

**HOPE CHRISTIAN SCHOOL  
INFORMATION**

Hope Lutheran Church, 211 Elton-Adelphia Road, Freehold, N J 07728  
732-462-7545

**Thank you for choosing Hope Christian School!!!**

**PLEASE** make sure that these items are attached to the application at the time you submit the application. Applications will not be accepted if these items are not provided.

Which means that the following **must** accompany the application:

\_\_\_\_\_ \$35.00 Registration Fee

\_\_\_\_\_ Tuition – 10<sup>th</sup> Increment (non-refundable after July 1, 2018)

\_\_\_\_\_ Immunization Record - SIGNED by child's physician

*Not needed if currently enrolled*

\_\_\_\_\_ Photo Copy Birth Certificate - Not needed if currently enrolled

\_\_\_\_\_ Emergency Information Card (required & return with Application)

\_\_\_\_\_ Automatic Deduction Application (Preferred method of payment)

**PLEASE INITIAL THAT YOU HAVE READ THE FOLLOWING ENCLOSED ITEMS**

\_\_\_\_\_ **Child Release Policy**

\_\_\_\_\_ **Illness Policy**

\_\_\_\_\_ **Expulsion Policy**

\_\_\_\_\_ **Discipline Policy**

\_\_\_\_\_ **Social Media Policy**

\_\_\_\_\_ **Media Form**

\_\_\_\_\_  
(Signature required) Department of Children & Families Office of Licensing  
Information to Parents Letter

**Please initial and sign where required and return in the blue folder along with your application**

**Returning Students:**

***Being currently enrolled does not automatically place you – everyone needs to complete an application at this time.***

If you wish to enroll your child for the fall, **please** return the enclosed application **today, this week**, BUT **before JANUARY 19<sup>th</sup>**. After the 19<sup>th</sup>, applications will be accepted from families outside of our present enrollment.

***Applications will be processed in the order in which they are received.***

**The sooner, the better as the classes fill up fast!**

HOPE CHRISTIAN SCHOOL – 211 Elton-Adelphia Rd (Rte 524), Freehold, NJ 07728  
 732-462-7545 FAX # 732-462-9320 [www.hopechristianschoolfreehold.com](http://www.hopechristianschoolfreehold.com)

**Hope Christian Preschool Offers:**  
Before and After Care Available Monday thru Friday – 7:30 AM – 9:00 AM  
and 3:00 PM – 5:30 PM

**Mommy & Me Program**

\$100.00 per 10-week sessions (\$10.00 per session) \_\_\_\_\_

**School hours of operation: 9 AM to 3 PM**  
**offering full 9 to 3 or half day 9 to 11:30 or 12:30 to 3**

**2-2 ½ year old Program**

Please indicate 1<sup>st</sup> and 2<sup>nd</sup> choice of classes, (your first choice may not be available)

CHILD'S NAME _____		Choice 1 <sup>st</sup> , 2 <sup>nd</sup>
Mon thru Fri	full-day _____ half-day _____	_____
Mon., Wed., Fri.	full-day _____ half-day _____	_____
Tues., Thurs	full-day _____ half-day _____	_____

**3 year old Program**

Please indicate 1<sup>st</sup> and 2<sup>nd</sup> choice of classes, (your first choice may not be available).

CHILD'S NAME _____		Choice 1 <sup>st</sup> , 2 <sup>nd</sup>
Mon thru Fri	full-day _____ half-day _____	_____
Mon, Wed, Fri	full-day _____ half-day _____	_____
Tues, Thurs	full-day _____ half-day _____	_____

Please let us know if you would like afternoons only!

**4 year old Program**

Please indicate 1<sup>st</sup> and 2<sup>nd</sup> choice of classes, (your first choice may not be available).

CHILD'S NAME _____		Choice 1 <sup>st</sup> , 2 <sup>nd</sup>
Mon thru Fri	full-day _____ half-day _____	_____
Mon, Wed, Fri	full-day _____ half-day _____	_____

**Kindergarten – 5 year old Full-Day Program**

CHILD'S NAME \_\_\_\_\_

Mon thru Fri full-day 9:00 AM – 3:00 PM \_\_\_\_\_

**Electives – Full-Day students receive all electives**

**Lunch Bunch Program for all ages Monday thru Friday - 11:30 – 12:30**  
**Spanish – Library -- Spectacular Sports -- Kids In Kitchen/Cooking**  
**Hooked on Phonics**

**Requests for a specific class or teacher may not be able to be honored.**

It is understood that the child is enrolled for the entire school year and that this charge is due and payable in full at the time of acceptance of child for enrollment.

