



ENROLLMENT APPLICATION

205 Woodfield Ct, Groveland FL, 34736

Telephone: 352-655-1200

Lrodriguez.phca@gmail.com

STUDENT INFORMATION

CHILD'S NAME

First Last

Female Male

DATE OF APPLICATION: _____

DESIRED START DATE: _____

ACTUAL START DATE: _____

DATE OF BIRTH: _____

PROGRAM SELECTION

INFANT THROUGH 4 YEARS

FULL TIME (Monday to Friday)

- Infant 3 years old
- 1 year old 4 years old
- 2 years old

1 YEAR THROUGH 4 YEARS

PART TIME

- Monday, Wednesday, and Friday
- Tuesday and Thursday

VOLUNTARY PRE-K (VPK)

State funded hours (NO CHARGE)

- 3 Hours VPK (School Year)
- 6 Hours VPK (Summer Program)
- Extended Services

SCHOOL AGE

ELEMENTARY K-5

- Before and After School
- Before School
- After School
- Mascotte Charter | Groveland | Hope Prep Academy

FAMILY INFORMATION

Parent 1 – PRIMARY GUARDIAN NAME

First Last

Home Address: _____

City: _____ Zip code: _____

Place of Employment: _____

Last 4 digits of SSN: _____

Cell Phone: _____ Work phone: _____

Email Address: _____

Parent 2 – PRIMARY GUARDIAN NAME

First Last

Home Address: _____

City: _____ Zip code: _____

Place of Employment: _____

Last 4 digits of SSN: _____

Cell Phone: _____ Work phone: _____

Email Address: _____

MEDICAL INFORMATION

Child Allergies:

Physician's Name:

Special Medical Needs / Conditions:

Physician's Phone Number:

Prescribed Medication:

AUTHORIZATION FOR PICK UP AND EMERGENCY

Individuals authorized to pick up children must be at least 18 years of age and provide a valid photo ID

1. Name:

Relationship:

Authorized Pick Up

Contact in case of emergency

2. Name:

Relationship:

Authorized Pick Up

Contact in case of emergency

3. Name:

Relationship:

Authorized Pick Up

Contact in case of emergency

Cell Phone: _____

Work Phone: _____

Home Phone: _____

Cell Phone: _____

Work Phone: _____

Home Phone: _____

Cell Phone: _____

Work Phone: _____

Home Phone: _____

In accordance with State regulations, parents are responsible for escorting children into and out of the center. The child will be released only to the parent/ legal guardian and the persons listed above. The above-mentioned people will also be contacted and are authorized to remove the child from the facility in case of illness, accident, or emergency, if for some reason the parent/legal guardian cannot be reached. For the safety of your child, please keep the center informed as to changes in telephone numbers where you may be reached or any other contact information.

INITIALS:

Section 65C-22.006 of Florida Administrative Code requires a current physical examination (Form 3040) and immunization record (Form 680 or 681) within 30 days of enrollment.

INITIALS:

Section 402.3125(5) of Florida Statutes requires that parents receive a copy of the childcare facility brochure "KNOW YOUR CHILD CARE CENTER".

INITIALS:

Section 65C-22.006 of Florida Administrative Code requires that parents are notified in writing of the disciplinary practices used by the childcare facility.

INITIALS:

HOW DID YOU HEAR ABOUT US: Social Media Brochure Newspaper Friend Website

By signing below, you verify that you have received the above items and that all information on this Enrollment Application is complete and accurate.

SIGNATURE OF PARENT / GUARDIAN:

DATE:



Payment Policy

Enrollment Fees

There is an initial enrollment fee of \$80 per child or \$200 for three or more children. There is also a material fee of \$60 per child. Both fees are due at the time the enrollment application is submitted.

Re-Enrollment Fee

Re-enrollment fee will be charged annually. If your child's start date falls between May 31st and September, your annual re-enrollment fee for that year will be prorated.

Tuition Payment

TUITION IS DUE EACH FRIDAY FOR THE FOLLOWING WEEK.

*No discounts will be made for holidays or other days on which the facility is closed.

* Tuition is based on a weekly rate only.

*If Lake County Schools close due to inclement weather, we will be closed as well.

*Weekly tuition must be paid whether your child attends that week or not. _____ **Initial**

Late Payment

Tuition is considered late if not received at 6:00pm on a Business Day Monday.

- If payment is received after Monday at 6:00pm, a \$10 late fee will be added to the balance due.
- **If your tuition is not paid on Tuesday morning, your child will not be allowed to attend.**

Returned Checks

If your check returns for any reason, \$25 will be charged to your account. If checks returned more than twice, we would require that your account be paid cash only.

Payment Disputes

If Potter's Hands Christian Academy, is required to take legal action against a parent/guardian for non-payment, the parent/guardian will be responsible for any legal/attorney fees incurred by the Center.

Disenrollment

A minimum two-week written notice is required prior to disenrollment. You are responsible for payment for those two weeks whether the child attends or not.

Drop-Off Time

Morning cut-off for drop off is 9:00 am. You will have 3 warnings for tardiness. On the third tardy you will sign a form that you have reached your limit of tardies and will not be allowed to attend that day.

