



CORNERSTONE
LEARNING ACADEMY

Enrollment Packet

Welcome to the Cornerstone Learning Academy! To provide you and your family with the best services, we need the following information at enrollment:

- Enrollment form with copies of photo ID (i.e. driver’s license, passport, state id, etc.)
- Items need for Enrollment
- Medical Information
- Emergency Medical Treatment Authorization
- Parent/Guardian Authorizations
- Transportation Authorization
- Discipline Policy
- Physical Activity Policy
- Nutrition Policy
- General Record and Statement of Child’s Health (DSS form 2900) (https://dss.sc.gov/content/library/forms_brochures/files/2900.pdf)
- Current Immunization Record (**must be** on SC DHEC form)*
- \$50 Non-refundable registration fee

**The SC DHEC immunization form will look like this:*

SOUTH CAROLINA CERTIFICATE OF IMMUNIZATION
 SC Law: 194-29-100/NC Code of Regulation 61-53
 Certificate must be completed according to form instructions by a Licensed Practitioner of Medicine, Surgery, or
 a Veterinary or by another authorized registered individual.

CERTIFICATION STATUS
 Check all that apply: **ONE box**

Day Care Licensing Expires: _____ <small>Child must be immunized prior to entry and submit to DHEC. Child's records may affect day care or school for the entire time a child is in day care.</small>	Day Care Requirements as of date of entry <input type="checkbox"/> Meet SC Day Care Requirements <small>(Must visit to a health center)</small>	School Requirements as of date of entry <input type="checkbox"/> Meet SC Day Care Requirements <input type="checkbox"/> Meet SC School Requirements <small>(Must visit to a health center)</small>	Medical Exemption <input type="checkbox"/> Medical Exemption Section 2 letter) <small>Child's records may affect day care or school for the entire time a child is in day care.</small>
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1 Name: JOHN TLOTT Date of Birth: 03/2000 NCV: 4440032610

Vaccination Date

Vaccine	Date	Dose
Hep-B		
DTaP-1		
DTaP-2		
DTaP-3		
MM		
MM2		
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MEDICAL EXEMPTION (This form is required for day care, school, and the public health service with a child, as of the date required by law to be immunized (with each dose) or fully vaccinated with routine immunizations (e.g., 24 months of age).)

3

Items Needed for Enrollment Cornerstone Learning Academy

Infants-(6 weeks-1 year)

- ✓ Diapers
 - ✓ Bottles
 - ✓ Weather appropriate change of clothes
- Wipes and Baby food is supplied

Please bring enough to leave at the Center so that we do not run out; no need to bring and leave a diaper bag.

Toddlers-(1 year-3 years)

- ✓ Diapers/Pull-ups
- ✓ Wipes
- ✓ (3) pair underpants (2 years and up)
- ✓ A fitted crib sheet for your child's Kindermat.* (Kindermats are provided by the Center)
- ✓ A *small* blanket for nap/rest time*
- ✓ Weather appropriate change of clothes (2 sets)

Preschool-(3 year-5 years)

- ✓ A fitted crib sheet for your child's Kindermat.* (Kindermats are provided by the Center)
- ✓ A *small* blanket for nap/rest time*
- ✓ Weather appropriate change of clothes

Summer Camp-(5 Years & Up)

- ✓ Change of clothes
- ✓ Old t-shirt for Art
- ✓ Closed toe shoes
- ✓ Summer Camp t-shirt must be worn on Field Trips as required
- ✓ Sunscreen for outside play

Please **DO NOT** bring:

- ⊗ Games of any kind (electronic, board, cards, etc.)
- ⊗ Radios, MP3 players, headphones, iPods, etc.
- ⊗ Cell phones
- ⊗ Toys
- ⊗ Make-up, nail polish, etc.



Please label each item you send in with your child's name!

* These will be sent home at the end of the week to be laundered. Please return them by the following Monday.

Enrollment Form

Program: (circle one) Infant (6wks-12mos) Toddler (12-30mos) Early Preschool (2.5-3yrs) 3K*(3-4yrs) 4K*(4-5yrs)
After School* (3-14yrs) Summer Camp* (5-14yrs)

**Must be completely potty trained for these programs.*

CHILD'S INFORMATION

Enrollment Date: _____

Name of Child _____ Date of Birth _____
(First, Middle, Last)

Nickname/Name Called _____ Home Phone _____

Home Address _____ Zip Code _____

FAMILY INFORMATION

Mother (Guardian) Name _____ Home # _____

Address _____ Zip Code _____

Place of Employment _____ Work # _____

Email Address _____ Mobile # _____

Father (Guardian) Name _____ Home # _____

Address _____ Zip Code _____

Place of Employment _____ Work # _____

Email Address _____ Mobile # _____

****Family Code Word** _____

PICK -UP AUTHORIZATIONS

No child will be released to anyone not known to the Center without prior authorization from a parent or guardian. These people will need to know your family code word and must show photo ID in order to pick up your child.