The **Annual payments** are broken into **ten increments** – you have paid the **10<sup>th</sup> increment** with this application. **The first increment is due on or before September 15<sup>th</sup> and each of the nine remaining increments are due on the 1<sup>st</sup> of each month and considered late after the 15<sup>th</sup>.** Nine remaining payments begin in September 2018 thru May 2019!

<b><u>Annual Fee</u></b>	<b><u>However</u></b> , as a matter of convenience, the tuition may be broken down into <b><u>ten equal payments</u></b> of:
\$4,200.00 for Kindergarten – five full-day sessions	\$420.00 for Kindergarten – five full day
\$5,200.00 for the five-day, full-day sessions	\$520.00 for the five full day
\$4,600.00 for the three-day, full-day sessions	\$460.00 for the three full day
\$3,700.00 for the five-day, half-day sessions	\$370.00 for the five half day
\$2,700.00 for the two-day, full-day sessions	\$270.00 for the two full day
\$2,400.00 for the three-day, half-day sessions	\$240.00 for the three half day
\$1,900.00 for the two-day, half-day sessions	\$190.00 for the two half day

**Tuition payment must be kept current.** Failure to do this could jeopardize the child’s continued enrollment and/or acceptance of future applications.

**No remission** of the charge is made in case of enforced withdrawal from the school or of voluntary withdrawal. Except that the school may in its discretion, modify the charge and remit any overpayment for a child whose enrollment is terminated by the school in accordance with the right reserved to it if such termination is for the best interest of the child and the school.

\*\*\*\*\*

Herein is enclosed a **non-refundable registration fee** of \$35.00, per year, payable to **HOPE LUTHERAN CHURCH**. This registration fee **plus the 10<sup>th</sup> increment** must accompany all applications. The second **registration fee** is waived if more than one child is enrolled.

*(The 10<sup>th</sup> increment payment is not refundable after July 1<sup>st</sup>, 2018.)  
(If child is enrolled after July 1st, the 10<sup>th</sup> increment is not refundable.)*

Please make ALL **checks** payable to **HOPE LUTHERAN CHURCH** and **PLEASE put child’s name and session on the check**). Please return all items enclosed with this application.

**Automatic Payment is the preferred method of payment.**

Under this program, you would authorize Hope Lutheran Church to automatically withdraw tuition payments from your account, which will remain in effect until you give advance notification to terminate the authorization. An enrollment form is included in this packet.

Do you have any special gifts or talents that you would like to share with the school? \_\_\_\_\_

**SIGNATURE REQUIRED**  
**OF PARENT OR GUARDIAN** \_\_\_\_\_

**DATE** \_\_\_\_\_

*The school reserves the right to cancel any session due to insufficient enrollment. You will be notified if the session you choose is cancelled and will let you know if your child is placed in another class if accommodations are available.*

<b>FOR OFFICE USE ONLY</b>
Date this document receive _____
Session _____

<b>FOR OFFICE USE ONLY PAYMENT</b>	<b>REG REC</b>	<b>10<sup>TH</sup> INC REC</b>	<b>SIBLING DISC NAME</b>	<b>AUTO PAYMENT APP</b>	<b>BEFORE/AFTER CARE</b>	<b>OTHER</b>
NAME _____	Ck# _____	Ck# _____				
DOB _____	Included in 10 <sup>th</sup> Increment _____					

**2018-2019 SCHOOL YEAR**

**School hours of Operation : 9:00 AM to 3:00 PM**  
**Offering full day 9:00 AM – 3:00 PM or half day 9:00 AM – 11:30 AM**  
**or 12:30 PM – 3:00 PM**

**INTERESTED IN BEFORE/AFTER CARE? \$7.00 PER HOUR**  
**BEFORE CARE begins @ 7:30 to 9:00 AM: TIME NEEDED \_\_\_\_\_**  
**AFTER CARE begins @ 3:00 to 5:30 PM: TIME NEEDED \_\_\_\_\_**

Do you presently have a child enrolled in our program now \_\_\_\_\_no \_\_\_\_\_yes

NOTE: Children 2 - 2 1/2 yr. old class (Diapers or Pull-ups are allowed)  
 Children must be 3 for 3 yr. old class by October 1<sup>st</sup> (must be completely toilet trained! No Pull-ups)  
 or 4 for 4 yr. old class by October 1<sup>st</sup> or 5 for Kindergarten

**APPLICATION FOR ADMISSION**

.....

