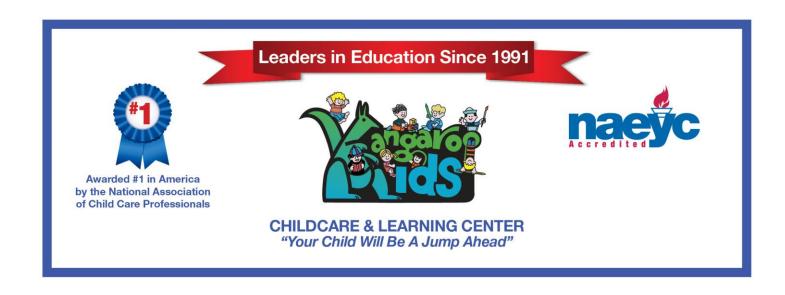
For over-the-counter medications, provide the Office or designated person-in-charge, with a note from your child's health care provider recommending the medication, indicating the dosage, frequency, method of use, and administration duration. The medication should be in a child-resistant container, with the child's first and last names, displaying instructions for administration and storage supplied by the manufacturer, and the expiration date. Be sure to check with the Director on additional local health department requirements. Kangaroo Kids logs each instance of medication administration, as well as any adverse reactions, spills or refusals to take.

#### Sunscreen

Please apply the first round of sunscreen on your child before he/she comes to school. We will re-apply after nap,
Page 19 of 38

the container.		

with your written permission. Please send in a bottle of the lotion you would like us to use with your child's name on



#### **Choking Hazard Foods**

Some foods can cause choking. Keep foods such as grapes, hot dogs, raw carrots, or peanuts away from babies and young children. Cut food for babies and young children into pieces no larger than one-half inch. Encourage children to chew food well. Supervise meal times. Insist that children sit down while eating. Children should never run, walk, play, or lie down with food in their mouths. Be aware of older children's actions. Many choking incidents are caused when an older child gives a dangerous toy or food to a younger child.

The following foods are NOT recommended for young children. Hopefully this information will be helpful to you in planning your child's lunch and snacks:

Frankfurters Popcorn
Chunks of Meat or Cheese Marshmallows

**Chips** Pretzels

Raw Celery
Nuts & Seeds
Raisins
Large pieces of fruit
Raw carrots
Peanut butter

Whole grapes Round or Hard Candy

Cherries with pits Chewing Gum

Some foods can be altered to make them safer for older children, for example:

- 1) Frankfurters, cut lengthwise into strips
- 2) Carrots and celery can be cooked lightly until slightly soft and then cut into small strips
- 3) Grapes and cherries should be cut into small pieces.
- 4) All foods should be cut into pieces no larger than ½ inch for infants and ½ inch for two year olds, according to each child's chewing and swallowing capability.

#### **TOILET TEACHING**

According to a recent study, the average age for learning to use the potty reliably for bowel and bladder is 28 months. It is important to remember that each child is an individual and develops at his own rate, generally you can expect a child to achieve daytime control between the ages of two and three, and nighttime control between three and four and a half.

Toilet teaching is best started around the time the child becomes able to control his elimination. Most children do not have the physical ability to control their bowels before about eighteen months, and they do not achieve bladder control until sometime later. Beginning toilet teaching early simply causes frustration for the caregiver and puts unnecessary pressure on a young toddler. Too-early toilet teaching can actually delay progress rather than encourage it.

A toddler may show some -- but not necessarily all -- of the following signs as he becomes ready for learning: pausing and making sounds or grimaces while having a bowel movement; being regular in bowel movements; staying dry for an hour or two in the daytime; waking up dry from a nap; complaining when wet or soiled; being aware that urine and feces come from his body; telling the caregiver when he has had or is having a bowel movement; generally liking to be clean and tidy; and wanting to imitate adults and be grown up.

Toddlers need to know what caregivers expect of them. You should not push or pressure the child, but do watch for signs of readiness, prepare him/her gradually by teaching about toileting over a period, and communicate very clearly that you have confidence that he/she will learn to use the potty and toilet when he/she is ready.

In the course of your everyday activities, point out when the child is having a bowel movement or is urinating. Teach children that urine and feces come from their body. Teach them the words you want them to use for bathroom functions. Allow them to observe others using the toilet and explain what it is for. Read them a children's book about toilet learning and mention the advantages of staying clean and dry. Let them practice using the potty and praise them for success. Mention that when they are bigger they will start using the potty all the time and will wear underpants "like a big girl/boy."

When a toddler is between the ages of two and three, has shown some signs of readiness, and has had an ample period of preparation, you can expect him to become interested in giving up diapers. Switch from diapers to pants for waking activities if he (1) occasionally asks to have his diaper removed to use the potty; (2) tells you he wants underpants and doesn't want to wear diapers anymore; or (3) has shown clearly that he/she is physically able to control elimination.

