

Growing Green Child Development Center
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Policy Effective Date: 8/29/2016

Mission

The primary mission of Growing Green Child Development Center is to:

1. Provide holistic and successful “hands-on” learning experiences for children ages 2-12 years.
2. Provide the healthiest, safest and highest quality environment for children, both indoors and outdoors.
3. Support and educate parents about making healthy choices for their children and the environment.
4. Prepare children for successful future academic achievements.
5. Prepare children to be socially conscious and global citizens.

Philosophy

Growing Green Child Development Center is based on educational principles that allow each child to develop to their fullest potential. Our approach focuses on the “whole child” meaning we address and support the mind and body. We encourage children to explore their many intelligences through the use of a high quality natural environment that uses Nature Play, gardening, creative arts and music. We encourage each child to develop and grow in their understanding of our diverse world. We hope to support and help educate families on making healthy choices for their children. Following our philosophy means that we set the following goals for each individual child

1. Help each child achieve intellectual growth and stimulation.
2. Help each child in building and maintaining positive self-worth.
3. Help each child become a kind friend to others and possess self-regulation skills
4. Help each child develop a sense of values & respect for self, others and Mother Earth.
5. Help each child attain age appropriate gross and fine motor development and good health habits

The staff at Growing Green Child value family relationships and want to act as a support system for each family. All staff will do their best to maintain strong home to center communication.

Our center embraces the following beliefs:

- We believe parents are a child’s first teacher. We look to the parent to provide information on a child as they are the “expert” in this situation. We strive to work collaboratively with parents and recognize their primary role in their child’s growth and development.
- Children learn best by a “hands-on” approach that is diverse in activity and purpose.
- Children need exposure to the beauty of the natural world in order to understand their place in the world.
- Children need exposure to gardening, the arts and music in order for creativity to flourish.
- Each family is unique and we celebrate differences. We recognize the importance of the family’s beliefs and traditions in forming a child’s view of the world.
- Learning can take place in many different forms and in many different settings.
- Children learn what they live therefore we aim to be a good role model for children at all times.
- Classroom teachers need to develop weekly lesson plans that meet the individual needs of each child in the classroom

Environment at Growing Green

The center was built as a green facility and contains natural and recycled materials. Low VOC paint is on the classroom walls and the floors are made of cork. The center has a fresh air exchange regularly filtering in fresh air. The center does not use bleach but rather a hospital grade disinfectant for cleaning. Every intent has been made to create a center that is healthy for all children. Cloth napkins and regular silverware and plates are used daily. There are recycling centers in classrooms 3 through 7. The play yard is designed as an outdoor classroom and the children can choose from different centers similar to the indoor classrooms. Children will have the opportunity to plant and garden throughout the summer in our green house and flower/vegetable beds.

1.0 Center Operations 251.04(2)(i)1

The State of Wisconsin and the Department of Children and Family Services licensed Growing Green Child Development Center as a group childcare center. It is owned and operated by Todd and Lynn Troha. An onsite Director will manage the day-to-day operations. GG CDC is licensed to care for no more than 152 children at any one time. We will serve children ages 2 to 12 years old. GG CDC will make reasonable accommodations for a child with disabilities as specified under the Americans with Disabilities Act. We are open Monday through Friday,

from 6:30 AM to 6:30 PM, January through December. No service will be provided on New Year's Day, Memorial Day, July 4th, Labor Day, Thanksgiving, and Christmas Day. All regular fees will be charged for these holidays. If a holiday falls on a Saturday, we will be closed the previous Friday. If a holiday falls on a Sunday, we will be closed on the Monday following.

If the center should lose the use of heat, water or electricity before the center opens; we will make every effort to contact parents by email, text or phone calls, as well as posting information on our website. Parents will be notified as soon as possible, on the website and will be asked to not bring their child that day.

Smoking is not permitted anywhere on the premises of the center, indoors or outside.

We will post the following items for parents' review at the front entrance near the parent information board: license certificate, a binder with the complete copy of operating policies and procedures, a copy of the DCF 251 Rule Book, the results of our most recent licensing monitoring visit, notice of enforcement action, stipulations, conditions, exceptions or exemptions and the weekly menu.

Our professional staff is selected based on a thorough interview, work experience and educational background. Prior to working at GG CDC, both a criminal background check and health examination is mandatory for each employee. The administrative structure is as follows:

- Administrator
- Center Director
- Assistant
- Lead Teacher
- Teachers Assistant
- Teachers Substitutes
- Volunteers

Each Classroom will have a Parent Board for daily notices and daily/weekly curriculum.

GG CDC is covered by liability insurance in the amounts required by DCF. There will *not be any pets* on the premises. If new pets will be added in the future, a notice will be posted to inform parents in advance, and whether or not children will have access to the pet(s). Any allergies children may have will be taken into consideration.

To protect each family's confidentiality, GG CDC will not share information about a child or a child's family with anyone who is not authorized to receive this information. Children's records and their medical log will kept up to date and in a locked file cabinet.

As a childcare center, all staff is required to report any suspected abuse or neglect to the county's Child Protective Services (CPS) office. We must notify the proper authorities if we suspect that any child is being improperly treated.

2.0 ATTENDANCE:

Parents or authorized adults are required to bring children into the building and to sign the children in at the beginning of the day (documenting arrival time) and sign them out at the end of the day (documenting departure time). Staff will also take daily attendance to know the names and number of children at the center at all times. *Please notify the center by 8am, if your child will be absent* for any reason. It will be necessary for us to contact the family of a child that is absent without the center being notified of the absence. A courtesy call will be made after the child is late for arrival by over two hours.

Full Time: Any five day regular schedule over 5 hours per day is considered full-time. The schedule is firm and families are financially committed to it two weeks at a time. Full-timers are entitled to care up to 10 hours per day as scheduled. There is no credit for casual absences of up to two weeks duration.

Part Time: Any regular schedule of attendance other than full-time is known as part-time. Part-time schedules comprise of one to four full days or up to five part days each week. The schedule is firm and families are financially committed to it two weeks at a time. Adding (if available) or dropping days is done upon prior written notice from the parent. Part-time schedules, like full-time schedules, allow no credit for casual absences (up to two weeks duration).

Vacation Time: After 1 year, families may take up to 2 weeks of vacation time at ½ regular tuition rate. A 2 week

advance notice must be given and discount will be applied to your account.

Absences: It is expected that children will be present on the days for which they have enrolled. While they are not required to attend on those days, there is NO refund for the days when children are absent for illness or other reasons. The Director will establish a weekly rate based on each child's hours of expected attendance at enrollment.

3.0 ENROLLMENT

Orientation:

All parents are given a tour of the center and are given a copy of the Parent Policies. The Director will discuss the educational program the center offers, the components of the meal plan, behavior management techniques, safety and security in the center as well as addressing any concerns the parents have. As we want to exceed parents' expectations for care, we encourage parents to discuss any questions or concerns in regards to the individual needs of the child. Every child is different and the care we provide must address these individual needs whenever possible.

Parents are invited to visit a child's classroom before enrolling the child. Parents are encouraged to transition their child the week prior to enrollment by visiting the center two or more times with their child for an hour in the designated classroom so the child becomes familiar with the new surroundings. Parents are welcome at the center at all times, unless prohibited by a court order. If so, a copy of the order must be on file at the center. We encourage parents to come for a visit or for lunch when time permits in their schedule. We also appreciate parent volunteers on party days or field trips. If a parent has a special hobby or talent they would like to share with the classroom, we would welcome the opportunity to set this up. Parent participation in the classroom is always welcome and appreciated!

We will *never* refuse to enroll a child on the basis of race, sex, color, creed, political persuasion, national origin, handicap, ancestry or sexual orientation. All children will be enrolled for a trial period of 4 weeks. During the trial period, either GG CDC or the parent may terminate childcare without advance notice.

Children will only be released to persons listed on the enrollment form. If anyone other than the child's parent or someone who is listed on the enrollment form is to pick up a child(ren), we will need to be notified in writing or by a telephone call in advance. The person picking the child(ren) up may need to show a driver's license or other photo ID. In the event of a custody dispute, legal documentation must be provided, for the safety of the child. WI Law requires us to release a child to any biological parent, unless there is a court order to prove otherwise and this legal order must be provided to us and kept on file.

If a parent or other authorized person arrives to pick up a child and that person appears to be intoxicated or under the influence of drugs, all reasonable steps will be taken to prevent the person from leaving with the child, including offering to call a cab or another contact person. While staff cannot legally withhold a child from the legal guardian we will not hesitate to call the local authorities if we feel the child is in danger.

Parents who need other transportation for their children can contract with transportation vendors that serve the community. The transportation company driver or designated adult is required to escort the children into the building upon arrival. If a child does not arrive on a regularly scheduled day, and the center hasn't been informed of an absence, a staff member will phone parents within 60 minutes of scheduled time of arrival. If parents wish to allow a school-age child to leave or arrive at the center unescorted, they must provide written authorization for this activity by completing CFS-104, "Alternate Arrival/Release Agreement." School-age children who leave the center unescorted must be traveling to home, school or another activity where adult supervision is present.

It is important that we communicate daily concerning the needs and interests of each child. If there are issues or concerns that need to be discussed, parents should arrange with us a convenient time to talk on the phone. To foster communication on a regular basis, GG CDC provides scheduled conferences/written newsletters/parent bulletin board and daily conversations with staff. Parent conferences will be scheduled with teachers twice a year and as needed with teachers and the Director. We expect parents to attend the conferences in November and May as valuable information is provided in the area of the child's strengths and the goals for the next six months. Parent input in the area of goal-planning is extremely helpful and a collaborative home-school partnership enhances the child's education.

Items provided by parents: Pair of clean shoes to kept at the center, extra clothing appropriate for the season, diapers or pull-ups, wipes and any ointments needed, cot sheet and blanket or toddler sleeping bag, sunscreen lotion. We ask that no aerosol sprays be used, due to toxic fumes in the spray.