Child's Name \_\_\_\_\_ (M F)  
 Last First Middle (circle one)  
 Date of Birth \_\_\_\_\_ (Age of Child as of October 1<sup>st</sup> \_\_\_\_\_)  
 Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_  
 E-mail address \_\_\_\_\_  
 Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

*It is your responsibility to notify the school of any change of address or phone number.*

Name of school district child will be attending after preschool \_\_\_\_\_  
 Are there any physical handicaps or learning disabilities? Yes \_\_\_\_\_ No \_\_\_\_\_  
 If yes, please explain \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Does the child have any major physical/medical concerns? Yes \_\_\_\_\_ No \_\_\_\_\_  
 Allergies? Yes \_\_\_\_\_ No \_\_\_\_\_  
 If yes, please explain \_\_\_\_\_  
 \_\_\_\_\_

**Family Record**

Name of Child's Father \_\_\_\_\_  
Last First Middle

Name of Child's Mother \_\_\_\_\_  
Last First Middle

Living with both parents Yes \_\_\_\_\_ No \_\_\_\_\_ If no, with whom \_\_\_\_\_

Name of person who will make payment,  
if different from parents' names \_\_\_\_\_

Father's Occupation \_\_\_\_\_

Employer \_\_\_\_\_

Address \_\_\_\_\_ Phone # \_\_\_\_\_

Mother's Occupation \_\_\_\_\_

Employer \_\_\_\_\_

Address \_\_\_\_\_ Phone # \_\_\_\_\_

**Brothers and Sisters**

<u>Name</u>	<u>age</u>	<u>Grade in School</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

**Church Affiliation:** \_\_\_\_\_

<u>Child's Doctor</u>	<u>NAME</u>	<u>ADDRESS</u>	<u>PHONE #</u>
_____	_____	_____	_____

In considering enrollment of your child, what aspects of our school appeal to you most?  
\_\_\_\_\_  
\_\_\_\_\_

Return completed application, immunization record, birth certificate and fees to the Church Office. Our FAX # (732) 462-9320 in case your doctor's office would like to fax your child's immunization information to our office.

The School/Building is "nut free". Please check the ingredients on all snacks carefully. Any item that may contain a trace of peanuts or tree nuts (manufactured or processed in a plant that contains nuts) is not allowed.

**Your signature is required on bottom of page 3!**

*Hope Christian School does not discriminate against applicants and students on the basis of race, color, and national or ethnic origin.*

**POLICIES**

**PLEASE KEEP FOR YOUR RECORDS**

**School hours of Operation : 9:00 AM to 3:00 PM**

**Offering full day 9:00 AM – 3:00 PM or half day 9:00 AM – 11:30 AM**

**or 12:30 PM – 3:00 PM *Before and After Care available***

1. Child must be 2 - 2 ½ yr. old class - (Diapers or Pull-ups are allowed)
2. Child must be 3 for 3 year-old class by October 1<sup>st</sup> (must be completely toilet trained! No Pull-ups!) (or 4 for 4 year-old class by October 1<sup>st</sup> and 5 for the Kindergarten program).
3. Changes to a child’s time/day, or class may not be possible.
4. The \$35.00 registration fee is non-refundable. The second registration fee is waived if more than one child is enrolled.
5. The 10<sup>th</sup> increment, (payment made with application), is not refundable after July 1<sup>st</sup> 2018.  
(If child is enrolled after July 1, 2018, the registration fee and tuition is not refundable.)
6. The first increment (tuition) is due on or before September 15<sup>th</sup> and each successive increment is due on the 1<sup>st</sup> and is considered late if received after the 15<sup>th</sup> of that month thru May 15, 2019. Tuition payment must be kept current. Failure to do this could jeopardize the child’s continued enrollment and/or acceptance of future applications. The 10<sup>th</sup> increment is due at the time of registration. This advance payment is held and applied to your child’s last increment (tuition) payment. There are nine remaining payments September 2018 thru May 2019.