Expect a child to have accidents for a while after beginning and be relaxed about them. Express no anger or disapproval; don't scold, shame, or punish the child. Clean up calmly, and reassure them that "next time they'll remember to use the potty." During the day, give gentle reminders to use the potty to help them be successful.

Regressions to wetting and/or soiling are common in toddlers and are usually a reaction to stress. Look for sources of pressure in the child's life -- separation from a parent, a new baby, starting nursery school, moving, etc., -- and try to ease tension by providing reassurance. Don't punish him/her for the loss of control. Staying patient, understanding, and calm is the best way of dealing with regressions, which usually go away by themselves in a short time.

Staying dry while sleeping usually comes several months after daytime control is established, but some normal children, especially boys, take longer to achieve dry nights. The best way to handle night wetting is to be patient and wait for the child's bladder to mature. Punitive methods are definitely harmful: don't punish or shame a bed wetter. Instead, praise the child for any dry nights he may have; make no comment about wet beds; and express your confidence that he/she will be having more dry nights as he/she grows older.

If a child has not achieved daytime control by three and a half to four or is not making progress in controlling night wetting after age five, it is wise to consult your physician to rule out any physical cause, and then a child psychologist to help the child overcome the difficulties.

Psychologists say that parents whose children learn to use the toilet most easily are calm and patient and show a matter-of-fact attitude toward toilet-teaching. They communicate clearly the behavior expected of the child and anticipate gradual, rather than instant, success. They do not use negative tactics like punishment, scolding, or shaming. They observe the child and try to wait until he/she expresses interest in toilet learning. They encourage and praise the

child for successes and are understanding about failures. They switch from diapers to pants when the child is ready and send a clear message that they have confidence in their child's ability to learn.

Children, who are in the process of becoming toilet trained, are brought to the bathroom, and supervised at one and a half- to two-hour intervals. We try to encourage the children to let a staff member know when they must use the bathroom. It is important we work in partnership, so please share with us terminology, and systems used at home. We also recommend children remain in diapers or training pants until the child remains dry on a consistent basis. If a child soils regular clothes more than twice, we will switch to diapers to insure a sanitary environment and a better success rate for the child. Children are always praised and made to feel good about what they are learning to do.

# KANGAROO KIDS CURRICULUM: THE CREATIVE CURRICULUM Goals and Objectives

SOCIAL/EMOTIONAL DEVELOPMENT	PHYSICAL	COGNITIVE	LANGUAGE
	DEVELOPMENT	DEVELOPMENT	DEVELOPMENT
Sense of Self  1. Shows ability to adjust to new situations  2. Demonstrates appropriate trust in adults  3. Recognizes own feelings and manages them appropriately  4. Stands up for rights  Responsibility for Self and Others  5. Demonstrates self-direction and independence  6. Takes responsibility for own well-being  7. Respects and care for classroom environment and materials  8. Follows classroom routines  9. Follows classroom rules  Prosocial Behavior  10. Plays well with other children  11. Recognizes the feelings of others and responds appropriately  12. Shares and respects the rights of others  13. Uses thinking skills to resolve conflicts	Gross Motor  14. Demonstrates basic locomotor skills (running, jumping, hopping, galloping)  15. Shows balance while moving  16. Climbs up and down  17. Pedals and steers a tricycle (or other wheeled vehicle)  18. Demonstrates throwing, kicking, and catching skills  Fine Motor  19. Controls small muscles in hands  20. Coordinates eye-hand movement  21. Uses tools for writing and drawing	Learning and Problem Solving  22. Observes objects and events with curiosity  23. Approaches problems flexibly  24. Shows persistence in approaching tasks  25. Explores cause and effect  26. Applies knowledge or experience to a new context  Logical Thinking  27. Classifies objects  28. Compares/measures  29. Arranges objects in a series  30. Recognizes patterns and can repeat them  31. Shows awareness of time concepts and sequence  32. Shows awareness of position in space  33. Uses one-to-one correspondence  34. Uses numbers and counting  Representation and Symbolic Thinking  35. Takes on pretend roles and situations  36. Makes believe with objects  37. Makes and interprets representations	28. Hears and discriminates the sounds of language 39. Expresses self using words and expanded sentences 40. Understands and follows oral directions 41. Answers questions 42. Asks questions 43. Actively participates in conversations  Reading and Writing 44. Enjoys and values reading 45. Demonstrates understanding of print concepts 46. Demonstrates knowledge of the alphabet 47. Uses emerging reading skills to make meaning from print 48. Comprehends and interprets meaning from books and other texts 49. Understands the purpose of writing 50. Writes letters and words