Items provided by center: Cot, Snacks/Meals

4.0 REGISTRATION PROCESS

Parents interested in enrolling their children at GG CDC must meet with the Director to discuss their child's specific needs and to review program policies which are available on our website, as well as, a copy in the office for review. The following items must be completed and returned to the center by the first day of attendance:

Form CFS-62, "Child Care Enrollment"

Form CFS-2344, "Health History and Emergency Care Plan"

Form CFS-60, "Child Health Report" signed by medical professional

Form DPH-4192, "Day Care Immunization Record" or an electronic record of your child's immunizations

Form CFS-104, "Alternate Arrival/Release Agreement" (if applicable)

Form CFS-56, "Child Care Center Transportation Permission" (if applicable)

The Director will inform parents when updates are needed; giving 30 days advance notice to submit updated forms.

5.0 FEE PAYMENT and REFUNDS 251.04(2)(h)1

BILLING Terms and Conditions:

Our policy is that Tuition Fees are to be paid in advance on Monday for the following 2 weeks of childcare. Our preferred method of payment is with Direct Debit from a checking or saving account through Tuition Express. If an alternate payment arrangement is made, additional processing fees will apply. Please refer to our Financial Terms for Services Provided agreement for all applicable charges. Late fees of \$10 a day will be applied if we have not received payment by the date due. Parents will have access to their children's account online by setting up an individual Login and password @ TuitionExpress.com with an ID # that we will provide for you. In the event of an accounting error, each affected account will be credited/debited through Tuition Express.

COLLECTIONS FOR NON-PAYMENT

If tuition owed is not paid as agreed within 30 days, the balance owed, plus all accrued late fees and NSF or returned check fees will be added to the outstanding balance, in addition to collection fees ranging from 33.3% to 50%. If we contract with an outside agency to collect a balance owed, all further communication will be done through the collection agency.

Third Party Payment:

If there will be a third party payment, as from an employer or the county, a special payment schedule will be arranged and detailed in the contract. Parents will be responsible for any specified co-payments or unpaid amounts. Co-payments are due on the first day of each 2 week period of attendance.

FOB Security Keys:

Each security access key FOB required per family (limit 3) will be charged a \$15 fee, due at enrollment. \$5 will be refunded when FOB (s) are returned. LOST key FOB's will cost \$20 for each replacement.

We are not licensed for care after 6:30 pm. We are in violation of WI Licensing rules, if a child is left at our center after 6:30 and the state licensing requires us to contact the authorities, should this happen. A \$5 a minute penalty will be charged after 6:30PM.

Fee calculating DISCOUNTS:

Second child – ten (10%) percent discount applied for 2nd full-time lower-rate child

Vacation Notice: After 1 year-you will pay 1/2 tuition if your child will be on vacation for an entire week; this ensures your spot in the center. Center must be notified 2 weeks in advance for staffing reasons.

Current tuition fee schedule

Fee Policy will be made available to parents yearly. See current fee schedule for tuition rates

Additional Fees:

ANNUAL Non-Refundable Registration Fees: see current fee schedule

ANNUAL Non-refundable Education Fee: see current fee schedule

Additional fees may be applied for field trips or special events; you will be given prior notice.

GG CDC will announce any tuition increases at least two weeks in advance.

Refunds

Any questions regarding refunding of tuition payments will be handled by the Owner of the center. If the Owner determines a refund is in order, a check will be issued to the parent.

6.0 DISCHARGE OF ENROLLED CHILDREN 251.04(2)(h)3

We will *never* discharge a child on the basis of race, sex, color, creed, political persuasion, national origin, handicap, ancestry or sexual orientation. All children will be enrolled for a trial period of 4 weeks. During the trial period, either GG CDC or the parent may terminate childcare without advance notice. After trial, the following applies.

Center Initiated: A child may be discharged for *reasons such as*, but not limited to:

Failure to pay fees on time. (Grounds for immediate termination, without advance notice.)

Lack of parental cooperation.

Inability of childcare program to meet the needs of the child. Staff will consult with the parent to discuss how any problems might be solved before ending care. If necessary, the parent will be referred to other community resources.

Repeated failure to pick up the child at scheduled time.

Failure to complete and return required forms.

We will give 1 week *written* notice of our intent to discharge a child (and try to inform parents of local resources that may be of help to them), except when due to parent's failure to keep current with fees owed.

Parent initiated: Parents must give a 2 week *written* notice to withdraw the child(ren).

Mutual decision: Parents and Director will agree upon the withdrawal date of the child.

Involuntary initiated: If a child does not come back, we will collect bill via collection agency.

Appeal Process: In the event there is an appeal, this will be directed to the owners.

7.0 CHILD GUIDANCE

Each and every child is special and has his/her own way of finding resolve to any conflict. Children gain the skills necessary to get along in the world through trial and error. As they mature and grow, they widen their array of experience and learn the appropriate ways of dealing with one another. They learn that it is far better to talk than act on their feelings, but it takes time, patience, and gentle reminders to assist children to take the more favorable road to resolving their conflicts. Very young children may bite or hit as they express frustration. These are typical paths for them to follow, as they have not yet gained the communication tools to settle the argument without physical means. GG CDC will strive to guide children toward gaining a sense of awareness of one another's feelings and respect for each other's personal space and belongings. Staff will promote an environment of good feelings among the children while triggering a sense of understanding that other children will feel the need to react to something that is unsatisfying. The classroom will filter an atmosphere of control that the children themselves will lead as they integrate a safe, nurturing, and positive outcome from any conflict that takes place. Children will learn that there are clearly defined limits by the response they receive in a gentle, positive manner that fosters learning and personal growth.

Growing Green CDC will focus on four basic principles of educating children in how to express their feelings:

- Positive guidance
- Redirection
- Setting clear limits
- Teaching children alternative ways to address the situation

Children learn from adult behavior and the positive behaviors of other children. Children who are struggling to learn about their world and others within their lives will learn sharing, honesty, fairness, and safety. They deserve respect, dignity, and confidentiality when learning the new skills of these lessons. The staff at Growing Green will teach these in an open, honest way.

The first method will be to try to avoid unfriendly confrontations as often as possible. When incidences do occur, these procedures will be followed:

- Children are to be redirected, not punished, when a conflict arises. Clearly defining the problem and asking the children, when capable, to converse and problem-solve will be the principle form of conflict resolution.
- Staff will protect the children in every way necessary so that each child feels safe and happy in his/her own environment. Staff will not hold/restrain the child to restrict their movements in any manner. The Director will encourage the child to move to a safer location so other children or the teacher is not hurt by physical expressions of anger and frustration. If the Director determines that a child is exhibiting behavior that endangers themselves or others, the parents or emergency contact will be called to pick up the child from the center.
- Children who cannot express themselves may use physical means to express frustration or anger, and this is

typical behavior. It is also prevalent among older children who do not have the language readily available to express their needs and desires. Touch is an easy, rapid method of “explaining” that a child is unhappy. GGCDC staff will help each child learn vital alternative methods to establish his/her place in the room without inflicting harm or undue fear toward another child.

- Each GGCDC classroom will have interesting, motivating activities that are ever changing to provide the children with a stimulating, intriguing day. It is proven that if children are fully engaged in positive experiences, they will be less likely to become bored and frustrated. Providing children with structured groups that create a healthy learning atmosphere will keep the children in a constructive learning and social environment.
- GGCDC staff will only refer to children in positive terms. Words such as “naughty, bad, mean, nasty, or bratty” will not be permitted by staff, parents/guardians, or other children. We will educate and encourage all staff and parents/guardians to refer to children in positive terms, such as “friend, helper, good thinker, etc.”
- Every action that a child engages in, is an opportunity not to be overlooked for a positive outcome. Saying to a child, “I would like to see your feet on the floor so that I know you will be safe”, teaches good values and judgment. It is much preferred over, “get down off that chair”. GGCDC, teaching through a strong language-based curriculum, will only present an atmosphere whereby all children will be given the utmost respect and benefit of learning from the encounters they will have with others. It is the only way to teach them about their world and how to live happily within it.
- These methods are to be introduced only by a teacher or assistant. Discipline will not be delegated to older children, peers, or other parents/guardians under any circumstances.

Appropriate ways to manage crying, fussing or distraught children, these steps will be taken:

- Approach the child in a non-threatening manner and get down to the level of that child. It is uncomfortable to stand over a small child in any circumstance.
- Recognize the emotion displayed by the child and let him/her know that you understand why he/she is experiencing that emotion.
- Indicate what you would like the child to do in a gentle, controlled, but firm manner.
- Validate what the child might be thinking, ex, “I see that Joey has a fire truck. You are mad. Do you want the fire truck, too?” (Nod)
- Provide an acceptable question to promote language rather than physical action and resolve, ex., “I think I see the police car over there. What can we do with it?” (“I get it!”) “Yes, let’s get the police car. Then what can you and Joey do?” (Play rescue!) “Yes, you can play rescue together!”
- Staff will always bring the children together with language, and in this case, the teacher would guide the child back to the friend and tell him/her, “What do you want to ask Joey?” (“Joey, can I play rescue with you?”) Staff will provide only the appropriate language that a child can understand and digest. This will naturally increase as the child grows; however, some children may require the simplest means in which to learn the basic words to solve a problem.
- GGCDC staff will model appropriate behavior. Role-playing among staff members can be a wonderful, impressionable tool.
- If the child is still angry, reasonable choices will be offered. Sometimes a “cooling off” time engaged in a different area of the room will best suit the situation.
- If a child is extremely angry or frustrated, limited methods of helping the child to calm him/her will be practiced in the presence of another staff member at all times.
- GGCDC staff will make it known to each and every child that it is the behavior that is unacceptable, not the child him/herself. Every staff member will refer to the behavior when discussing the incident with the child(ren).
- GGCDC staff will adhere strictly to the policy of confidentiality for each child when reporting an incident to a parent/guardian.

It is completely against the beliefs and methods of GGCDC for a staff member at any time to:

- Humiliate a child in any manner
- Physically engage in any act of physical harm toward a child at any time
- Express personal anger toward a child
- Withhold food or activities from a child in the form of “punishment” for not complying with a given directive
- Ask a parent/guardian to “punish” or withhold privileges from child when they get home because of an incident that occurred at GGCDC during the day. Any and all circumstances will be handled within the confines of this center.