Annual Fee	However, as a matter of convenience, the tuition may be broken down into ten equal payments of:
\$4,200.00 for Kindergarten – five full-day sessions	\$420.00 for Kindergarten – five full day
\$5,200.00 for the five-day, full-day sessions	\$520.00 for the five full day
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\$2,400.00 for the three-day, half-day sessions	\$240.00 for the three half day
\$1,900.00 for the two-day, half-day sessions	\$190.00 for the two half day

8. No remission of the charge is made in case of enforced withdrawal from the school or of voluntary withdrawal, except that the school, may in its discretion, modify the charge and remit any overpayment for a child whose enrollment is terminated by the school in accordance with the right reserved to it if such termination is for the best interest of the child and the school.
9. The school reserves the right to cancel any session due to insufficient enrollment. You will be notified if the session you choose is cancelled and let you know if your child is placed in another class if accommodations are available.
10. Requests for a specific class or teacher may not be able to be honored.
11. All applications are processed in the order in which they are received.
12. It is your responsibility to notify the school of any change of address or phone number.
13. A payment book is supplied or Automatic Payment is **our preferred method of payment**. Through this program, you would authorize **Hope Lutheran Church** to automatically withdraw tuition payments from your account, which will remain in effect until you give advance notification to terminate the authorization. The form is included in your enrollment packet.
14. The School/Building is “nut free”. Please check the ingredients on all snacks carefully. Any item that may contain a trace of peanut or tree nut (manufactured or processed in a plant that contains nuts) is not allowed.

TEL # 732-462-7545

FAX # 732-462-9320

www.hopechristianschoolfreehold.com

Please make checks payable to **HOPE LUTHERAN CHURCH**

**Department of Children and Families  
Office of Licensing  
INFORMATION TO PARENTS**

Under provisions of the Manual of Requirements for Child Care Centers (N.J.A.C. 10:122), every licensed child care center in New Jersey must provide to parents of enrolled children written information on parent visitation rights, State licensing requirements, child abuse/neglect reporting requirements and other child care matters. The center must comply with this requirement by reproducing and distributing to parents this written statement, prepared by the Office of Licensing, Child Care & Youth Residential Licensing, in the Department of Children and Families. In keeping with this requirement, the center must secure every parent's signature attesting to his/her receipt of the information.

\* \* \* \* \*

Our center is required by the State Child Care Center Licensing law to be licensed by the Office of Licensing (OOL), Child Care & Youth Residential Licensing, in the Department of Children and Families (DCF). A copy of our current license must be posted in a prominent location at our center. Look for it when you're in the center.

To be licensed, our center must comply with the Manual of Requirements for Child Care Centers (the official licensing regulations). The regulations cover such areas as: physical environment/life-safety; staff qualifications, supervision, and staff/child ratios; program activities and equipment; health, food and nutrition; rest and sleep requirements; parent/community participation; administrative and record keeping requirements; and others.

Our center must have on the premises a copy of the Manual of Requirements for Child Care Centers and make it available to interested parents for review. If you would like to review our copy, just ask any staff member. Parents may view a copy of the Manual of Requirements on the DCF website at [www.state.nj.us/dcf/providers/licensing/laws/index.html](http://www.state.nj.us/dcf/providers/licensing/laws/index.html) or obtain a copy by sending a check or money order for \$5 made payable to the "Treasurer, State of New Jersey", and mailing it to: NJDCF, Office of Licensing, Publication Fees, PO Box 657, Trenton, NJ 08646-0657.

We encourage parents to discuss with us any questions or concerns about the policies and program of the center or the meaning, application or alleged violations of the Manual of Requirements for Child Care Centers. We will be happy to arrange a convenient opportunity for you to review and discuss these matters with us. If you suspect our center may be in violation of licensing requirements, you are entitled to report them to the Office of Licensing toll free at 1 (877) 667-9845. Of course, we would appreciate your bringing these concerns to our attention too.

Our center must have a policy concerning the release of children to parents or people authorized by parents to be responsible for the child. Please discuss with us your plans for your child's departure from the center.

Our center must have a policy about administering medicine and health care procedures and the management of communicable diseases. Please talk to us about these policies so we can work together to keep our children healthy.

Our center must have a policy concerning the expulsion of children from enrollment at the center. Please review this policy so we can work together to keep your child in our center.

Parents are entitled to review the center's copy of the OOL's Inspection/Violation Reports on the center, which are issued after every State licensing inspection of our center. If there is a licensing complaint investigation, you are also entitled to review the OOL's Complaint Investigation Summary Report, as well as any letters of enforcement or other actions taken against the center during the current licensing period. Let us know if you wish to review them and we will make them available for your review.

Our center must cooperate with all DCF inspections/investigations. DCF staff may interview both staff members and children.

Our center must post its written statement of philosophy on child discipline in a prominent location and make a copy of it available to parents upon request. We encourage you to review it and to discuss with us any questions you may have about it.

