

Required Forms:

- _____ Application
- _____ Program Agreement Form (Daycare/ Afterschool)
- _____ Health Care Provider Form
- _____ Emergency Medical Authorization
- _____ Information to Parents Document
- _____ Policy on the Release of Children
- _____ Positive Guidance and Discipline Policy
- _____ Policy on Methods of Parental Notification
- _____ Policy on Communicable Disease Management
- _____ Expulsion Policy
- _____ Policy on the Use of Technology and Social Media
- _____ Medical Form
- _____ Immunization Form
- _____ COVID-19 Health and Safety Requirements
- _____ COVID Waiver and Release of Liability

Additional Comments: _____



PRESCHOOL ADMISSION APPLICATION

CHILD'S NAME:	
SEX:	
DATE OF BIRTH:	
TOILET TRAINED:	Please circle: YES NO

SCHEDULED START DATE:	
DEPOSIT AMOUNT:	
FORM OF DEPOSIT:	Please circle: CASH CHECK #: _____ CREDIT CARD

	Parent	Parent
Name:		
Home Address:		
City, State, Zip code:		
Phone #:		
Cell #:		
***Email:		
*Emergency pick up Name/Information:		
Phone #:		

***In case of emergency, the above individual is authorized by the parent(s) to pick up child. The authorized individual MUST show I.D. prior to child being released.**

Medical / Allergy Information:

List all Allergies below:	List any pertinent medical condition(s):

Does your child have any specific needs that we need to know about?

How did you learn about Steps To Success?

As a cooperative day care center, Steps To Success relies and respects parent involvement. How do you see yourself involved in our school?

Please list the 3 most important qualities you look for in a day care center:

- 1.
- 2.
- 3.

Parent's signature	Date
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Steps To Success Program Agreement Form

I, _____, parent/guardian of _____, agree to pay \$ _____ for my child's attendance at Steps To Success Daycare facility. *** I also understand that any deposits given to secure my child(ren)'s seat is non-refundable unless a 3 month notice prior to the start date is provided to Steps To Success. Furthermore, should I decide to postpone my child's start date, I understand and acknowledge that a onetime allowance is permitted for a postponement and should we decide not to attend after the postponement is granted, our deposit is relinquished immediately as the 3 month notice policy will NOT apply (the 3 month refund policy ONLY applies to the initial start date selected).

Payment is due by the 5th of each month or I am liable for \$30.00 late fee. I understand that my child is permitted ONE (1) Vacation Week Credit (vacation time is considered 5 consecutive days and MAY include when Steps to Success is closed and non-operational for holidays or emergency closures) per year at no charge to me. In furtherance, I understand that my child is entitled to TWO (2) Sick Week Credits (5 consecutive school/OPERATIONAL days) per year for which I will be responsible for 50% of the tuition for that week ONLY. My year commences from the date that my child begins attending Steps to Success and will be construed as my official enrollment. I am aware that I may NOT rollover any unused sick / vacation days/credits into the following attending year. I am also aware that any credit for vacation or sick time is limited to ONLY ONE (1) week maximum per month. Sick / Vacation time is considered 5 consecutive days when Steps To Success is open and operational; hence, this excludes emergency closures. I am also aware that any credit for vacation or sick time is limited to ONLY ONE (1) week maximum per month. Please note, if you are vacationing in a "high risk COVID country," you MUST quarantine for 2 weeks upon your return. However, you will only receive a ONE (1) week credit as per this agreement providing that you still have a credit owed to you. No additional vacation credits will be applied.

Furthermore, if we are closed due to weather related conditions or events that are out of our control (i.e.: no electricity/heat, storm related disasters, floods) we are not liable and full tuition will be applied for that particular month ONLY. If we are closed due to any of the following unforeseen events below, in the first 5 days of closure, there will be no credit applied towards that month's tuition payment. In addition, we will ONLY provide credit for 50% of the remaining tuition paid for said month beyond the first 5 days. If we are closed beyond that month, you will not be required to pay tuition until our centers re-open:

1. Government forced shutdown
2. Department of Health Mandated Quarantine due to COVID cases
3. Pandemics
4. Force Majeure

In addition, it is our policy that if you remove your child for a given month(s) you are responsible for half of the month's tuition in order to hold your child's seat. The maximum amount of days your child is permitted to attend within the month that you have notified management of non-attendance is five (5). If you go beyond the five permissible days, you will be responsible for the entire month's tuition less any applicable vacation/sick credits that you may have available and have not exhausted in the last 12 months. If your child is out for 2 consecutive weeks and we are unable to reach you and/or you have not contacted us, your child's seat is subject to being forfeited.