Children or parents/guardians are not to be burdened with the past events of the day when they go home, as it is GGCDC’s responsibility to take control of the situations here in a nurturing, understanding manner. In the same way, parents/guardians will not be permitted to request that staff carry out consequences from events that previously occurred in the home.

- “Teaching words” that express the staff member’s feeling, ex, “I would like to see —”, are much preferred over words, such as “no, stop, don’t.”

- Staff members will refrain from threatening, bribing, or falsifying information presented to a child. Ex., “See? I am calling your mother to tell you that you won’t eat.”

Biting Policy

Biting is a natural developmental stage that many children go through. It is usually a temporary condition that is most common between eighteen and twenty-four months of age. The safety of the children at the school is our primary concern. A child may bite other toddlers for many different reasons. A child might be teething or overly tired and frustrated. He or she might be experimenting or trying to get the attention of the teacher or his peers. Young 2's have poor verbal skills and are impulsive without a lot of self-control. Sometimes biting occurs for no apparent reason. Teachers at GG will encourage the children to “use their words” if they become angry or frustrated.

The staff members will maintain a close and constant supervision of the children at all times. While every positive precaution is taken to monitor the active play of children, biting can occur in an instant. We ask that parents/guardians fully understand that this may occur and also recognize that this is yet another opportunity to resolve conflict in a very simplistic manner while teaching children to redirect this energy into other activities.

The following steps will be taken if a biting incident occurs at our school:

- Biting will be interrupted with a firm “No...we don’t bite people” and attend to the bitten child.
- Staff will stay calm and won’t overreact, letting the child know this is hurtful toward a friend.
- The bitten child will be comforted, such as a cold pack on wounded area.

Staff will remove the biter from the situation. The biter will be given something to do that is satisfying.

If old enough the staff member will discuss appropriate use of our mouths with the child.

For example: “We use our mouths to eat food.” “We use our mouths to talk.”

The wound of the bitten child shall be assessed and cold compress applied if needed. The parents of both children will be notified of the biting incident. Appropriate forms will be filled out (Incident Report). Confidentiality of all children involved will be maintained. The bitten area should continue to be observed by parents and staff for signs of infection. If it gets serious, the child will be observed or shadowed by a teacher (e.g. Shadowed for 10 minutes at a time without hindering their play or activities) and the observations will be monitored to see why the biting is reoccurring. The child will be given appropriate activities (sensory activities) to help cope with the biting. At Growing Green, we are committed to providing the highest standards of care for your child. If you have any further questions, please feel free to request more information from our experienced staff. We operate an ‘Open Door’ policy towards parents so please feel free to walk into our school at any time to discuss any concerns about your child.

Toilet Training

At Growing Green, toilet training is a parent-initiated decision. Once a parent has determined their child is ready to be toilet-trained, the teacher will ask the child every fifteen to twenty minutes if they need to use the bathroom. If the child does have an accident, the teacher will not reprimand the child in any way. The child will be changed into clean clothes immediately. When a child is training, it is suggested that parents bring at least four changes of clothing and underwear. Parents will be informed on a daily basis on how the child is doing in this area.

Transitioning children to another classroom

Growing Green has seven classrooms. Rooms 1 and 2 are designated for two and two and a half year olds. Rooms 3 and 4 are designated for three and three and a half year olds. Room 5 is a four-year-old room. Room six is the collaborative 4K classroom with the Kenosha Unified School district. When children initially start at the center, they will be placed in a room according to their age. Transitions will occur when each individual child is ready. The center uses the Ages and Stages questionnaire which assists in assessing the growth and development of each child and will help determine the appropriateness of the transition. A parent will receive a note home that a child is beginning the transition process. The child will spend preschool hours (8:30 to 11:30) in the new classroom. The child will return to the original classroom for lunch, nap, and the remainder of the day. This process typically takes two weeks. However, this timeframe may be longer depending on the individual child.

Observing Children’s Behaviors

Sometimes children exhibit strong behaviors that are especially challenging. All children deserve a fair opportunity and length of time to become adjusted to their surroundings. Each staff member at GG CDC will specialize in the care and development of children with varying needs and abilities. It is vital that all children be provided with the safest, most reassuring environment in which to learn. Therefore, the following methods will be implemented to determine the very special needs of each child at GG CDC:

1. Watch the child's social and emotional behavior
2. Determine if the child is adjusted to his/her surroundings. Note the friendships he/she is making.
3. See what patterns occur in his/her daily activities.
4. Note any specifically stressful events.
5. Keep specific notes on all observations.
6. Confer with other staff regarding their observations.
7. Discuss findings with the Executive Director.
8. With permission of parents/guardians, develop & implement a plan to provide a positive outcome.
9. Recommendations for outside resources may be provided to assist the parents/guardians in helping their child.
10. Careful documentation of all incidences will be kept.
11. Children will be socially and emotionally guided toward understanding of the better choices within their classroom. Parents/Guardians will be asked to support these beliefs at all times.

Growing Green will have open communication, written communication and discuss all concerns with parent in regards to the child in question of disenrollment. Our written policy is in our policy and procedures binder, located in the office.

8.0 HEALTH CARE POLICY 251.04(2)(i)2/Safety and Supervision Rules

All children shall have the following in their child's folder, locked for confidentiality:

Form CFS-2344, "Health History and Emergency Care Plan

Form CFS-60, "Child Health Report" signed by medical professional

All children will need to have a Health Report on file. The examination for a child age 2 and older must be dated no more than 12 months prior or 90 days after first day of attendance. Physical exams for children over 2 years of age will need to be updated every 2 years. School aged children will need only a health history on file

Form DPH-4192, "Day Care Immunization Record" or an electronic record of immunizations.

Children will need to be properly immunized and an immunization record will need to be on file within 30 days of the first day of attendance.

Daily Health Check by staff

Staff will conduct daily health checks when greeting children and parents as they arrive. This should be performed before the parent leaves the room. Staff will observe the child throughout the day as well. The daily check will be comprised of the following items:

- Listen to any information the parent may give about the child's current health situation
- Look for any unusual marks, bumps, rashes, or behaviors
- Be aware of any unusual odors such as foul breath, fruity sweet breath, or unusual uring or bowel movement odors
- Check to see if the child feels warm or a change in skin indicating a fever or dehydration

Sanitation

Diapering: Before changing a diaper, the staff person involved will wash his/her hands with soap and running water. Following the diaper change, the soiled diaper will be bagged and disposed of in a plastic-lined, foot-activated diaper pail. Any wet or soiled clothing will be put into a plastic bag and tied. Hands of both the child and the staff member will be washed. The changing table will be cleaned and disinfected. The changing table cannot be used until the disinfectant has air dried or after three minutes have passed. Gloves will be used and disposed of properly.

Toys: Any toy that has been in a child's mouth will be picked up as soon as the child lets go of it and placed into a basket to be washed, sanitized and air dried. Toys requiring laundering, such as stuffed dolls or animals, will be laundered weekly or sooner if needed.

Equipment: Furnishings, cots and other equipment shall be washed or cleaned when they become soiled. (251.06(5)(d))

Child Illness

Children who are ill are not to be brought to the center. Examples of children who are ill:

1. A temperature of 101 degrees Fahrenheit or higher.
2. Vomiting or diarrhea has occurred more than once in the past 24 hours.
3. A contagious disease such as chicken pox, strep throat or pink eye or an unidentified rash.
4. Haven't been on a prescribed medication for 24 hours or continue to have symptoms of illness.

Parents will be contact immediately to pick up their child if the child has:

1. Vomited
2. Had 3 episodes of diarrhea in less than two hours

3. Have a fever of 101 degrees

4. Have a possibly contagious disease like pink eye or unidentified rash

Children will be placed in the sick room if staff is available to supervise. If there is no administrative staff available, the child will be placed on a cot away from the other children in the classroom.

Children may return to the center when they are symptom free, have been appropriately treated, or have been given medical approval to return to childcare.

We will follow procedures on personal cleanliness and communicable diseases stated in DCF 251 for exclusion of children from childcare as adapted from the Division of Public Health. We will report all communicable diseases, when required, to the local health department, licensing and to parents of all enrolled children. If a child should become ill or seriously injured while at the center, parents will be contacted immediately. Sick children will be isolated within sight and hearing and made as comfortable as possible. If the child is not picked up within 1 hour, the emergency contact person on the child's enrollment form will be called. The medical log will be updated. Superficial injuries will be washed with soap and water and covered with a bandage or treated with a ice pack, glove usage and disposal will apply. Parents will be told about the minor injury when they pick their child up.

We will practice *universal precautions* when handling all blood injuries and bodily fluid. All staff will use disposable gloves when treating blood injuries. Surfaces touched by blood will be washed and disinfected, and all materials used to treat the injury will be wrapped in an airtight plastic bag and disposed of immediately.

Medical Log Book & Medicine Policy

GGCDC will maintain a medical log. We will document the administration of medication, accidents or injuries that happen when children are in care and observations of injuries to a child's body received outside of care. Center Director will review all entries at least every 6 months, per DCF licensing.

GGCDC will administer medications under the following conditions:

1. Prescriptive and non-prescriptive medication will only be given to children if parents have completed the authorization form provided. The authorization must contain the following information: name of medication, dosage, time and date medication is to be administered. Parent instructions must be consistent with doctor's note or labeling on the medication. If it is not, the medication will not be administered.
2. All medicine must be in its original container, bearing the label with the child's name, dosage and administration directions. It will be stored in a medication box that is inaccessible to children in the Director's office. No medication will be given that has expired.
3. Medicine requiring refrigeration will be kept in a covered, labeled container in the refrigerator. We will not exceed the age-related dosage on the label of any medication without a written doctor's authorization.
4. All medication administered or missed doses, accidents or injuries occurring on-site, marked change in behavior or appearance, or any observation of injuries to a child's body received outside of center care will be entered into the center's medical logbook.
5. **Medication doses will always be administered by 2 staff members** to ensure proper dosage and initiated by both staff members in the medical log book. All staff have been trained in the administration of medication at orientation. Documentation will include: name of the medication, the amount, time given, and the name of the person who administered.
6. The program will not administer the initial dosage of a medication, except with physician's written permission for life-threatening situations
7. Any medication delivered by a device, like an EPI-Pen or inhaler will be provided by staff trained in the administration. Written instructions must be provided on the Health History form that includes the signs and symptoms of when the medication is needed. Parents must demonstrate use of the device and any after care use to all staff administered the medication. Documentation on the demonstration for use and care must be documented on the Medical Device form. Training on the use and care of the device will be provided if the device changes or new staff are able to administer the medication.