Our center must post a listing or diagram of those rooms and areas approved by the OOL for the children's use. Please talk to us if you have any questions about the center's space.

Our center must offer parents of enrolled children ample opportunity to assist the center in complying with licensing requirements; and to participate in and observe the activities of the center. Parents wishing to participate in the activities or operations of the center should discuss their interest with the center director, who can advise them of what opportunities are available.

Parents of enrolled children may visit our center at any time without having to secure prior approval from the director or any staff member. Please feel free to do so when you can. We welcome visits from our parents.

Our center must inform parents in advance of every field trip, outing, or special event away from the center, and must obtain prior written consent from parents before taking a child on each such trip.

Our center is required to provide reasonable accommodations for children and/or parents with disabilities and to comply with the New Jersey Law Against Discrimination (LAD), P.L. 1945, c. 169 (N.J.S.A. 10:5-1 et seq.), and the Americans with Disabilities Act (ADA), P.L. 101-336 (42 U.S.C. 12101 et seq.). Anyone who believes the center is not in compliance with these laws may contact the Division on Civil Rights in the New Jersey Department of Law and Public Safety for information about filing an LAD claim at (609) 292-4605 (TTY users may dial 711 to reach the New Jersey Relay Operator and ask for (609) 292-7701), or may contact the United States Department of Justice for information about filing an ADA claim at (800) 514-0301 (voice) or (800) 514-0383 (TTY).

Our center is required, at least annually, to review the Consumer Product Safety Commission (CPSC), unsafe children's products list, ensure that items on the list are not at the center, and make the list accessible to staff and parents and/or provide parents with the CPSC website at [www.cpsc.gov/cpsc.gov/cpscpub/prerel/prerel.html](http://www.cpsc.gov/cpsc.gov/cpscpub/prerel/prerel.html). Internet access may be available at your local library. For more information call the CPSC at (800) 638-2772.

Anyone who has reasonable cause to believe that an enrolled child has been or is being subjected to any form of hitting, corporal punishment, abusive language, ridicule, harsh, humiliating or frightening treatment, or any other kind of child abuse, neglect, or exploitation by any adult, whether working at the center or not, is required by State law to report the concern immediately to the State Central Registry Hotline, toll free at (877) NJ ABUSE/ (877) 652-2873. Such reports may be made anonymously. Parents may secure information about child abuse and neglect by contacting: DCF, Office of Communications and Legislation at (609) 292-0422 or go to [www.state.nj.us/dcf/](http://www.state.nj.us/dcf/) and select Publications.

cc 2018-2019 school year



updated 2017

# Hope Christian School

## Child Care Discipline Policy

### Policy Statement

Praise and positive reinforcement are effective methods of behavior management of children. When children receive positive, nonviolent, and understanding interactions from adults and others, they develop good self-concepts, problem solving abilities, and self-discipline. Based on this belief, **Hope Christian School** uses a positive approach to discipline and practices the following discipline and behavior management techniques.

### WE DO

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

### WE DO NOT

- ◆ Inflict corporal punishment in any manner upon a child. (Corporal punishment is defined as the use of physical force to the body as a discipline measure. Physical force to the body includes, but is not limited to, spanking, hitting, shaking, biting, pinching, pushing, pulling, or slapping.)
- ◆ Use any strategy that hurts, shames, or belittles a child.
- ◆ Use any strategy that threatens, intimidates, or forces a child.
- ◆ Use food as a form of reward or punishment.
- ◆ Use or withhold physical activity as a punishment.

Hope Christian School  
Media Release Form  
School Year 2018-2019



Please check one of the following choices:

\_\_\_\_\_ **I give my permission** for Hope Christian School to use my child's photographs and images for use in and around the school, in the end of the year Memory DVD, on our website and on HCS private Facebook page. I understand that personal identifying factors such as names **will not** be used.

\_\_\_\_\_ **I do not give permission** for Hope Christian School to use my child's photographs and images. I understand that my child may be removed from any situation or event in which photographs are being taken for the above-mentioned purposes.

Child's Name \_\_\_\_\_

Parent's Signature \_\_\_\_\_

Date \_\_\_\_\_

**Social Media Policy**

Hope Christian School aims to ensure that our school, students, educators and families are not compromised in any form of social networking or related website. However, we acknowledge that social media can play an important role in maintaining communication with and engaging with our HCS families. Hope Christian School Facebook page is used as an additional means of communication between our school and the families we service. The following conditions are put in place to ensure the privacy, dignity and rights of the preschool, students, staff and families.