#### 2018 - 2019

#### KANGAROO KIDS SCHOOL CALENDAR and EVENTS

DATE	EVENT	PLEASE NOTE:
September 3 September 4 September 6 September 6 September 9 September 18	Labor Day Kangaroo Kids Classes Transition Branchburg Schools First Day of Classes Bridgewater Schools First Day of Classes Rosh Hashanah Yom Kippur	Kangaroo Kids Closed
September 20	Back to School Night at Kangaroo Kids Waddlers, Discovery Preschool, Kindergarten/Pre	o 6:30 PM
October 2 October 3	School Photos School Photos Park to School Night at Kongaraa Kida	Group photo approx. 10:00 AM Group photo approx. 10:00 AM
October 9 October 7 - 13	Back to School Night at Kangaroo Kids Young Explorers, Preschool, Pre-K Fire Prevention Week	6:30 PM Check your smoke detectors!
October 8 October 19 October 26 October 31	Columbus Day In Service Day Fall Festival Halloween Parade	Kangaroo Kids Closed 5:00 PM - 6:30 PM 9:30 AM
November 12 November 22 - 23	Veterans Day <b>Thanksgiving Vacation</b>	Kangaroo Kids Closed
December 7 December 2 – 10	Winter Wonderland Family Event, "Celebrate the Season" Hanukkah	6:30 - 8:00 PM
Dec 24 – Jan 1 December 25 January 1	Winter Break Christmas Day New Years Day	Kangaroo Kids Closed Kangaroo Kids Closed Kangaroo Kids Closed
January 21 January 21 - 25	Martin Luther King Day Muffins for Mom	
February 12 February 14 <b>February 18</b>	Kindergarten Orientation for September 2018 Breakfast to Go <b>Presidents Day</b>	5:30 PM at Kangaroo Kids  Kangaroo Kids Closed
March 2 March 3 March 4 March 11 - 15	School Photos School Photos School Photos Donuts for Dad	Group photo approx 10:00 AM Group photo approx 10:00 AM Group photo approx 10:00 AM
April TBD April 8 – 12 <b>April 19</b>	Scholastic Book Fair Week of the Young Child Good Friday & Passover Begins	Kangaroo Kids Closed
May 7 May 6 - 10 <b>May 27</b>	Teacher Appreciation Day Grandparents Tea <b>Memorial Day</b>	Kangaroo Kids Closed
June 14 June 15	Spring Show - Waddlers, Discovery Preschool Spring Show - Preschool, Pre-K, Kindergarten	Held at Kangaroo Kids Held at Whiton School
July 4	Independence Day Observed	Kangaroo Kids Closed

#### WHAT TO BRING

#### \*\*\* PLEASE LABEL ALL ITEMS WITH YOUR CHILD'S FULL NAME \*\*\*

#### **INFANTS**

Each day, please bring:

- bottles with formula or milk
- food
- 1 complete change of clothing

#### Items to remain in the center:

- 2 portable crib size sheets
- 1 large box of diapers
- baby wipes
- diaper cream
- 1 extra jar of food, if applicable
- 1 complete change of clothing
- 2 bibs
- 1 empty, sterilized bottle
- 1 can of formula
- a thermometer
- photos of family and other people authorized to pick up your child

#### WADDLERS, TODDLERS and PRE-SCHOOLERS

- 1 complete change of clothing
- lunch, if full day schedule (or order Lunch Bunch)
- 1 king size pillow case
- 1 regular crib size sheet (for rest mat)
- 1 small blanket
- seasonal clothes, e.g., winter mittens, bathing suit and water shoes in summer

# TELL US ABOUT YOUR CHILD for INFANTS / WADDLERS / DISCOVERY PRESCHOOL

Chi	hild's Name: Age: Date:	
1.	What is your child's sleep schedule?  Morning wake-up: Naps: Evening bedtime:	
2.	Is your child sleeping through the night? Yes No If not, when does your child usually wake up at night?	
3.	What upsets or frightens your child?	
4.	What does your child find soothing or comfortable?	
5.	How is your child now reacting to strangers?	
6.	Is your child is using: Cup? Bottle? Both	
7.	Are you breast-feeding your child? Yes No	
8.	At what times is your child receiving a bottle each day:	
9.	Your child is taking: Formula Whole Milk Skim Milk Other Are there any special preparation instructions?	
10.	D. Are there any other special instructions concerning bottle feeding your child?	
11.	1. Is your child now eating baby food or table food?	
12.	2. Please list the foods your child is now eating: <u>vegetables</u> <u>fruits</u> <u>meats</u> <u>juices</u> <u>other</u>	
13.	3. Is your child eating finger foods? Yes No If yes, please list:	
14.	4. Where does your child spend his/her waking hours? (Crib, playpen, crawling on floor, etc.)	
15.	5. When does your child usually have bowel movements?	
16.	6. Has your child begun potty training? Yes No If yes, describe his/her routine:	
17.	7. What does your child call his/her bowel movement? Urination?	
18.	B. Does your child have any allergies? If so, please list:	
19.	9. What language do you speak at home? If oth English, please write a few key words relevant to your child in your home language:	er thar
20.	O. Are there any cultural customs you would like to share with us?	
21.	1. Are there any specific developmental concerns you have about your child?	
Par	arent Signature: Date:	
	Please use the back for any other information you wish to share about your child.	