Special Health Care Needs

When a child is known to have any special health care needs, that information will be shared with those staff that are assigned to care for that child, but will otherwise be treated with confidentiality. A list with children who are allergic to specific food items, medication, insects or animals will be posted in each classroom. Other special needs, including dietary requirements, will be posted on the inside of the staff cupboard door, where medication and medical logbook are stored. When specialized equipment is needed, such as nebulizer or epi-pen, the child's parent or a medical professional will train staff in correct procedures

Emergency Medical Care

Emergency numbers are posted & located at each phone.

Emergency supplies will be located in the infirmary.

If there is a need for emergency medical care, 911 will be called and the child will be taken to United Hospital System. Should an ambulance be needed, parents will be responsible for any costs. Parents will be contacted as soon as possible after contacting 911. All staff will have training in child CPR and first aid. First aid supplies will be stored in the infirmary. When children are off-site for walk or field trip, staff will take along emergency contact information, attendance sheets and a first aid kit in case an injury occurs to children or staff. The injury will be recorded in the medical logbook upon return to the center. A cell phone will be carried along, in case help is needed.

Growing Green CDC will strive to insure the health and safety of all children at all times. In an effort to reduce the spread of germs and illness, the following policies will be implemented:

- Clear hand washing procedures will be required and posted for all employees and children at sinks.

Safety and Supervision of Children at the Center

Each classroom will stay within the state guidelines for teacher/student ratio at all times. Teachers must provide attentive supervision at all times. Classroom rules will be posted that focus on expected behaviors for children that lead to a safe environment. State regulations will be followed in terms of maintaining a hygienic and safe physical environment for all the children. Any safety issues regarding the physical environment will be reported immediately by staff to the Director. Repairs will be made in a timely manner. All teachers must keep a clipboard containing emergency numbers and the list of children currently in the classroom in her possession at all times.

9.0 CONTINGENCY PLANS 251.04(2)(i)6 & 251.06(3)

There will be a master list of all emergency numbers of all children enrolled in GG CDC that will travel with the person in charge.

Attendance will be kept in each classroom daily with arrival/departure times recorded. During early AM arrival and late PM pick-up, teachers will be kept aware of the children (names) they're responsible for, as rooms are condensed and staff leaves the center. Fire and Tornado evacuation plans will be practiced monthly. The Director will document dates of fire and tornado drill and checking the smoke detectors (monthly) on a form provided by the state.

In case of an emergency that would require a special evacuation, children will be evacuated by all available staff through the nearest exit. Any staff or child with physical or mental disabilities will be given special consideration. The attendance form and list of phone numbers for parents and emergency contacts will be taken out by the staff member designated to be "in charge" to assure that all children are accounted for and all families can be notified. Children will be gathered at Parkside Manor. The director will call 911 and parents will be notified. Children must remain with teachers and will not be released to parents, until it is determined to be safe to do so.

In the event of a tornado warning, the children will be taken to the appropriate designated interior space according to each room's posted evacuation plan (ex. **staff break room, laundry room or storage room.**) Blankets, a portable radio and flashlight, with extra batteries for both, are kept in the tornado shelter area at all times. Attendance forms and emergency contact information will be carried by the staff member designated to be "in charge". Staff will engage the children in activities until we are assured by the authorities that any danger has passed. Children will not be released to parents, until it is determined to be safe to do so.

In the event of a lost child, staff will check all areas of the center. If the child cannot be found, the child's parents and/or emergency contact and the police will be immediately notified, as well as DCF within 24 hours. If a child who is scheduled to arrive at the center, via transportation other than the parent, does not arrive within 30 minutes of the specified time on the written agreement signed by the parent, the Director will call the parent to inform them that the child has not arrived.

If the center should lose the use of heat, water or electricity before the center opens; we will make every effort to contact parents by email, text or phone calls, as well as posting information on our website. Parents will be notified as soon as possible, on the website and will be asked to not bring their child that day. If the center should lose the use of heat, water or electricity while children are in attendance, the Director will email, then call the parents of all children and ask them to pick them up within 2 hour(s). When there is only one staff person on

site we will insure that an emergency provider is available within 5 minutes. That person will be trained on Shaken Baby Syndrome, and will sign a document agreeing to serve as an emergency backup.

A motor vehicle shall be immediately available through calling 911 in the event of an emergency and they can arrive within 10 minutes of a phone call.

In the event we are closed due to extreme weather conditions, our center will email families notifying them of the closure. A posting will also be made on our Growing Green Facebook page. Additional messages will be sent on our parent communication app.

The licensee shall report to the department all of the following. Fax, email and letter are acceptable ways of filing a written report:

- a) Any death of a child or professional medical treatment with 48 hours.
- b) Any damage to the premises which may affect compliance
- c) Change in administrator or Center Director, 30 days after the change.
- d) Change in program service at least 5 days prior.
- e) Statistical data required by the department
- f) A plan of correction for cited violations.
- g) Any known convictions, pending charges or other offenses by the next business day
- h) Any change in room usage at least 20 working days prior.
- i) Any incident if a child leaves the premises of the center within 24 hours.
- j) Any suspected abuse or neglect within 24 hours.
- k) Any incident involving law enforcement within 24 hours
- l) Any construction or remodeling before the construction begins.
- m) Any communicable diseases within 48 hours.

10.0 CHILD EDUCATION 251.04(2)(i)3

Learning through play is the major component of our program. Teachers will provide the lesson plans and enough time, materials and space will be provided for children to actively explore the world around them. The curriculum at Growing Green is Creative Curriculum which focuses on the individual strengths of each child and developmentally appropriate techniques to grow their skills. The center uses the Wisconsin Model Early Learning Standards lesson plan format as a means to achieve this. There will be specific activities planned for each learning center that focus on monthly goals for individual children. Children will have an opportunity to use a variety of art materials, manipulatives and housekeeping equipment. Each child will have a portfolio that contains artwork, handwriting and cutting samples, daily observations, photos, and an assessment tool. The contents of the child's portfolio will be shared with the parent(s) at conference time or upon request from a parent. There *will not* be a religious component to our program.

Transitions:

Transitions in early childhood classrooms are the "between" times from one scheduled activity to the next. Transitions that work well can make the scheduled activities cohesive and promote successful classroom management. Planned transitions rarely last for more than 5 minutes, but they help keep children on task and ready to move on to the next classroom activity. Successful strategies involve adult support in making the transitions and allowing the children to make choices. Transitions are important for young children as they gear down or gear up for the next activity, and transitions normally precede important routines. For example, before rest time the teacher may read a book to the children and then play soft music to help the children relax and prepare for rest. Other examples include the use of transition activities to help children wind down from outdoor activities, gear down before going to lunch, or prepare for cleanup time. **Alternating active and quieter activities helps make transitions proceed more smoothly.**

Outdoor Play:

Children will go outdoors daily to the "natural play garden" when weather permits. Supervision guidelines for this area include: 1) Correct teacher-student ratio will be maintained. 2) Teachers will continually scan and monitor the play area for any potential problems/move around playground to support and assist children. 3) Children and staff playground is free of hazards and/or broken equipment.

Field Trips

We occasionally take field trips, including walks around the neighborhood. Parental permission is required and permission slips will be provided at enrollment. A parent who does not desire their child to participate in any field trips will inform the center. The child will be placed in another classroom until the field trip is over. Emergency information for each child will be taken whenever the children leave the premises. You will be notified in advance of any field trip requiring transportation. A permission slip must be on file for permission to provide transportation if the field trip involves taking the van/bus.

A schedule of daily activities is posted on the parent board. Activities at the beginning of the day and at the end of the day will be designed for a wide age range of children working and playing together. Groups of children may be combined at the beginning and at the end of the day. A program of activities is planned a week in advance. Staff uses a variety of resources in their lesson planning. We will also use the services of the Wisconsin Child Care Information Center (800-362-7353) and access their resources to plan activities. The activities focus on a weekly theme based on the interests of the children and lesson plans are available for parents to review.

Rest or naptime will be provided for all children younger than five years of age who are in care for more than four consecutive hours. GG CDC will send cot bedding home to be laundered after every five uses, or sooner if necessary. Children who are awake after 30 minutes of resting will be allowed opportunity for quiet play. Children age two and older will sleep on a cot provided by the center.

11.0 NUTRITION POLICY

We follow USDA guidelines when planning our menus. We do not serve any food containing artificial colors, preservatives or flavors. We contract with Quality Catering to provide our meals. Caterer/Cook must receive 4 hours of training each year. Hot lunch is prepared in our caterer's kitchen and delivered each day. Snacks are prepared at the center. The cook and any kitchen staff will receive the appropriate training in food service procedures. We will provide morning snack, lunch and afternoon snack to all children in attendance at the times identified in the typical daily schedule. School-aged children will be offered an afternoon snack upon return from school.

Given the fact that some children have severe tree nut and/or peanut allergies, we have taken the steps to be a peanut/nut free facility. By severe allergies, we mean that some children experience life-threatening symptoms just from being exposed to these products for the first time. We are committed to providing a healthy environment in every way for all children. We use alternative seed butters for nut butter in our snacks and avoid tree nut oils and other nut products in our foods. We ask that parents do not send any nut products to GG.

Children who attend during the early morning or late afternoon hours will be offered a snack to ensure that they never go without food for more than 3 hours.

Weekly records of meals and snacks are available for parents to review. If a menu must be changed for any reason, the food substituted will be noted on the posted menu.