HCS Facebook page will maintain the highest possible privacy settings and accept only recognizable friends and families as friends on their page.

All users (people accessing our page) interacting with the Hope Christian School Facebook page, must do so by using a Facebook account that clearly identifies them by their real name. No unidentified users will be permitted access to our Facebook page.

No children's names or identifying factors will appear on our Facebook page.

No staff member may post images of the children enrolled in our school on their personal social media.

Staff is prohibited from engaging in discussions directly regarding HCS on social media.

Parents may only post images of their own children on social media without express permission.

Please be aware that although HCS will provide all safeguards possible complete privacy can never be guaranteed when using social media.

### Hope Christian School Child Release Policy 2018-2019

In an effort to increase safety for your child, we require that all parents/guardians fill out the child release form. This policy goes into effect starting on the first day of school for each child and continues throughout the school year. Until our staff members are able to recognize you and the people who will be picking up your child, a staff member will ask you for picture identification, which will be cross referenced with the information submitted on this form. This is the only way that we can be certain that we are releasing your child to the appropriate individual(s). The staff will not release a child to anyone not listed on this release consent form, which is signed by the child's parent or guardian at the time of registration. Any changes to this list must be made in writing and submitted to the office. Your child will not be released to anyone not listed on your release form without written permission. A note may be sent in with your child on the day that a new individual will be picking them up. Please advise anyone picking up your child of this policy and our photo identification requirement. \*\*\*\*\*Please remember to include yourself in the list of individuals when you complete this form\*\*\*\*\*

CHILD'S NAME: Please provide a list of the people you wish to have permission to pick up:

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_

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### Hope Christian School Illness Policy 2018-2019

Hope Christian School serves well children and shall not permit a child who has any of the illnesses or symptoms listed below to be admitted to the school or to stay in school shall the illness begin after arrival. We will strictly enforce this policy for the well-being of all the children and staff at Hope Christian School.

The symptoms and illnesses shall include, but not be limited to, any of the following:

- Fever over 100 degrees
- Two or more episodes of diarrhea
- Severe pain or discomfort
- Vomiting
- Red eyes with discharge
- Lethargy that is more than expected tiredness
- Unexplained skin rash or skin lesions
- Infected, untreated skin patches
- Difficulty breathing or severe coughing
- Mouth sores

If a child who has been admitted to the school manifests any of the above illnesses or symptoms, he or she will be removed from class and parent/guardian will be called for immediate pickup.

The child must be symptom free for 24 hours before returning to school and in some cases, may require a doctor's note upon return.

Parent Signature \_\_\_\_\_

Date \_\_\_\_\_

## Hope Christian School Expulsion Policy 2018-2019

Unfortunately, there are sometimes reasons we have to expel a child from our program either on a short term or permanent basis. We want you to know that we will do everything possible to work with the family of the child(ren) to prevent this policy from being enforced. The following are reasons we may have to expel or suspend a child from this center:

### Immediate Causes for Expulsion

- The child is at risk of causing serious injury to other children or him/herself.
- Parent threatens physical or intimidating actions towards staff members.
- Parents exhibits verbal abuse to staff in front of enrolled children.

### Parental Actions for Child's Expulsion

- Failure to pay/habitual lateness in payments.
- Failure to complete required forms including the child's immunization records.
- Habitual tardiness when picking up your child. Verbal abuse to staff.

### Child's Actions for Expulsion

- Failure of child to adjust after a reasonable amount of time.
- Uncontrollable tantrums/angry outbursts.
- Ongoing physical or verbal abuse to staff or other children.
- Excessive biting.

Prior to expulsion, a parent will be called and correspondence will be sent home indicating what the problem is, and every effort will be made by both the center and the parent to correct the problem. If, after one or two weeks, depending on the risk to other children's welfare or safety, behavior does not improve, and the center finds that they can no longer accommodate the child, the parent will be asked to remove him/her. The parent will be given a minimum of one week's notice to find another center to provide care for this child.

Staff Signature \_\_\_\_\_

Parent Signature \_\_\_\_\_

Date \_\_\_\_\_

**Automatic Deduction Enrollment & Authorization Form**  
*Please supply a voided check for routing #'s & Account #*

Last Name \_\_\_\_\_ First Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

Home Phone # \_\_\_\_\_ Email \_\_\_\_\_

Students Name \_\_\_\_\_

Tuition (monthly) \_\_\_\_\_ Start Date \_\_\_\_\_

Date of Last Payment \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_