#### TELL US ABOUT YOUR CHILD FOR PRESCHOOL / PREKINDERGARTEN / KINDERGARTEN

Chi	ıld's Name: Date: Date:
1.	Does your child have any allergies or medical issues?
2.	Do you have any special dietary or nutrition needs?
3.	What are your child's favorite activities and things that he/she likes?
4.	Tell us what your child dislikes or what makes him/her feel afraid, e.g., loud noises, costumes, strangers.
5.	What are the best ways to comfort your child when he/she is upset?
6.	What are some of your child's special qualities?
7.	What do you want us to know about your child that will help us better understand him/her as a person?
8.	Are there any particular sleep issues we should know about? (e.g., comforts, schedules, patterns, problems)
9.	Are there special behavior issues or techniques that would help us to better guide your child?
10.	What information is most important for you to know everyday?
	Nap times Diet Curriculum other, please specify:
11.	What language do you speak at home?
	If other than English, please write a few key words that are relevant to your child in your home language:
12.	Are there any cultural customs you would like to share with us?
13.	Are there are any developmental concerns you have regarding your child?
14.	What do you hope your child will gain from being at Kangaroo Kids?
Ad	ditional Comments:
Par	rent Signature.

#### **ACKNOWLEDGMENT of RECEIPT of INFORMATION**

I have received and read the information prepared by Kangaroo Kids Child Care and Learning Center and the Office of Licensing in DCF (Department of Children and Families) Statement of Information to Parents, parent visitation rights, state licensing requirements, expulsion policies, obligations to report abuse and other child care matters as listed in your Parent Manual.

Parent Signature:	Date:			
	TRIP CONSENT FORM mission Slip for Walking Trips			
I give my permission for my child,in supervised walking trips within the cer	, to participate nter's neighborhood.			
Parent Signature:	Date:			
PERMISSION to	PHOTOGRAPH / VIDEOTAPE			
our website, online photo galleries, socia	d video taped from time to time for news articles, displays, al media, and other promotional purposes. This includes public, but does not include children's names.			
A local cable TV company films a family Some topics will include How Children Le	TV show called, "Today's Child," for Kangaroo Kids. earn, Literacy, and Healthy Children.			
In order to use your child's photo or vide a release to film or photograph your child	o we must have your signed permission. The following is d for these purposes:			
	my child's photo or video in news articles, displays, oto galleries, social media including Facebook and comotional purposes.			
	nild's photo or video in classroom or center displays <b>only</b> . video used in Facebook, You Tube, or cable TV.			
[ ] No, I do not want my child photog	raphed or video taped for any purpose.			
Child's Name:	Date:			
Parent Signature:				
CLASS	ROOM DIRECTORIES			
Classroom Directories which include chil numbers are available to help families pl	Idren's names, parents' names, addresses and phone lan for birthday parties and play dates.			
[ ] Please include our family's inform	nation in this year's classroom directory			
[ ] Please do NOT include our family	s's information in this year's classroom directory			
Parent's Signature	Date:			

# I agree to abide by the rules and regulations of Kangaroo Kids Child Care as outlined below and in the booklet which I have received. I also agree that failure to comply with these rules and regulations will result in dismissal of my child from Kangaroo Kids Child Care. Parent Signature: Date:

PARENT AGREEMENT FORM

#### SIGN-IN / SIGN-OUT:

All children must be signed in and out on the computer located in the entrance area. Please inform all persons who bring or pick-up your child of this procedure.

#### **PAYMENT POLICIES:**

Tuition is due on the first day of each month. If tuition is not paid by the 10th of the month there is a \$25.00 late charge. A child may not attend after the 20th of the month with an unpaid tuition. The same amount is due the first of each month, regardless of the number of days the school was in session. Some months will contain 20 or more school days. This provides allowances for unforeseen emergency closings, holidays, snow days, etc.

No deduction may be made for absences, vacations, or illness. Our budget is based on a certain number of students and our classes are limited in size. Each child enrolled has a reserved space, which cannot be filled by another student. School expenses continue regardless of whether or not your child attends every day. Your Security Deposit is not refundable nor is it applicable towards another month or program, other than the last month of attendance.

There will be a \$25.00 fee charged for all returned checks.