Children will eat family style and mealtimes will include meaningful conversation with the conversation cube... and will promote social interaction, encourage good table manners and develop sound nutritional habits. Children will be encouraged to clean up after themselves. Eating surfaces will be sanitized before meals and snacks and everyone will wash their hands before and after eating. Children will not be forced to eat; they will be encouraged to try new foods as appropriate. Meals will not be withheld as a form of punishment. Healthy birthday and holiday treats are allowed. Every classroom teacher can provide parents with ideas of nutritional snacks and treats we are able to serve and those we would have to send home with the child.

If your child has special dietary needs or has food allergies parents must notify the center in writing. Food allergies will be posted for staff to view. Parents will provide a substitute on the day a food is served that their child cannot eat.

Morning Snack 9:00-9:30, Lunch 12:00-12:30, Afternoon Snack 3:00-3:30

12.0 Transportation Policy

CENTER PROVIDED TRANSPORTATION

- (a) Attendance & Emergency information card, Transportation permission slip (signed by the parent) shall be carried in the vehicle for each child transported.
- (b) The transportation route and scheduled stops will be listed on the clipboard
- (c) Staff member will walk to the back of the vehicle to disarm the child safety alarm and to ensure all children have exited, before leaving the vehicle.
- (d) Smoking is prohibited in the vehicle while children are being transported.
- (e) Children will never be left unattended in a vehicle, even for brief periods. All children will be accompanied to and from the vehicle to insure safety
- (f) Administrator will send a copy of any accident report to the department within 5 days.
- (g) Children will be logged in when they enter the vehicle and they will be logged out when they leave the vehicle
- (h) Children's names on the transportation log will reflect the children who need drop off and pick up on specific days. This ensures that the driver is accountable for all the children who require transportation. All children will be accounted for before leaving the facility and again before returning
- (i) If a child is scheduled for pick up at a school and does not show up at the van, the school office as well as the parent will be called immediately.
- (j) **Parents need to call Growing Green in the AM if their child does not need pick up in the afternoon**

DRIVERS and Volunteer Drivers

- 1. At least 18 years of age.
- 2. A valid Wisconsin operator's license for the type of vehicle driven.
- 3. At least one year of experience as a licensed driver.
- 4. The licensee shall obtain a copy annually of the driving record for each driver of a center provided vehicle and shall place the record in the staff file.
- 5. Drivers are permitted to carry a cell phone to use in case of an emergency
- 6. The driver will be familiar with the planned route before driving the children unassisted
- 7. A Criminal background check will be conducted

VEHICLE

- 1. Registered in Wisconsin and every 12 months a copy of Vehicle Safety Inspection Report.
- 2. Clean, uncluttered and free of obstructions on the floors, aisles and seats.
- 3. First Aid Kit
- 3. Each child less than 4 years of age or who weighs at least 20 pounds but less than 40 pounds shall be properly restrained in a forward-facing individual child car safety seat when being transported in a vehicle as specified in s. 347.48, Stats.
- 4. Each child who 4 but less than 8 years, weighing not more than 80 pounds or taller than 4 feet 9 inches shall be properly restrained in a shoulder-positioning child booster seat when being transported in a vehicle as specified in s. 347.48, Stats.
- 5. Each child not required to be in car seat is properly restrained by a seat belt. Each adult in the vehicle shall be properly restrained by a seat belt. Seat belts may not be shared.
- 6. Passenger doors shall be locked at all times when a vehicle transporting children is moving.
- 7. Each vehicle has been equipped with a child safety alarm to ensure that no child will remain on the bus/van at the end of the route.
- 8. All vehicles receive regular maintenance are inspected annually per licensing requirements

CONTRACTED TRANSPORTATION

- 1. Name, address and phone number of contracted transportation firm on file.
- 2. Authorized GG personnel will meet bus at arrival and departure of children.
- 3. Staff may NOT use their personal vehicles to transport children.
- 4. If a child needs special transportation accommodations we will follow the contracted transportation rules and meet the driver and the child at the front door.

Safety Rules for children:

- 1. Children will be buckled in their seat belts from the time the van starts to the time the driver states it is safe to unbuckle. The driver will not start the vehicle until all children are seated and buckled in.
- 2. No child is allowed to sit in the front seat
- 3. Children are prohibited from eating, drinking, standing or other dangerous activities during transportation
- 4. Children will use inside voices while in the vehicle

Emergency Procedures for vehicle travel

In the case of an emergency, the van driver must:

1. Provide adequate supervision in a secure area for all children
2. Notify the proper authorities and provide appropriate first aid and medical care
3. Arrange for alternate means of transportation, if needed
4. In the case of an injury, call 911 depending on the injury.

13.0 Family Support Resources and Programs

Family Resources

The staff at Growing Green is familiar with community support resources for families and children in the city of Kenosha. When applicable, referrals will be made to local agencies with a parent's consent. The lobby contains a handbook of agencies in the area that can provide help to families and parents can request a copy or photo copies of relevant pages.

Programs at Growing Green

The center encourages parents to attend all the events that are held. It is an expectation that parents will participate in the conferences which are held twice a year in November and in May.

14.0 Procedure for Complaints

Parents should feel free to speak to teachers and administration staff with any questions or concerns they may have. The Director has an open door policy, and parents are welcome at any time to discuss issues of concern. The Director will work to resolve any issues regarding the child's care and education at the center. However, if a parent is not satisfied with the resolution to a situation, the owners can become involved. Parents may write a letter and detail the specifics of the situation. They will receive a reply from the owners within five business days.

15.0 What to Bring Your First Day

- ✓ 2 extra pairs of clothes (including shirt, pants, socks)
- ✓ Crib sheet for cot and blanket (or any other cuddly item that fits in a cubby for comfort)
- ✓ Payment for Registration Fee and Supply Fee (unless already paid), along with tuition payment
- ✓ Diapers and wipes
- ✓ Mittens, hat, snow pants, warm coat, boots (wintertime)
- ✓ Sunscreen, swim suit, towel (summertime)

New Child Questionnaire:

1. Has your child ever been in any other childcare center or preschool environment?
Tell us about that experience.
2. Describe your child's siblings/family background (are they used to others in the house, who are they close to?).
3. What are some activities you like to do together for fun?
4. What are some rules in your house that your child follows?
5. Describe some important family traditions, customs, or traditions.
6. How does your child do at mealtime? Does your child feed him/herself?
7. Where is your child at in the potty training experience?
8. Does your child nap? What comforts your child?
9. Is there anything else you would like to share about your child?

Parent Acknowledgement

I completed the parent orientation through the following:

- I was given the opportunity to take a tour of the school.
- I was given the opportunity to meet my child's teacher.
- I was told about the transition period in which my child could participate in the classroom for 1 hour per day before our official start date.
- I was given a copy of the Parent Policies. I have read the policies and have been given the opportunity to discuss these policies. I agree to abide by the policies of the center.

Signature of Parent: _____ Date: _____

Signature of Director: _____ Date: _____

CHILD CARE ENROLLMENT

Use of form: Use of this form is mandatory for Family Child Care Centers to comply with DCF 250.04(6)(a)1. Failure to comply may result in issuance of a noncompliance statement. This form may also be used by Group Child Care Centers and Day Camps to comply with DCF 251.04(6)(a)1. and DCF 252.41(4)(a)1. respectively. Personal information you provide may be used for secondary purposes [Privacy Law, s.15.04(1)(m), Wisconsin Statutes].

Instructions: The parent / guardian shall fill out the form completely, sign it and submit it to the center prior to the child's first day of attendance. Information on this form shall be kept current. When enrolling a child under two years of age, a completed *Intake for Child Under 2 Years* form must also be on file prior to the child's first day of attendance.

CHILD INFORMATION

Name (Last, First, MI)	Birthdate (mm/dd/yyyy)	First Day of Attendance
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PARENT OR GUARDIAN – All parents / guardians are permitted to visit during center hours and are allowed to pick up the child unless access is prohibited or restricted by a court order. Attach court order, if any. If the child resides at multiple locations, the department recommends the provider obtain and attach a schedule.

a. Name and Relationship to Child	Home / Cell Phone No.	Email Address Where Reachable While Child is in Care
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Home Address (Street, City, State, Zip)	Does child reside at this location? <input type="checkbox"/> Yes <input type="checkbox"/> No	Place of Employment and Work Phone No.
-----------------------------------------	-------------------------------------------------------------------------------------------------	----------------------------------------

b. Name and Relationship to Child	Home / Cell Phone No.	Email Address Where Reachable While Child is in Care
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Home Address (Street, City, State, Zip)	Does child reside at this location? <input type="checkbox"/> Yes <input type="checkbox"/> No	Place of Employment and Work Phone No.
-----------------------------------------	-------------------------------------------------------------------------------------------------	----------------------------------------

AUTHORIZED PERSONS – Persons other than parents / guardians who are authorized to pick up the child or accept the child if dropped off. If no one, write "None."

a. Name and Relationship to Child	Home / Cell Phone No.	Email Address Where Reachable While Child is in Care	Place of Employment and Work Phone No.
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b. Name and Relationship to Child	Home / Cell Phone No.	Email Address Where Reachable While Child is in Care	Place of Employment and Work Phone No.
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EMERGENCY CONTACT – The person to be notified in an emergency when parents / guardians cannot be reached.

☐ Yes ☐ No This person is authorized to pick up the child.

Name and Relationship to Child	Home / Cell Phone No.	Email Address Where Reachable While Child is in Care	Place of Employment and Work Phone No.
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PHYSICIAN OR MEDICAL FACILITY

Name	Address (Street, City, State, Zip Code)	Telephone Number
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AUTHORIZATIONS

- ☐ Yes ☐ No I hereby give my consent for emergency medical care or treatment to be used only if I cannot be reached immediately.
- ☐ Yes ☐ No I have had an opportunity to review the policies of this child care center and a summary of the Wisconsin Rules for Licensing Child Care Centers.
- ☐ Yes ☐ No I give permission for my child to participate in ☐ Transported ☐ Walking field trips and other activities during operating hours.
- ☐ Yes ☐ No I have been informed of the number of pets in the center and their degree of contact with the enrolled children. Note: If pets are added after a child is enrolled, parents shall be notified in writing prior to the pet's addition to the center.