Late Pick-Up

After 6:00 pm there is a late pick-up fee of \$10 for the first ten minutes, and \$5 for every 5 minutes thereafter. **AS SOON AS YOU REALIZE THAT YOU WILL BE LATE, PLEASE CONTACT OUR OFFICE IMMEDIATELY.** If we do not hear from you by 7:30 pm and all attempts to contact you and your emergency contacts have failed, Potter's Hands Christian Academy will call the Groveland Police.

Sick/Vacation Policy

- After 6 months, if your child is out for the entire week due to sickness, you pay ½ tuition to reserve your child's space. After two weeks' absence, you pay full tuition for missed time.
- You receive 1 week vacation after every 6 months. Your child's vacation days can only be taken in the calendar (Monday-Friday).

Signature of Guardian: _____

Date: _____



Illness & Administrative Policy

In accordance with Florida law, we will not allow sick children in the Center including, but not limited to:

- Conjunctivitis
- Temperatures over 101 degrees
- Undetermined Rash or Spots
- Upset Stomach or Diarrhea
- Severe Headaches
- Severe Cold or Sore Throat

The child cannot be accepted back into the center until the child is well, has been without fever for 24 hours and has a written note from a physician, especially for rashes and spots. In the event your child has a communicable disease, a release form from a medical source is mandatory before the child returns to the center.

_____ Initial

Administrative Policies

- Parents/Guardians must present the following current State required **forms within 30 days of enrollment (excludes school-age children) and/or within 30 days from expiration date:**
 1. **DH Form 3040-Student Health Examination**
 2. **DH Form 680-Florida Certification of Immunization, Part A-1, B, or C**
- Parents agree to keep the center informed as to changes in telephone numbers, where you may be reached.
- In accordance with State regulations, parents are responsible for escorting child(ren)
- **Children CANNOT sign themselves in and out.**
- All food is provided by the Center. Breakfast ends at 9:00 am. Lunch and snack schedules are posted in each classroom. Parents are encouraged to provide cake for birthdays or snack foods for other celebrations, with advance notice to your child's teacher.
- Please remember, some children may have severe food allergies. Therefore, parents should never offer children food without express permission from the Center.
- Parent arrangements with staff member for after hours, off-premises care of their child, the staff member will undertake such services on his or her own behalf, and not as a member of Potter's Hands Christian Academy.
- Teachers may not transport children for off-premises care without completing an authorization form. Please see the front desk to obtain a copy of the form. If child(ren) are transported off-premises without authorization from the center, the parent and staff member will be held liable for actions taken.
- We reserve the right to disenroll any child for any reason at any time.

Signature of Guardian: _____

Date: _____



Permission for Food-Related Activities & Special Occasion Food Consumption

Pursuant to 65C-22(1) (c) 2. F.A.C., licensed childcare facilities must obtain written permission from parents/guardians regarding a child's participation in food-related activities. These activities include things such as: classroom cooking projects, gardening, school wide celebrations, and birthdays.

I _____ give/decline permission for my child _____ to participate in food related activities and special occasions wherein food is consumed.

Please provide the following information:

_____ My child DOES NOT have a food allergy or dietary restriction. He or she may participate in activities.

_____ My child DOES NOT have a food allergy or dietary restriction. He or she MAY NOT participate in activities.

_____ My child DOES have a food allergy or dietary restriction. He or she may participate in activities, but may not eat or handle the following items (please list below): _____

_____ My child DOES have a food allergy or dietary restriction. He or she MAY NOT participate in activities.

I understand that it is my responsibility to update this form if my decision for permission changes. I agree that this form will remain in effect during the term of my child's enrollment.

Parent/Guardian: _____

Date: _____



Disciplinary Practices

Our Discipline Policy follows the State of Florida Child Care Statutes; 402.305 Licensing Standards; Childcare Facilities, (12) Child Discipline:

(a) Minimum standards for child discipline practices shall ensure that age-appropriate, constructive disciplinary practices are used for children in care. Such standards shall include at least the following requirements:

1. Children shall not be subjected to discipline, which is severe, humiliating, or frightening.
2. Discipline shall not be associated with food, rest, or toileting.
3. Children may not be denied active play because of misbehavior.
4. Spanking or any other form of physical punishment is prohibited.

(b) Prior to admission of a child to a childcare facility, the facility shall notify the parents in writing of the disciplinary practices used by the facility.

At Potter's Hands Christian Academy, we believe that praise and positive reinforcement is the most effective behavior management of children. When children receive positive, nonviolent, and understanding interactions from adults, and others they develop good self-concept.

Encouraging Good Behavior

- Praise, Reward and give suitable attention.
- Listen to the children.
- Model appropriate behavior for children
- Reason with set limits
- Communicate with parents about the child(ren) good behavior.

Addressing Difficult Behavior

- Explain things to the children on their levels.
- Use "time out" for children more than 2 years old equal to 1 minute for every year of age. Children less than 2 will be distracted from another activity.
- Provide children with natural and logical consequences of their behavior.
- Stay consistent within the behavior of management program.
- Treat children as people and respect their needs, desire, and feelings.
- Children will not be denied active play because of misbehavior.