Name _____ Address _____ Phone _____

Name _____ Address _____ Phone _____

Is there anyone who has a legal restraining order prohibiting or limiting contact with your child? If **yes**, please list his/her name and attach the required documentation. Name _____

Relationship to Child _____ Are there custody arrangements we need to be aware of? _____

To register, please return this completed form along with a \$50 registration fee per child to: Cornerstone Learning Academy
700 S. Converse Street, Spartanburg SC 29306

The registration fee is non-refundable. When your registration form and fee are received, you will be contacted regarding the availability of space and start date. **Please note, submission of this form does not guarantee enrollment.**

Parent (Guardian) Signature _____ Date _____

Print Name _____

Medical Information

Child's Name: _____

Father's/Guardian's Name: _____

Home Address: _____

Mother's/Guardian's Name: _____

Home Address: _____

Important Phone Numbers:

Father/Guardian: Home: _____ Work: _____ Mobile: _____

Mother/Guardian: Home: _____ Work: _____ Mobile: _____

Emergency Contacts (You authorize to obtain emergency medical treatment for your child):

1. Name: _____ Phone: _____ Relationship? _____

Address: _____

2. Name: _____ Phone: _____ Relationship? _____

Address: _____

Child's Doctor/Medical Provider: _____ Phone: _____

Address: _____

Child's Dental Provider: _____ Phone: _____

Address: _____

Health Insurance Company: _____ Phone: _____

Address: _____

Policy Holder: _____

Allergies: Does your child have any diagnosed allergies? (please circle) Yes No

If Yes, please describe: _____

Disabilities: Does your child have any diagnosed disabilities? (please circle) Yes No

If Yes, please describe: _____

Medications: Does your child take any prescription medications? (please circle) Yes No

If Yes, please list name of medication(s) and dosage (including any medication taken only at home): _____

Parent/Guardian Signature

Date

Print Name

EMERGENCY MEDICAL TREATMENT AUTHORIZATION

I hereby authorize the agents of Cornerstone Learning Academy to call an ambulance or to take my child to any available physician or hospital at my expense and to obtain medical treatment for my child. In most emergencies, 911 will be called and the child will be transported to the nearest hospital and treated by the on-call physician. As parent or guardian, I hereby give my permission for emergency medical treatment for my child in the event that I (or my emergency contacts) cannot be reached for authorization.

Child's Name: _____

Parent/Guardian Signature: _____ Date: _____

Print Name: _____

Parent/Guardian Authorizations

Child's Name (please print): _____

Field Trips and Walking Excursions: My child may be transported to and from the Center on:

(please initial each one you authorize)

_____ Field trips or other extra-curricular activities by Cornerstone Learning Academy bus

_____ Walking excursions

Water Play: My child may participate in:

(please initial each one you authorize)

_____ Water activities other than swimming (i.e. sprinklers, etc.) under required supervision

_____ Swimming and other water activities under required supervision at the Center and off-site

Photo/Video Release: My child's photo or likeness may be used for:

(please initial each one you authorize)

_____ Portfolios, activities and events

_____ Photo albums

_____ Student projects

_____ Newspapers and TV stations

_____ Website

Signature of Parent/Guardian _____ Date _____

Print Name _____

Transportation Authorization

(For After School Pickup Only)

Child's Name (please print): _____

Child's School Name: _____

School's Address: _____

This serves as written acknowledgement that Cornerstone Learning Academy will be making special arrangements (such as school bus, child care facility vehicle or walking) for a child that arrives/leaves without a parent. I am the parent or legal guardian of the above named child. I hereby release and agree to indemnify, defend and hold harmless Cornerstone Learning Academy, and their officers, agents and employees from and against any and all claims, liabilities, actions, judgments, damages, and injuries of any kind and nature whatsoever arising out of or in connection with the provision of transportation for my child according to the authorized schedule.

I, the undersigned, authorize Cornerstone Learning Academy, to transport my child between the school I have designated above and Cornerstone Learning Academy (700 S. Converse Street, Spartanburg SC 29306) until the end of the school year. I have read and will discuss with my child the rules which have been put in place regarding the safe transportation of my child and I agree to comply with them in their entirety.

Bus Conduct and Safety Rules

- Wait for the driver to signal you to board or exit the bus.
- Must remain in your seat at all times
- Must wear a seat belt at all times where provided.
- Do not put your head or arms out of the windows when on the bus
- No food or drinks are to be consumed while in the vehicle.
- Keep the bus clean
- Students are expected to be courteous and obedient to the aid and driver at all times.
- No object is to be thrown into, out of, or inside the bus.
- Fighting, yelling or loud talking is not permitted.
- Students will never use the rear emergency exit except upon the direction of the driver or other competent authority.
- Keep the aisles clear. Backpacks or books can trip someone or block the way to the emergency exit.