There is a Late Pick-up charge of \$10.00 for each 10 minutes past the school closing time.

Please do not permit your child to bring extra toys to school. We have more than enough playthings and we cannot be responsible for lost toys.

#### SCHOOL CLOSINGS

Included in this information is a school calendar listing holidays and school closings for the entire school year.

If schools are closed due to inclement weather, a message will be on our telephone answering machine: (908) 231-7800.

In the event of early dismissal, we close for the P.M. sessions.

For most delayed openings, we will have a two-hour delay.

#### **BITING POLICY**

Biting is not acceptable behavior. If your child should bite, you will be notified in writing. We will work with the family to try to alleviate this situation. There will be three warnings and if the biting persists, the child may be dismissed.

#### ASQ-3/SE-2 Parental Consent Form

The ASQ-3/SE-2 is a screening questionnaire that is surrounded around children's personal development and social-emotional development. Screenings provide a quick glance at how children are doing in important areas, such as: social-emotional, communication, fine-motor, gross-motor, personal-social, and problem solving skills. The purpose of this screening is to identify your child's strengths, as well as any areas that your child might need additional support.

As the child's parent/guardian, you are the greatest source of information regarding your child. The ASQ-3 is designed to be filled out completely by you in a short questionnaire. Here's how it works:

-You will answer each question with a "yes", "sometimes", or "not yet" based on what your child's current abilities.

#### The ASQ-SE-2 format is a bit different:

-You will answer each question with a "z" (all/most of the time), "v" (sometimes), or "x" (none of the time).

After completing the questionnaires, please return them to your child's lead teacher, in which they will be graded and the results will be shared directly with you via parent/teacher conference.

You are an active partner in your child's learning and development. By completing the ASQ-3 questionnaire, you are making sure your child is off to the best possible start!

[ ] Yes, you may screen my child using the ASQ-3.					
[ ] No, I prefer that you do not screen my child at this time.					
Name of Child:	Name of Child:				
Child's Classroom:					
Print Mother's Name:	Print Father's Name:				
Mother's Signature:	Father's Signature:				
Date:	Date:				

#### **PARENT VOLUNTEER and HELP FORM**

Class: Phone:						
l w	ould like to help in the area(s) I've checked below:					
. (	Classroom visitor  I could "show and tell" about my job, hobby or special area of interest:					
[	I could read with children. Best day of week: Time:					
[	I could help with computer. Best day of week: Time:					
2. <b>i</b> [ [	Fund Raising: Book Sale Drive for families in need. Other:					
i. <b>[</b> [ [	Equipment and Maintenance: Repairs Spring Playground cleanup Set up and take down major events					
. <b>I</b>	Field Trips:  Chaperone					
5. <b>§</b> [	Special Events:  Baking Holiday Events Grandparents Tea  Community Service Leadership					
i. [	Classroom mother - (Enlist and coordinate helpers for special events, parties, trips.)					
'. [	. Lunchtime helper (Supervise children during lunch and rest during staff workshops)					
3. [	Monthly Newsletters or Special Notices					
ļ	Special Talents and Interests  Mom's Place of Employment:					
	Hobbies					
	Places you have visited:					
	Languages you speak					
	Ethic background (optional). This is to guide us on special ethnic projects or studies:					



## CHILD CARE & LEARNING CENTER "You'll be a jump ahead"

New Jersey Department of Health and Senior Services STANDARD SCHOOL / CHILD CARE CENTER IMMUNIZATION RECORD

							I
NAME OF CHILD (Last, First, MI)					DATE OF BIRTH	(Mo./Day/Yr.)	SEX
NAME OF PARENT/GUARDIAN				TELEPHONE NU	MBER(S)		
ADDRESS							
ADDRESS					IMMUNIZATION REGISTRY NUMBER		
VACCINE TYPE	1ST DOSE MO/DAY/YR	2ND DOSE MO/DAY/YR	3RD DOSE MO/DAY/YR	4TH DOSE MO/DAY/YR	5TH DOSE MO/DAY/YR		REENING equired)
DIPHTHERIA, TETANUS, PERTUSSIS (DTaP) or any combination						TEST DATE	RESULT
(if Td or DT <sup>(1)</sup> Indicate in corner box)							
POLIO-INACTIVATED POLIO VACCINE (IPV)							
(if oral vaccine, indicate OPV in corner box)							
MEASLES, MUMPS, RUBELLA (MMR)					(5) Document be	low single antigen	vaccine receipt,
HAEMOPHILUS B (HIB) (2)					serology titers, or Varicella disease histor		ease history
HEPATITIS B (3)					Hepatitis B	DATE:	TITER:
VARICELLA (4)					Varicella	DATE:	TITER:
PNEUMOCOCCAL CONJUGATE (2)					Measles	DATE:	TITER:
INFLUENZA (6)					Mumps DATE: TITER:		TITER:
OTHER, SPECIFY:					Rubella	DATE:	TITER:
☐ Provisional Admission Attached	- Date Granted:		☐ Medical E	Exemption Attached	□ Religious E	xemption Attached	i
(1) REQUIRES MEDICAL EXEMPTION (2) REQUIRED FOR CHILD CARE/PRESCHOOL ENROLLEES (2 Months - 5th Birthday Only) (3) REQUIRED FOR K-GRADE 1 (whichever is first). GRADE 6 BEGINNING 9-1-01, AND GRADES 9-12, EFFECTIVE 9-1-04 (4) REQUIRED FOR DAY/CHILD CARE ENROLLED (19 Months and older) AND GRADE K-GRADE 1 (whichever is first) EFFECTIVE 9-1-04 IMM-8 OCT 08 (6) MMR single antigen receipt requires MO/DAY/YR, serologies require titers, and varicella disease history requires MO/YR. (6) REQUIRED FOR CHILD CARE/PRESCHOOL ENROLLEES (6 Months - 59 Months)							
Physician's Signature: _				Da	ite:		