- The beginning years of any child's life are critical for building the early foundation of learning, health and wellness needed for success in school and later in life. During these years, children's brains are developing rapidly, influenced by the experiences, both positive and negative, that they share with their families, caregivers, teachers, peers, and in their communities for the rest of their lives, making it crucial that children's earliest truly foster – and never harm – their development. As such, expulsion, and suspension practices in early childhood settings, two stressful and negative experiences young children and their families may encounter in early childhood programs, should be prevented, severely limited, and nurture positive learning and development.

✓ Expulsion Policy

- Children are not permitted to hurt themselves or others. This includes both physically and emotionally harmful actions such as name calling or belittling friends. If a child is having difficulty making wise choices, the child will be directed. Children will not be denied active play because of misbehavior. Persistent behavioral issues will be discussed as a team with the parents and teachers so that we can work out a solution together.
- **Corporal Punishment of any kind will not be tolerated!!!**
- **If a student's behavior becomes uncontrollable a mis-conduct form will be filled out. If difficult behavior continues Administration will meet with the parents to see if we can agree on accommodations. If accommodations do not work or Administrative sees the behavior as out of our area, we will have to disenroll.**

Parent/Guardian

Date



Parent Release Form for Media Recording

I, the undersigned, do hereby grant or deny permission to Potter's Hands Christian Academy to use the image of my child, _____, as marked by my selection(s) below. Such includes the display distribution, publication, transmission, or otherwise use of photographs, images and/or video taken of my child for use in materials that include, but may not be limited to, printed materials such as brochures and newsletters, videos, and digital images such as those on the Potter's Hands Christian Academy's website.

_____ **Deny** permission to use my child's image at all.

***** Grant permission to use my child's image in the following ways (mark all that apply)**

_____ **Limited usage:** I want my child's image **WITHIN** the Potter's Hands Christian Academy setting only (not in larger community)

_____ **Unrestricted usage:** I give unrestricted permission for my child's image to be used in print, video, and digital media. I agree that these images may be used by Potter's Hands Christian Academy for a variety of purposes and that these images may be used without further notifying me. I do understand that the child's last name will not be used in conjunction with video or digital images.

Parent/Guardian Signature: _____

Date: _____



PARENT HANDBOOK

DISCLAIMER AND SIGNATURE

205 Woodfield Ct, Groveland FL, 34736
Telephone: (352) 655-1200
Lrodriguez.phca@gmail.com

I hereby acknowledge that, I have read and understood the Parent Handbook received and/or posted in the official website of Potter's Hands Christian Academy and understand that Potter's Hands Christian Academy has the right, without prior notice, to modify, amend or terminate policies, practices and other institutional programs within the limits and requirements imposed by law. I am aware of and in agreement with the policies contained in such documents, and hereby acknowledge that those policies apply to me and to my family.

STUDENT NAME:	AGE:
PRINT NAME OF PARENT/GUARDIAN:	
SIGNATURE OF PARENT/GUARDIAN:	DATE:

Sworn to and subscribed before me this _____ day of _____, 20_____.

My commission expires: _____

NOTARY PUBLIC, STATE OF FLORIDA

My signature, as Notary Public, verifies the affiant's identification has been validated by:



STUDENT ENROLLMENT CHECKLIST

STUDENT:	ENROLLMENT DATE:
DATE OF BIRTH:	PARENT/GUARDIAN:

DOCUMENTAION	RECEIVED	NOTES
1. Enrollment Application (returned signed to school)		
2. Original up-to date immunization form (bring to school)		
3. Original up-to date physical form (bring to school)		
4. Student Discipline Policy (returned signed to school)		
5. Parent Handbook Disclaimer (returned signed to school)		
6. Supplemental Information Sheet (completed/returned to school)		
7. Photo Gallery Policy (returned signed to school)		
8. Student Enrollment Checklist (returned signed to school)		
9. Food Program Application (completed/returned signed)		
10. Emergency Procedures Forms (completed / returned signed)		
11. Consent for Emergency Medical Treatment (returned signed)		
12. Influenza Virus signature page (completed / returned signed)		
13. Parent Handbook received		
14. Tuition and Program Information received YES		
15. "Know Your Child Care Facility" brochure received		
16. School Calendar received		
17. Parent Communication Form (Crisis/Disaster Handbook)		
18. Potter's Hands Christian Academy News received		
19. Teacher's Welcome Letter received		
20. "Influenza Virus Brochure" received		
VPK ADDITIONAL REQUIRED FORMS:		
21. State voucher forms (VPK only – bring to school)		
22. Parent Contract (VPK only – returned signed to school)		
23. VPK Attendance Policy received (VPK only)		
INFANT ADDITIONAL REQUIRED FORMS:		
24. Infant/Toddler Stroller Waiver (returned signed to school)		
25. Infant Feeding Form (Food Program) (returned signed)		
26. Infant Room Guidelines		

I hereby verify that I have turned in or received all the above materials and I agree with the policies and procedures of Potter's Hands Christian Academy.

PARENT/GUARDIAN SIGNATURE:	DIRECTOR SIGNATURE:
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