Parent/Guardian Signature: _____ Date: _____

Print Name: _____ Phone: _____

Discipline Policy

The Cornerstone Learning Academy uses a positive approach to discipline and practices the following discipline and behavior management techniques.

WE DO

- Communicate to children using positive statements.
- Communicate with children on their level.
- Talk with children in a calm, quiet manner.
- Explain unacceptable behavior to children.
- Give attention to children for positive behavior.
- Praise and encourage the children.
- Reason with and set limits for the children.
- Apply rules consistently.
- Model appropriate behavior.
- Set up the classroom environment to prevent problems.
- Provide alternatives and redirect children to acceptable activity.
- Give children opportunities to make choices and solve problems.
- Help children talk out problems and think of solutions.
- Listen to children and respect the children's needs, desires and feelings.
- Provide appropriate words to help solve conflicts.

WE DO NOT

- Inflict corporal punishment in any manner upon a child. (Corporal punishment is defined as the use of physical force to the body as a discipline measure. Physical force to the body includes, but is not limited to, spanking, hitting, shaking, biting, pinching, pushing, pulling or slapping.)
- Use any strategy that hurts, shames, or belittles a child.
- Use any strategy that threatens, intimidates, or forces a child.
- Withhold food as a form of punishment or use food as a reward.
- Force or withhold physical activity, rest/sleep, or toileting as a punishment.
- Embarrass any child in front of others.
- Place children in isolation unsupervised.
- Restrain children through drugs or mechanical restraints.
- Allow discipline of a child by other children.
- Emotionally abuse, threaten, or otherwise belittle a child, his/her parents, families, or ethnic groups.

Conferences will be scheduled with parents if particular disciplinary problems occur. If a child's behavior consistently endangers the safety of the children around him/her, then the Director has the right, after meeting with the parents and documenting behavior problems and interventions, to terminate child care services for that particular child.

Note: If, at any point, there is an indication/suspicion that a child may have special needs, Cornerstone Baptist Church Child Development Center will inform the child's family and help them make contact with *Baby Net* for assessment and assistance.

My signature below indicates that I have received a copy of the discipline policy, it has been reviewed with me, and I have read and understand this policy.

Signature _____ Date: _____

Please circle as appropriate: **STAFF** **PARENT**

If parent, name of child _____

Cornerstone Learning Academy

Physical Activity Policy

Policy Statement

Cornerstone Learning Academy recognizes the importance of physical activity for young children. Implementation of appropriate physical activity practices supports the health and development of children in care, as well as assisting in establishing positive lifestyle habits for the future.

Physical Activity in Child Care

The purpose of this policy is to ensure that children in care are supported and encouraged to engage in active play, develop fundamental movement skills and to have limited screen time. Our center encourages all children to participate in a variety of daily physical activity opportunities that are appropriate for their age, that are fun and that offer variety. In order to promote physical activity and provide all children with numerous opportunities for physical activity the day, Cornerstone Learning Academy will:

Daily Outdoor Play

- Encourage a least restrictive, safe environment for infants and toddlers at all times.
- Provide a designated safe outdoor area for infants (ages 0-12 months) for daily outdoor play.
- Provide toddlers (ages 1-2 years old) with at least 60-90 minutes of daily outdoor active play opportunities across 2 or 3 separate occasions.
- Provide preschoolers and school age children (ages 3-12 years old) with at least 90-120 minutes of daily outdoor active play opportunities across 2 or 3 separate occasions.
- Increase indoor active play time so the total amount of active play time remains the same, if weather limits outdoor time.
- Provide a variety of play materials (both indoors and outdoors) that promote physical activity.

Role of Staff in Physical Activity

- Will encourage children to be physically active indoors and outdoors at appropriate times.
- Will provide 5-10 minutes of planned physical activities (e.g., games and activities) at least 2 times daily for children age 3 and older.

Screen Time Limitations

- Not permit screen time (e.g., television, movies, video games computers) for infants and children two years and younger.

Physical Activity and Punishment

Staff members do not withhold opportunities for physical activity (e.g., not being permitted to play with the rest of the class or being kept from play time), except when a child's behavior is dangerous to himself or others. Staff members never use physical activity or exercise as punishment, e.g., doing push-ups or running laps. Play time or other opportunities for physical activity are never withheld to enforce the completion of learning activities or academic work. Our center uses appropriate alternate strategies as consequences for negative or undesirable behaviors. (Refer to our Discipline/Behavior Management Policy)

Appropriate Dress for Physical Activity

We at Cornerstone Learning Academy have a Ready to Play Policy! Please bring your child ready to play and have fun each day. Your child will participate in both indoor play and outdoor play.