Fax to Kangaroo Kids at 908-231-9847

Physician's Name (Please Print): \_\_\_\_\_

Mail original to:
Kangaroo Kids Child Care and Learning Center
1047 Route 28
Branchburg, NJ 08876

If you need additional information, please call Kangaroo Kids at 908-231-7800

#### Instructions for Completing the Universal Child Health Record (CH-14)

#### Section 1 - Parent

Please have the parent/guardian complete the top section and sign the consent for the child care provider/school nurse to discuss any information on this form with the health care provider.

The WIC box needs to be checked only if this form is being sent to the WIC office. WIC is a supplemental nutrition program for Women, Infants and Children that provides nutritious foods, nutrition counseling, health care referrals and breast feeding support to income eligible families. For more information about WIC in your area call 1-800-328-3838.

#### Section 2 - Health Care Provider

- 1. Please enter the date of the physical exam that is being used to complete the form. Note significant abnormalities especially if the child needs treatment for that abnormality (e.g. creams for eczema; asthma medications for wheezing etc.)
  - Weight Please note pounds vs. kilograms. If the form is being used for WIC, the weight must have been taken within the last 30 days.
  - Height Please note inches vs. centimeters. If the form is being used for WIC, the height must have been taken within the last 30 days.
  - Head Circumference Only enter if the child is less than 2 years.
  - Blood Pressure Only enter if the child is 3 years or older.
- 2. Immunization A copy of an immunization record may be copied and attached. If you need a blank form on which to enter the immunization dates, you can request a supply of Personal Immunization Record (IMM-9) cards from the New Jersey Department of Health and Senior Services, Immunization Program at 609-588-7512.
  - The Immunization record must be attached for the form to be valid.
  - "Date next immunization is due" is optional but helps child care providers to assure that children in their care are up-to-date with immunizations.
- 3. Medical Conditions Please list any ongoing medical conditions that might impact the child's health and well being in the child care setting.
  - a. If the child has a complex medical condition, a special care plan should be completed and attached. Note any significant medical conditions or major surgical history.
  - b. **Medications** List any ongoing medications. Include any medications given at home if they might impact the child's health while in child care. (seizure, cardiac or asthma medications etc.) Short-term medications such as antibiotics do not need to be listed on this form. Long-term antibiotics such as antibiotics for urinary tract infections or sickle cell prophylaxis should be included.
    - PRN Medications are medications given only as needed and should have guidelines as to specific factors that should trigger medication administration. Please be specific about what over-the-counter (OTC) medications you recommend, and include information for the parent and child care provider as to dosage, route, frequency, and possible side effects. Many child care providers may likely require separate permissions slips for prescription and OTC medications.
  - c. Limitations to physical activity Please be as specific as possible and include dates of limitation as appropriate. Any limitation to field trips should be noted. Note any special considerations such as avoiding sun exposure or exposure to allergens. Potential severe reaction to insect stings should be noted. Special considerations such as back-only sleeping for infants should be noted.
  - d. Special Equipment Enter if the child wears glasses, orthodontic devices, orthotics, or other special equipment. Children with complex equipment needs should have a care plan.
  - e. Allergies/Sensitivities Children with life-threatening aflergies should have a special care plan. Severe allergic reactions to animals or foods (wheezing etc.) should be noted. Pediatric asthma action plans can be obtained from The Pediatric Asthma Coalition of New Jersey at www.pacnj.org or by phone at 908-687-9340.
  - f. Special Diets Any special diet and/or supplements that are medically indicated should be included. Exclusive breastfeeding should be noted.
  - g. Behavioral/Mental Health issues Please note any significant behavioral problems or mental health diagnoses such as autism, breath holding, or ADHD.
  - h. Emergency Plans May require a special care plan if interventions are complex. Be specific about signs and symptoms to watch for. Use simple language and avoid the use of complex medical terms.
- 4. Screening This section is required for school, WIC, Head Start and some other programs. This section may be optional for routine child care settings but can provide valuable data for public heath personnel to track children's health. Please enter the date that the test was performed. Note if the test was abnormal or place an "N" if it was normal.
  - For lead screening state if the blood sample was capillary or venous.
  - For PPD enter millimeters of induration, and the date listed should be the date read. If a chest x-ray was done, record results.
  - Scoliosis screenings are done biennially in the public schools beginning at age 10.
- 5. Please sign and date the form with the date the form was completed (note the date of the exam, if different)
  - Print the health care provider's name.
  - Stamp with health care site's name, address and phone number.