SIGNATURE – Parent or Guardian	Date Signed
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HEALTH HISTORY AND EMERGENCY CARE PLAN

Use of form: This form is required for family and group child care centers and day camps to comply with DCF 250.04(6)(a)1., DCF 251.04(6)(a)6., and DCF 252.41(4)(a)6. of the Wisconsin Administrative Codes. Failure to comply may result in issuance of a noncompliance statement. Personal information you provide may be used for secondary purposes [Privacy Law, s.15.04(1)(m), Wisconsin Statutes].

Instructions: The parent / guardian should complete this form for placement in the child's file prior to the child's first day of attendance. Information contained on the form shall be shared with any person caring for the child. The department recommends that parents / guardians and center staff periodically review and update the information provided on this form.

CHILD INFORMATION

Name (Last, First, MI)	Birthdate (mm/dd/yyyy)	First Day of Attendance (mm/dd/yyyy)
Home Address (Street, City, State, Zip Code)		

PARENT / GUARDIAN INFORMATION

Provide information where the parent(s) / guardian(s) may be reached while the child is in care.

Name	Primary Telephone Number	Work Telephone Number	Secondary Telephone Number
Name	Primary Telephone Number	Work Telephone Number	Secondary Telephone Number

PHYSICIAN / MEDICAL FACILITY INFORMATION

Physician Name	Medical Facility Address	Telephone Number
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SUNSCREEN / INSECT REPELLENT AUTHORIZATION If provided by the parent, the sunscreen or insect repellent shall be labeled with the child's name. Per DCF 250.07(6)(h)6., Authorizations shall be reviewed periodically and updated as necessary. Per DCF 251.07(6)(g)3., authorizations shall be reviewed every 6 months and updated as necessary.

<input type="checkbox"/> Yes <input type="checkbox"/> No I authorize the center to apply sunscreen to my child.	Brand Name	Ingredient Strength
<input type="checkbox"/> Yes <input type="checkbox"/> No I authorize the center to allow my child to self-apply sunscreen.		
<input type="checkbox"/> Yes <input type="checkbox"/> No I authorize the center to apply repellent to my child.	Brand Name	Ingredient Strength
<input type="checkbox"/> Yes <input type="checkbox"/> No I authorize the center to allow my child to self-apply repellent.		

HEALTH HISTORY AND EMERGENCY CARE PLAN

If available, attach any health care plan information from the child's physician, therapist, etc.

1. Check any special medical condition that your child may have.

- | | | |
|-------------------------------------------------------------------------------|------------------------------------------------------|-------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> No specific medical condition | <input type="checkbox"/> Diabetes | <input type="checkbox"/> Gastrointestinal or feeding concerns, including special diet and supplements |
| <input type="checkbox"/> Asthma | <input type="checkbox"/> Epilepsy / seizure disorder | <input type="checkbox"/> Any disorder, including Cognitively Disabled, LD, ADD, ADHD, or Autism |
| <input type="checkbox"/> Cerebral palsy / motor disorder | | |
| <input type="checkbox"/> Other condition(s) requiring special care – Specify. | | |

- ☐ Milk allergy. If a child is allergic to milk, attach a statement from the medical professional indicating the acceptable alternative.
- ☐ Food allergies – Specify food(s).

- ☐ Non-food allergies – Specify.

2. Triggers that may cause problems – Specify.

3. Signs or symptoms to watch for – Specify.

4. Steps the child care provider should follow. If prescription or non-prescription medications are necessary, a copy of the form *Authorization to Administer Medication – Child Care Centers* should be attached to this form. Note: Group child care centers and day camps may use their own form.

5. Identify any child care staff to whom you have given specialized training / instructions to help treat symptoms.

a.

b.

c.

6. When to call parents regarding symptoms or failure to respond to treatment.

7. When to consider that the condition requires emergency medical care or reassessment.

8. Additional information that may be helpful to the child care provider.

SIGNATURE – Parent or Guardian

Date Signed (mm/dd/yyyy)

Review dates: _____

Child Health Report – Child Care Centers

Use of form: Use of this form is required unless the health examination report is on an electronic printout from a licensed physician, physician assistant, or other EPSDT provider. Completion of this form meets the requirements of DCF 202.08 (4), DCF 250.04 (6) (a) 4. and DCF 251.04 (6) (a) 8. Failure to comply with these rules may result in issuance of a noncompliance statement. Personal information you provide may be used for secondary purposes [Privacy Law, s.15.04(1)(m), Wisconsin Statutes].

Instructions: Each child under 2 years of age shall have an initial health examination not more than 6 months prior to nor later than 3 months after being admitted to the center and a follow-up health examination at least once every 6 months thereafter. Each child 2 years of age but who is not 5 years of age or older shall have an initial health examination not more than one year prior to nor later than 3 months after being admitted to a center and a follow-up health examination at least once every 2 years thereafter. The parent / guardian shall give this form to the physician, physician assistant, or other EPSDT provider to be completed, signed, and dated. The licensee / operator shall obtain a copy for the child's record. Note: Children are also required to have on file at the child care center documentation of immunizations; it may be helpful if the parent / guardian includes a copy of the child's immunization record when submitting this form to the child care center.

PARENT OR GUARDIAN – This section should be completed by the parent or guardian

Child's Name (Last, First, MI)

Child's Birthdate (mm/dd/yyyy)

Child's Address (Street, City, State, Zip Code)

Parent or Guardian Name (Last, First, MI)

Parent or Guardian Address (Street, City, State, Zip Code)

HEALTH PROFESSIONAL – This section should be completed by the health professional

Instructions for feeding and care of child with special health concerns – Specify: (attach information as necessary).

☐ Yes ☐ No Does the child have a milk allergy? If "Yes," identify the recommended milk substitute.

☐ Yes ☐ No Does this child have any food or non-food allergies? If "Yes," specify and include the treatment plan to be implemented in the event of an allergic reaction.

Date of child's most recent blood lead test: _____ (mm/dd/yyyy).

Note: Children on Medicaid are required to be tested at around ages 12 months and 24 months or once between the ages of 3 and 5 years if no previous test is documented. Lead testing is optional for children who are not on Medicaid.

Immunization(s) not to be administered to child due to medical reason(s) – Specify.

AUTHORIZATION

I certify that I have examined the above child on this date and that he / she is able to participate in child care activities.

Name – MD, PA, or other EPSDT Provider (type or print)

Address (Street, City, State, Zip Code)

SIGNATURE – MD, PA, or other EPSDT Provider

Date of Examination

CHILD CARE IMMUNIZATION RECORD

COMPLETE AND RETURN TO CHILD CARE CENTER. State law requires all children in child care centers to present evidence of immunization against certain diseases within **30 school days (6 calendar weeks) of admission to the child care center**. These requirements can be waived only if a properly signed health, religious, or personal conviction waiver is filed with the child care center. See "Waivers" below. If you have any questions about immunizations, or how to complete this form, please contact your child's child care provider or your local health department.

PERSONAL DATA

PLEASE PRINT

STEP 1	Child's Name (Last, First, Middle Initial)	Date of Birth (Month/Day/Year)	Area Code/Telephone Number
	Name of Parent/Guardian/Legal Custodian (Last, First, Middle Initial)	Address (Street, Apartment number, City, State, Zip)	

IMMUNIZATION HISTORY

STEP 2	List the MONTH, DAY AND YEAR the child received each of the following immunizations. DO NOT USE A (✓) OR (X) except to indicate whether the child has had chickenpox. If you do not have an immunization record for this child, contact your doctor or local public health department to obtain the records.					
	TYPE OF VACCINE	First Dose Month/Day/Year	Second Dose Month/Day/Year	Third Dose Month/Day/Year	Fourth Dose Month/Day/Year	Fifth Dose Month/Day/Year
	Diphtheria-Tetanus-Pertussis (Specify DTP, DTaP, or DT)					
	Polio					
	Hib (Haemophilus <i>Influenzae</i> Type B)					
	Pneumococcal Conjugate Vaccine (PCV)					
	Hepatitis B					
	Measles-Mumps-Rubella (MMR)					
	Varicella (chickenpox) vaccine Vaccine is required only if the child has not had chickenpox disease.					
	Has the child had Varicella (chickenpox) disease? Check the appropriate box and provide the year if known. <input type="checkbox"/> Yes year _____ (Vaccine is not required) <input type="checkbox"/> No or Unsure (Vaccine is required)					

REQUIREMENTS

STEP 3	The following are the minimum required immunizations for the child's age/grade at entry. All children within the range must meet these requirements at child care entrance. Children who reach a new age/grade level while attending this child care must have their records updated with dates of additional required doses.							
	AGE LEVELS	NUMBER OF DOSES						
	5 months through 15 months	2 DTP/DTaP/DT	2 Polio	2 Hib	2 PCV	2 Hep B		
	16 months through 23 months	3 DTP/DTaP/DT	2 Polio	3 Hib ¹	3 PCV ²	2 Hep B	1 MMR ³	
	2 years through 4 years	4 DTP/DTaP/DT	3 Polio	3 Hib ¹	3 PCV ²	3 Hep B	1 MMR ³	1 Varicella
At Kindergarten entrance		4 DTP/DTaP/DT ⁴	4 Polio		3 Hep B	2 MMR ³	2 Varicella	
¹ If the child began the Hib series at 12-14 months of age, only two doses are required. If the child received one dose of Hib at 15 months of age or after, no additional doses are required. Minimum of one dose must be received after 12 months of age (Note: a dose four days or less before the first birthday is also acceptable). ² If the child began the PCV series at 12-23 months of age, only two doses are required. If the child received the first dose of PCV at 24 months of age or after, no additional doses are required. ³ MMR vaccine must have been received on or after the first birthday (Note: a dose four days or less before the first birthday is also acceptable). ⁴ Children entering kindergarten must have received one dose after the fourth birthday (either the third, fourth or fifth) to be compliant (Note: a dose 4 days or less before the fourth birthday is also acceptable).								