Therefore, play clothes and shoes which can get dirty and allow for free and safe movement are most appropriate. We expect parents to provide children with appropriate clothing for safe and active outdoor play during all seasons. For safety, children cannot wear open-toe shoes, sandals or flip-flops. *Sneakers are recommended.* In winter, provide a warm jacket, snowsuit, hat, mittens and boots. In spring and fall, provide a jacket or sweater, and boots and rain jacket on rainy days. In summer, provide light clothing, swimsuit, towel, hat and sunscreen. Please label all outer garments with your child's name! It is our expectation that children will go outside EVERYDAY! Children will be taken outside each day unless the temperature is below 30°F or above 90°F or there are any weather advisories. We follow the Child Care Weather Watch for wind-chill and heat index factor considerations. If you feel your child is too sick to go outside then he/she is too sick to be at the Center. We request that you keep him/her at home until they are well enough to go outside.

Professional Development

Annual training on promotion of children's movement and physical activity is required for all staff. Staff will be informed of their role in encouraging children to be physically active indoors and outdoors at appropriate times.

My signature below indicates that I have received a copy of the physical activity policy, it has been reviewed with me, and I have read and understand this policy.

Signature _____ **Date:** _____

Please circle as appropriate: STAFF PARENT

If parent, name of child _____

Cornerstone Learning Academy

Nutrition Policy

Policy Statement

Good nutrition is vital to children's overall development and well-being. In an effort to provide the best possible nutrition environment for the children on our facility, Cornerstone Learning Academy has developed the following child care nutrition policies to encourage the development of good eating habits that will last a lifetime.

Child Care Nutrition

Cornerstone Learning Center follows the child care nutrition guidelines recommended by the USDA CACFP (Child and Adult Care Food Program) for all the foods we serve. To provide a healthy and balanced diet that includes fruits, vegetables, and whole grains and limits foods and beverages that are high in sugar, and/or fat, our nutrition policy includes the following:

Fruits and Vegetables

- We serve fruit at least 2 times a day.
- We offer a vegetable other than white potatoes at least once a day.

Grains

- We serve whole grain foods at least once a day.

Beverages

- We limit juice intake to once per day in serving size specified for the child's age group. When served, the juice is 100% fruit juice.
- We do not serve sugar sweetened beverages.
- We serve only skim or 1% milk to children age 2 years and older.

Fats and Sugars

- High fat meats, such as bologna, bacon, and sausage, are served no more than two times per week.
- Fried or pre-fried vegetables, including potatoes, are served no more than once per week.
- We limit sweet food items to no more than two times per week.

Role of Staff in Nutrition Education

- Staff provides opportunities for children to learn about nutrition 1 time per week or more.
- Staff acts as role models for healthy eating in front of the children.

Meal and snack times are planned so that no child will go more than four hours without being offered food. We provide a variety of nutritionally balanced, high quality foods each day so please do not send your child with outside food and drinks for breakfast and snacks.

Weekly Menus

Our weekly menus are carefully planned to follow child care nutrition guidelines at every meal. Each menu is designed to provide a wide variety of nutritious foods that are different in color, shape, size, and texture. All of our child care menus include foods that are culturally diverse and seasonally appropriate. We also like to introduce new and different foods and include children's favorite recipes in our menu planning. Menus are rotated on a three week basis to provide the children with a balance of variety and familiarity. Menus are adapted to incorporate local and fresh in-season produce when available.

Nutrition and Punishment

Staff will never use food as a reward or as a punishment.

Celebrations

From birthday parties to holidays, there are many opportunities for celebrations in our child care center. A birthday party will be held monthly in each classroom. If you would like to recognize your child's actual birthday, we request that you not send in treats or goody bags but instead send a birthday book. For holiday celebrations, a sign-up sheet with specific foods and beverages will be placed in each classroom. Please see your child's teacher if you have any questions or concerns.

Professional Development

Annual training is required to ensure that all staff understands the important role nutrition plays in the overall well-being of children.

My signature below indicates that I have received a copy of the nutrition policy, it has been reviewed with me, and I have read and understand this policy.

Signature _____ **Date:** _____

Please circle as appropriate: **STAFF** **PARENT**

If parent, name of child _____

**Cornerstone Learning Academy
Acknowledgement of Receipt
Of
Center Policies**

By signing below I acknowledge that I have received a copy of the child care facility's handbook outlining the center's policies. I have been given an opportunity to ask questions and I have an understanding of the center policies based on the information received. I agree to read the handbook thoroughly and after reading the handbook, if there is any policy, rule, or regulation in the handbook that I do not understand, I will seek clarification from the Director.

Parent/Guardian/Staff Signature _____ **Date:** _____

Please circle as appropriate: **STAFF** **PARENT**

If parent, name of child _____

Director Signature _____ **Date:** _____