#### UNIVERSAL **CHILD HEALTH RECORD**

Endorsed by: American Academy of Pediatrics, New Jersey Chapter New Jersey Academy of Family Physicians New Jersey Department of Health and Senior Services

	SECTION I - TO BE COMPLETED BY PARENT(S)								
Child's Name (Last) (First)				Gender Date of Birth					
		-34.0		N	//ale 🔲 Fe	male		1	1
Does Child Have Health Insura	nce? If Yes	s, Name o	of Child's Hea	lth Insuranc	e Carrier		V		
□Yes □No	STORY TO SHAPE STANDARD CONTRACTOR CONTRACTO								
			Home Telepl	ome Telephone Number   Work Telephone/Cell Phone Number				ell Phone Number	
as nasconnected to unbacterostatele-backfill-files			decidences is place parameters. Security Securit						
Parent/Guardian Name			Home Telephone Number Work Telephone/Cell Phone			ell Phone Number			
Te institutionalism in contrastivity destruction and administration of the contrastivity of t			encreananter et annouve						
Laive my consent for my chil	ld's Health Care	Provider	and Child Car	re Provider/S	School Nurse	to disc	uss the i	nforma	tion on this form
I give my consent for my child's Health Care Provider and Child Care Provider/School Nurse to discuss the information on this form.  Signature/Date  This form may be released to WIC.									
Signature/Date				Yes No					
	SECTION II -	TO BE C	OMDI ETED	DVUENI	TU CARE DE		-		
100 C	SECTION II -	TO BE C		Chi W W W	W 780	100.0			
Date of Physical Examination:			Results	of physical ex	kamination no		27-220	Yes	□No
Abnormalities Noted:					Weight(mus				
				within 30 days for W.			30.90		
				Height (must be taken within 30 days for WIC)					
					Head Circu	•			
				(if <2 Years)					
						Blood Pressure			
			allester D	A.L	(if <u>&gt;</u> 3 Years)	)			
IMMUNIZATIONS	S		Immunization Record Attached Date Next Immunization Due:						
Chronic Medical Conditions/Relat	tod Surgariae		MEDICAL CO	Comments					
List medical conditions/ongo			☐None C ☐Special Care Plan Attached						
concerns:	99								
Medications/Treatments		□ None □ C □ Special Care Plan Attached		Comments					
List medications/treatments:									
I in itations to Discourse I Askink.				Comments					
Limitations to Physical Activity  List limitations/special considerations:		Special Care Plan Attached		XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX					
				Comments					
Special Equipment Needs		□None □Special Care Plan		Comments					
List items necessary for daily	/ activities	Attached							
Allergies/Sensitivities		□None		Comments					
List allergies:		Special Care Plan							
	200	Attac None	Attached		Comments				
Special Diet/Vitamin & Mineral Su	upplements	Special Care Plan		Johnnoits					
List dietary specifications:		Attac	Attached						
Behavioral Issues/Mental Health Diagnosis		None	The second secon						
List behavioral/mental health issues/concerns:		☐Special Care Plan Attached							
Emergency Plans		20 2000000	□None C						
List emergency plan that mig			al Care Plan						
and the sign/symptoms to w	atch for:	Attac	(7.90.30.00)	THEODE	NINGO				
Type Sereening	Date Perform	1000	NTIVE HEAL Record Value	1	Photos to	D-	te Perfor	med	Note if Abnormal
Type Screening Hgb/Hct	Date remotifi	eu r	ecoru value	Hearing	e Screening	Da	re Lelioi	meu	NOTE II ADITOTIIIAI
Lead: Capillary Venous	-			Vision	!				
TB (mm of Induration)				Dental					
Other:	<u> </u>			Develop	omental				
Other:				Scoliosi					
Name of Health Care Provider (P	rint)		T	SUCCESSION CO.	o Provider Stamı	p:			
St. i Saidi Said i Tovidoi (i									
Signature/Date									
oignaturo Dato									
CULTA INVICE TO THE		110 =		D		ш -			
CH-14 JAN 06 Distrib	oution: Original-C	niid Care P	rovider Copy-	-⊬arent/Guard	ian Copy-He	ealth Car	e Provide	7.	