COMPLIANCE DATA AND WAIVERS

STEP 4	IF THE CHILD MEETS ALL REQUIREMENTS (sign at STEP 5 and return this form to the child care center), OR	
	IF THE CHILD DOES NOT MEET ALL REQUIREMENTS (check the appropriate box below, sign and return this form to child care center).	
	<input type="checkbox"/> Although the child has not received all required doses of vaccine for his or her age group, at least the first dose of each vaccine has been received. I, understand that it is my responsibility to obtain the remaining required doses of vaccines for this child WITHIN ONE YEAR and to notify the child care center in writing as each dose is received.	
	NOTE: Failure to stay on schedule or report immunizations to the child care center may result in court action against the parents and a fine of \$25.00 per day of violation.	
	<input type="checkbox"/> For health reasons this child should not receive the following immunizations _____ (List in STEP 2 any immunizations already received) <div style="text-align: right;">_____ Physician's Signature Required</div> <input type="checkbox"/> For religious reasons this child should not be immunized. (List in STEP 2 any immunizations already received) <input type="checkbox"/> For personal conviction reasons this child should not be immunized. (List in STEP 2 any immunizations already received):	

SIGNATURE

STEP 5	To the best of my knowledge, this form is complete and accurate.	
	SIGNATURE - Parent, Guardian or Legal Custodian	Date Signed

Growing Green Child Development Contract

This is a contract between _____ and Growing Green Child Development Center (GGCDC).

I am enrolling my child, _____ for the days: M T W R F .

(Rooms 1 through 6) My child attends: half days full days.

(Room 7 School Age) My child attends:

--

All Families:

- I understand that all payments are final.
- I understand tuition is due the 1st of each month, unless an alternate payment plan has been made with the center.
- I understand this is a guaranteed rate and includes full pay for holidays, with no credit for absent or sick days.
- I understand that late payments are subject to \$10/day late fees. *If full tuition payment is not made by the 28th of the month, enrollment can be suspended or terminated.*
- I understand that outstanding balances will be sent to a collection agency within 30 days. There are additional fees associated with collection agencies, ranging from 30% to 50% added to any balance.
- I understand that if I chose to opt out of Tuition Express, I can pay with cash, check, or credit card. However, I will be assessed a \$25 per month processing fee for doing so.
- I understand that GG CDC will charge a \$35 fee for any NSF checks.
- I understand GG CDC requires a one month notice of dis-enrollment.
- I understand the holiday schedule, detailed in my parent handbook. If the holiday falls on a Saturday or Sunday, the center will be closed on the Friday or Monday. GG CDC will post which day.
- I understand after one year, families are given up to 2 weeks of vacation tuition (half price your normal weekly tuition rate). We require one month notice for billing purposes.
- I understand I must follow the illness policy detailed in my parent handbook, including keeping my child out of school when they have any contagious symptoms (including, but not limited to, 101 degree fevers, diarrhea, vomiting, etc.).
- I understand our center closes at 6:30 pm. GG CDC will charge \$5/minute late fees after that time.
- I hereby irrevocably release, consent and authorize GG CDC to use any photograph (as it pertains to my child's participation at GG CDC) in any manner for promotional efforts without any exception or rights to any reimbursement.

Families Participating in WI Childcare Assistance:

- I understand I will use my EBT card information to pay on the first of each month.
- I understand the remaining tuition is my responsibility (Parent Share). It is due on the first of each month, unless alternate payment arrangements have been made with the center.
- I understand the importance of following the schedule specified above to use my child care assistance properly.
- I understand the days that my child does not attend (i.e. sick days, holidays, etc.) the state will not reimburse GG CDC. This holds me responsible for those tuition expectations, including any accrued parent share.
- I understand if MyWiChildCare authorization expires, I will be responsible for paying the full GG CDC tuition fees until the authorization is reinstated.
- I understand that I am responsible for my lost or stolen EBT card. I will call 877-201-7601.
- I understand I will make my payments by calling 877-201-7601 or visiting www.ebtedge.com. I will need my MyWiChildCare authorization information at that time (which is located on my EBT card).

By signing, you are confirming you have read and will comply with the contract agreement.

Parent Name (Printed): _____

Parent Name (Signature): _____

Date: _____

GGCDC Representative Initials:

Growing Green Child Development Center

Key Fob Security Deposit Agreement

Date_____

Name_____

Key Fobs (maximum 2)_____ x \$30.00 = \$_____ Deposit Due

Note:

Key fobs must be used to enter the building and corridor hallways. Please scan your fob even if the door is opened by another user in front of you. We will be watching to ensure that key fobs are always being used.

Any individual that does not scan their key fobs prior to entering an open door in front of them are unauthorized to enter the building or corridors without prior approval. Please be aware that those behind you that are not scanning a key fob are not entering with you. THIS IS TO PROTECT THE SAFETY OF ALL CHILDREN!

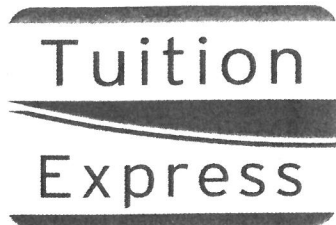
Your \$5.00 deposit will be returned when key fobs are returned. For the safety of all children, please notify Growing Green ASAP if you lose your fob so it can be deactivated in a timely manner.

Key Fob # Issued 1:_____

2:_____

Issued By:_____

Parent/Caretaker:_____



Hop aboard the Tuition Express and never write a check again!

As your childcare provider, we are excited to offer you the convenience of automatic tuition payments through Tuition Express. You'll no longer need to write a check or remember your checkbook when you're picking up your child at the end of a hectic day. Your payment will be safely and securely processed by Tuition Express, giving you peace of mind that your tuition has been paid on time! It's easy to enroll and even easier to participate. You'll be joining hundreds of thousands of parents nationwide who enjoy the ease and convenience of Tuition Express.

To learn more about Tuition Express, automatic payment notifications or to review your payment history, please visit www.tuitionexpress.com

For Bank Account Authorization, complete this side and return to center management.

ELECTRONIC FUNDS TRANSFER AUTHORIZATION

I (we) authorize _____ (called "CENTER" in this Authorization) to initiate debit entries to my (our) Checking or Savings Account indicated below at the depository financial institution indicated below (called "DEPOSITORY" in this Authorization). I (we) authorize CENTER to withdraw sufficient funds to pay my (our) regular childcare tuition and/or other childcare related fees that are due and payable. I (we) authorize CENTER to use the third party sender, Tuition Express* to process all payments. I (we) acknowledge that the origination of Automated Clearing House (ACH) transactions to my (our) account must comply with the provisions of United States Law.

Credit Union Members: Please contact your Credit Union to verify account and routing numbers for automatic payments.

Your Name

Phone #

DEPOSITORY - Bank or Credit Union Name

Address

Bank or Credit Union Address

City

State

Zip

City

State

Zip

Type: ☐ Checking ☐ Savings

Routing Transit Number (see sample below)

Account Number (see sample below)

This authorization will remain in full force and effect until I (we) notify the CENTER in writing of its termination in such time and in such manner as to afford Tuition Express and DEPOSITORY a reasonable opportunity to act upon it. Notices must be received at a minimum of 5 business days in advance of the termination date.

Signature

Date

Record Retention Notice: The child care provider shall retain all parent (client) authorization forms in a secure location for a period of two years from the date of client withdrawal from the Tuition Express™ program.

*Tuition Express is an assumed business name of Blum Investment Group, Inc.

(Please attach a copy of a voided check below - deposit slips not accepted)

John Smith Sally A. Smith 123 Main Street Anytown, OR 97101		1420
DATE _____		
PAY TO THE ORDER OF _____ \$ _____		
Dollars		
Anytown Bank Anytown, OR 97101		
CHECK # _____		
0574210412	57824511	1420
Routing Transit Number	Account Number	Check Number

HOUSEHOLD SIZE—INCOME STATEMENT

Child and Adult Care Food Program

An adult household member must complete this form (HSIS) and return it to the center. Complete one HSIS per household.

Refer to the accompanying *Household Letter* for instructions on completing this form.

First and Last Name(s) of Enrolled Child(ren)	Center
-----------------------------------------------	--------

PART 1: BENEFITS

If no one receives these benefits, skip to PART 2.

If any member of your household currently receives benefits from:	Check the box for the benefit received AND list the case number:	
FoodShare Wisconsin (10 digit #) <input type="checkbox"/> _____		<ul style="list-style-type: none"> • DO NOT list a 16-digit Quest Card number for FoodShare • Wisconsin Shares Child Care Subsidy benefits is NOT W-2 Cash Assistance.
Wisconsin Works (W-2) Cash Assistance (10 digit #) <input type="checkbox"/> _____		
FDPIR (9 digit #) <input type="checkbox"/> _____		

PART 2: HOUSEHOLD SIZE AND INCOME (Complete a, b, and c)

If you complete PART 1, you do not need to list household and income information below.

a) List full names of all household members below, including yourself and all children.	b) List all income on the same line as the person who receives it. <ul style="list-style-type: none"> Record each income source only once. Check the box for how often each income source is received.
-----------------------------------------------------------------------------------------	--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

Household Members (Household Member: anyone who is living with you and shares income and expenses, even if not related).	(Optional) Age	Check if Foster Child	Check if No Income	Gross wages, Net income (self-employed), Tips, Commission, Cash bonuses, Military pay & allowances for off-site housing/ food/ clothing, Work comp, strike benefits, Unemployment	Weekly	Every 2 Weeks	Twice per Month	Monthly	Annually	Pensions, Retirement Social Security, SSI, Disability, VA benefits, Child Support, Adoption assistance, Alimony	Weekly	Every 2 Weeks	Twice per Month	Monthly	Annually	Private pensions, Trusts/estates, Annuities, Investments, Interest, Net rental income, Savings withdrawals, Any other income	Weekly	Every 2 Weeks	Twice per Month	Monthly	Annually
		<input type="checkbox"/>	<input type="checkbox"/>	\$	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	\$	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	\$	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	\$	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	\$	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	\$	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

c) Record total # of household members: _____

PART 3: ALL HOUSEHOLDS

ETHNICITY AND RACE DATA COLLECTION – Completion is optional

This center is required by Federal law to ask the following two questions concerning ethnicity and race. Your answers are strictly for statistical reporting and will have no effect on determination of eligibility for benefits. **Please answer both questions.**

IS YOUR CHILD(REN) HISPANIC OR LATINO? ☐ Yes, Hispanic or Latino ☐ No, neither Hispanic nor Latino

SELECT ONE OR MORE OF THE FOLLOWING CATEGORIES THAT APPLY TO YOUR CHILD(REN):

☐ American Indian or Alaska Native ☐ Black or African American ☐ White ☐ Asian ☐ Native Hawaiian or Other Pacific Islander

ADULT HOUSEHOLD MEMBER SIGNATURE AND LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER (SS#)

If Part 2 is completed, the adult signing the form must list the last four digits of his/her SS# OR check "None" if he/she does not have a SS#.

I CERTIFY (promise) that all information on this form is true, and that all income is reported unless eligibility is established by receiving FoodShare, W-2 Cash Assistance, and/or FDPIR. I understand that this information is given in connection with the receipt of Federal funds, and that CACFP officials may verify (check) the information. I am aware that if I purposely give false information, the center may lose meal benefits, and I may be prosecuted under applicable State and Federal laws.

Signature of Adult Household Member	Signature Date <i>Mo./Day/Yr.</i>	Last 4 digits of SS# (or check "None" if you do not have a SS#) ***-**-____ <input type="checkbox"/> None
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FOR CENTER USE ONLY – Complete all 3 sections and the *Effective Month of Determination*

Section 1: Basis of Determining Eligibility (A or B)			Section 2: Eligibility Determination		Section 3: Determining Official's Initials & Approval Date	
A. Household Size & Income Total Household Size _____ *Total Income \$ _____ / _____ (\$ Amount) (Time Period)		B. Benefits/Foster <input type="checkbox"/> FoodShare WI <input type="checkbox"/> W-2 Cash Assistance <input type="checkbox"/> FDPIR <input type="checkbox"/> Foster Child(ren)		<input type="checkbox"/> Free <input type="checkbox"/> Reduced <input type="checkbox"/> Non-Needy		Initials/Date: _____ **Effective Month of Determination: _____ <div style="text-align: right;">Month/Year</div>
*Convert to yearly income <u>only</u> when multiple pay frequencies are reported, using only these multipliers:			Weekly x 52 ----- Every 2 weeks x 26	Twice a month x 24 ----- Monthly x 12	**This form expires one year from the <i>Effective Month of Determination.</i>	

Dear Parent or Guardian:

_____ is enrolled in the CACFP, a USDA program which
(Name of Agency)

provides federal assistance dollars to eligible child care centers for serving more nutritious meals. The amount of money our agency receives from this program is based on the income levels of our families. **In order to continue providing a quality meal service without additional charge, we request every family of our enrolled children to complete new a Household Size-Income Statement form (HSIS) each year. Please complete and return the attached HSIS form to our office. This information will be kept strictly confidential in our files.** Only one completed HSIS is required for all children in your household. Once we have properly approved your HSIS as eligible, our agency will receive the higher ("Free" or "Reduced-price") meal reimbursement rates for your enrolled children, for 12 months from the *Effective Month of Determination* regardless of any change in your household size and/or income or termination from Benefits Programs.

• You are not required to complete this HSIS if no one in your household receives benefits from FoodShare WI (the Supplemental Nutrition Assistance Program (SNAP)), FDPIR (Food Distribution Program on Indian Reservations), Wisconsin Works Cash Assistance Programs and your household income is higher than the amount shown for your household size within the table below. In this case, however, we would appreciate you returning the HSIS to us with "N/A" written on it along with your signature and date.

Determining Eligibility based on Participation in Benefits Programs → Complete Part 1 and Part 3 of HSIS form

Our agency receives the Free meal reimbursement rate for children in households receiving benefits from FoodShare WI, FDPIR, or WI Works Cash Assistance.

Wisconsin Works Cash Assistance is Wisconsin's Temporary Assistance for Needy Families (TANF) program. **It provides temporary cash assistance through work placement and training programs and IS NOT the WI Child Care Subsidy Program.** WI Works Cash Assistance Programs include Trial Employment Match Program (TEMP), Community Service Jobs (CSJ), W-2 Transitions (W-2T), Custodial Parent of an Infant (CMC), Minor Parents Services, Noncustodial Parents, and Pregnant Women.

You must include the following information on the HSIS (a-c) for eligibility based on receiving benefits from FoodShare WI, FDPIR, WI Works Cash Assistance:

- (a) The names of your enrolled children;
 - (b) Checked box for the benefit your household receives and its case number; &
 - (c) The signature of an adult member in the household & signature date
- DO NOT list case numbers for:
 - Medicaid, SSI, OR Wisconsin Child Care Subsidy program AND
 - DO NOT list a 16-digit Quest Card number (starts with 5077) for FoodShare WI

Determining Eligibility by Household Size and Income → Complete Part 2 and Part 3 of HSIS form

Household-Size Income Scale (Effective July 1, 2021 to June 30, 2022)

Household Size	Annual Income Level (at or below)
1	\$ 23,828
2	\$ 32,227
3	\$ 40,626
4	\$ 49,025
5	\$ 57,424
6	\$ 65,823
7	\$ 74,222
8	\$ 82,621
For each additional Household Member, add:	+\$ 8,399

If your household earns a total income that is less than or equal to the income levels listed within this table, we will receive higher meal reimbursement rates ("Free" or "Reduced-price" meal rate) for your children.

For determining eligibility based on your household size and income, you must include the following information on the HSIS (a-e):

- (a) Full names of all household members who share income and expenses, including children, parents, and non-related persons;
- (b) Income received by each household member identified by source of income and its pay frequency;
- (c) Total number of household members;
- (d) The signature of an adult member of the household and signature date; and
- (e) The last four digits of the social security number of the adult household member signing the HSIS or an indication he/she does not have a social security number.

• Disclosure of United States citizenship or immigration status is not required and is not a condition of eligibility for higher meal reimbursement rates.

Eligibilities of Foster, Runaway, Homeless, and Migrant Children, and Children enrolled in Head Start: Our agency will receive the Free meal reimbursement rates for foster, runaway, homeless, and migrant children and children enrolled in Head Start who reside in your household, when you provide the respective documentation listed below.

The respective documentation is required for these children to be eligible for Free Meals:

- Please note: These children's **eligibility for Free meals does not extend to other children in your household.**
- **Foster children:** Your completed HSIS with the 'Foster Child' box checked next to your foster children's names. When including them on your HSIS completed for your non-foster children, any income reported for your foster children must only be for their personal use. Your foster children will then be eligible at the "Free" meal rate. Your non-foster children's eligibilities will be based on the benefits or income information provided on your household's completed HSIS form.
- **Children Enrolled In Head Start:** Written certification of your child's Head Start enrollment eligibility period from the Head Start administering agency.
- **Runaway, Homeless, and Migrant Children:** Written certification of the child's status from an official of the appropriate Runaway and Homeless Youth Program, Migrant Education Program, or school official.

Use of Information Statement: The Richard B. Russell National School Lunch Act requires the information on this form. You are not required to provide this information, but if you do not, our agency cannot receive higher reimbursement rates for meals served to your children. You must include the last four digits of the social security number of the household member signing the form unless: the HSIS is only for your foster child(ren); you list a case number for receiving benefits from FoodShare WI, WI Works Cash Assistance, or FDPIR; or when the household member signing the HSIS checks "None" for not having a SS#.

Sharing Eligibility Information: Children's eligibility information may be shared in accordance with disclosure protection requirements without prior notification, with education, health, and nutrition programs to assess their eligibility for benefits. The law allows us to share your children's eligibility information with programs such as Medicaid or BadgerCare for ensuring their access to free or low cost health insurance, **unless you tell us not to.** This information may only be used for determining eligibility for their programs; if your children are eligible, they may contact you to offer their enrollment options. Please note that filling out this HSIS does not automatically enroll your children in these programs. **If you do not want your information to be shared with these programs, please notify us in writing. This notification will not change whether your children's meals are eligible for meal reimbursement.** Your eligibility information provided on the HSIS may also be shared with auditors for program reviews and law enforcement officials for the purpose of investigating violations of program rules.

In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, sex, disability, age, or reprisal or retaliation for prior civil rights activity in any program or activity conducted or funded by USDA. Persons with disabilities who require alternative means of communication for program information (e.g. Braille, large print, audiotape, American Sign Language, etc.), should contact the Agency (State or local) where they applied for benefits. Individuals who are deaf, hard of hearing or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English. To file a program complaint of discrimination, complete the [USDA Program Discrimination Complaint Form](http://www.ascr.usda.gov/complaint_filing_cust.html), (AD-3027) found online at: http://www.ascr.usda.gov/complaint_filing_cust.html, and at any USDA office, or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by: (1) Mail: U.S. Department of Agriculture, Office of the Assistant Secretary for Civil Rights, 1400 Independence Avenue, SW, Washington, D.C. 20250-9410; (2) Fax: (202) 690-7442; or (3) Email: program.intake@usda.gov. This institution is an equal opportunity provider.

Signature of Agency Representative



6435 Green Bay Road - Kenosha, WI - 53142 Phone (262) 942-4769 Fax (262) 942-4770

Ointment Consent Form

No Aerosol Allowed

Child Name: _____

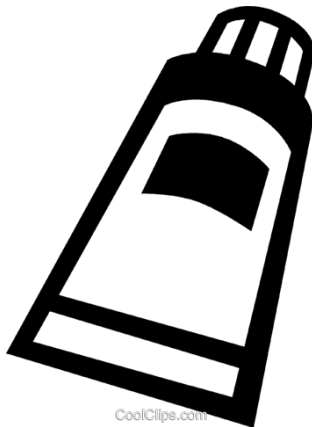
Name of Ointment/Lotion/Salve/Cream: _____

Written instructions (when to apply, where to apply, how much to use, etc.):

Parent Signature: _____

Date: _____

This consent expires 1 year after the date it was signed



CoolClips.com