Page 35 of 38

# Awarded #1 in America by the National Association of Child Care Professionals CHILDCARE & LEARNING CENTER

#### PERMISSION to GIVE MEDICATION in CHILD CARE

"Your Child Will Be A Jump Ahead"

(Please complete a separate form for each medication)

Child's Name: \_\_\_\_\_ Birth Date: \_\_\_\_\_

Allergies (food, medication): \_\_\_\_\_\_ Weight: \_\_\_\_\_

Medication: \_\_\_\_\_ Purpose: \_\_\_\_\_

Section I – to be completed by child's health care provider

Dosage:	Route:				
Time(s) to be Administered:					
Special Instructions:					
Possible side effects:					
Start Date:	End Date:				
Signature of Health Care Provider:					
Phone: ( )	Date:				
Section 2 – to be completed by the parent or guardia	an				
I give permission for my child,					
Amount of Medication provided to Childcare:					
Signature of Parent/Guardian:	Date:				
Amount of Unused/Expired Medication Returned to Parent/Gu	uardian, or Disposed Of:				
Date Medication Returned or Disposed Of:					
Signature of Parent/Guardian:					





Dear Parents,

Seal:

In order to comply with State Regulations this form must be completed, signed, and notarized. Please return the completed form to the office. Thank You.

AFFIDAVIT					
In case of an emergency, I authorize the Kangaroo Kids C to secure emergency medical treatment for my child, by a licensed physician at a licensed medical facility. I ag Learning Center will bear no responsibility for treatment or	ree that Kangaroo Kids Child Care and				
Authorized Physician:	Phone:				
Insurance Company: Po	licy Number:				
Please list all allergies or special requests:					
I authorize any staff member assigned to the care and eduprofessionals to have access to my child's health informat additional individuals besides parents and people stated at to health information about my child. (Include family membave access to your child's health records).	tion. Please list the names of any above who are authorized to have access				
In an emergency, I agree to have medical information rele Parent/Guardian Signature:	Date:				

# Kangaroo Kids Child Care & Learning Center ENROLLMENT APPLICATION 2018 - 2019

CHILD'S	NAME:		D.O.B.:	Sex:			
	Address:			<del></del>			
	City:						
H	Home Phone: ( )		Cell Phone Carrier:	Cell Phone Carrier:			
MOTHER	R'S NAME:						
N	Name of Workplace:		Occupation:				
V	Vork Address:						
			Email:				
V	Vork Phone:						
FATHER	'S NAME:						
١	Name of Workplace:		Occupation:				
٧	Vork Address:		Cell: ( )				
			Email:				
V	Vork Phone:						
DOCTOR	R'S NAME:		Phone: ( )				
	lealth Insurance:						
		(Carrier Name)					
	ENCY CONTACTS: Persons authorized to pick up :	and/or to contact in case o	of emergency if parent/guardian is not ava	ailable)			
·	):			ŕ			
	ess:		Relationship: cell work hom				
			, ,	(please circle)			
	D:		Relationship:				
Addre	ess:		Phone: ( ) cell work hom (please circle)				
	ORD:		Allergies:	<u> </u>			
			to be used as identification, should you				
			one not on the authorized list will be pick	ing up.)			
PROGRA	AM SELECTION: (Circle you	r options in the columns	below)				
	PROGRAM	AGES	SCHEDULE	DAYS			
	Young Explorers	6 weeks – 18 months	Half (6:30-12) or Half (1-6) or Extended (6:30-6)	D.A.			
	Waddlers	18 months – 2.5 years	AM (9-11:30) Pre-K AM (9–12:30)	_ M			
	Discovery Preschool	2.5 - 3 years	Half (6:30-12)	T			
	Preschool	3 years as of 10/1	Half (1-6)	W			
	PreKindergarten	4 years as of 10/1	Full (9-3)	Th			
	Kindergarten	5-6 years	Extended (6:30-6)	F			
	Before/After School Care	5-10 years	< 3.5 Hours or > 3.5 Hours				
CTART F	ATE.	-					
SIARIL	DATE:						
			Deposit are required with each enro				
	• •		e one month prior to withdrawal from pro	ogram.)			
	on is due on the first of eac ARENT SIGNATURE:		Date:				
r	ANERI GIGHAI GIVE.		Date.				
	1047 Route 28 Branchburg	g, NJ 08876 • (908) 2	31-7800 • www.kangarookidschildca	are.com			