Finally, Steps To Success LLC, and its agents reserve the right to terminate admission into said Day Care Facility if instances arise that can potentially be harmful or threatening to children attending the facility and/or staff/management performing their duties. Moreover, should a parent/guardian of an attending child constitute a threat, either mental or physical to any of the employees, management, or a child attending said Day Care Facility, management reserves the right to preclude admission. Additionally, in the event that your child requires special needs care that we will unfortunately be unable and/or qualified to provide and once we have exhausted alloptions at our Center, for the betterment of your child's care and development, we will terminate services and assist in any way possible in finding alternate care.

*PRICES ARE SUBJECT TO CHANGE

Parent/Guardian Signature

Staff Signature

Date

NEW YORK STATE
OFFICE OF CHILDREN AND FAMILY SERVICES

DAY CARE REGISTRATION

**PHOTO OF CHILD
(Optional)**

Child's Full Name: _____

Does your child have any allergies? Yes No
If Yes, what is your child allergic to? _____

Children who have special health care needs are those who have chronic physical, developmental, behavioral or emotional conditions expected to last 12 months or more and who also require health and related services of a type beyond that required by children generally. If your child does have special health care needs please discuss these with your child-care provider.

Child's Source of Medical Care/Primary Care Physician's Name: _____

Telephone Number: _____

Child's Source of Dental Care/Dentist's Name: _____

Telephone Number: _____

Name Of Medical Care Facility/Hospital: _____

Telephone Number: _____

Would you like information on Child Health Plus? Yes No

EMERGENCY DATA	RELATIONSHIP	CONTACT NAME	TELEPHONE NUMBER DURING CHILD CARE	OTHER TELEPHONE NUMBER (Check type)
				<input type="checkbox"/> Pager <input type="checkbox"/> Cell <input type="checkbox"/> Other
				<input type="checkbox"/> Pager <input type="checkbox"/> Cell <input type="checkbox"/> Other
				<input type="checkbox"/> Pager <input type="checkbox"/> Cell <input type="checkbox"/> Other
				<input type="checkbox"/> Pager <input type="checkbox"/> Cell <input type="checkbox"/> Other

CHILD'S FULL NAME:		SEX: Male Female
CHILD'S HOME ADDRESS:		DATE OF BIRTH:
		HOME TELEPHONE NUMBER:
DATE OF ACCEPTANCE:	DATE OF DISCHARGE:	
NAME OF PERSON APPLYING FOR CHILD:	<input type="checkbox"/> Parent	<input type="checkbox"/> Guardian
	<input type="checkbox"/> Caretaker	<input type="checkbox"/> Relative
	<input type="checkbox"/> Other _____	HOME TELEPHONE NUMBER:
		DAYTIME TELEPHONE NUMBER:
ADDRESS OF PERSON LISTED ABOVE: (IF DIFFERENT FROM CHILD'S):		
<p>AGREEMENTS</p> <p>I consent to the enrollment of the child listed above in this facility and have been advised of the policies regarding administration of medications, fees, transportation and the services provided by the facility, and the Office of Children and Family Services regulations under which it operates.</p> <p>I give consent for my child to take part in neighborhood trips (i.e. library, park and playground) away from the facility under proper supervision. <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>In case of accident or injury, I authorize any and all emergency medical, dental, and /or surgical care and hospitalization advised by the physicians, surgeon or hospital (listed on the other side of this card) necessary for the proper health and well-being of my child. <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>I have provided information on my child's special needs (Allergies, Diet, Disabilities, and /or Medical Information) to the provider, as may be necessary to assist the facility in properly caring for my child in case of an emergency. <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>I agree to review and update this information whenever a change occurs and at least once every six months. <input type="checkbox"/> Yes <input type="checkbox"/> No</p>		
SIGNATURE – PARENT OR PERSON(S) LEGALLY RESPONSIBLE		DATE:

**PARENT
RECEIPT OF INFORMATION:**

- Information to Parents Document
- Policy on the Release of Children
- Positive Guidance and Discipline Policy
- Policy on Methods of Parental Notification
- Policy on Communicable Disease Management
- Expulsion Policy
- Policy on the Use of Technology and Social Media

I have read and received a copy of the information/policies listed above.

Child(ren)'s Name:

Parent/Guardian's Name:

Signature

Date

Department of Children and Families
Office of Licensing
INFORMATION TO PARENTS

Under provisions of the *Manual of Requirements for Child Care Centers (N.J.A.C. 3A:52)*, every licensed child care center in New Jersey must provide to parents of enrolled children written information on parent visitation rights, State licensing requirements, child abuse/neglect reporting requirements and other child care matters. The center must comply with this requirement by reproducing and distributing to parents and staff this written statement, prepared by the Office of Licensing, Child Care & Youth Residential Licensing, in the Department of Children and Families. In keeping with this requirement, the center must secure every parent and staff member's signature attesting to his/her receipt of the information.

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

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

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

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

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

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

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

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

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

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

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

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

Parents of enrolled children may visit our center at any time without having to secure prior approval from the director or any staff member. Please feel free to do so when you can. We welcome visits from our parents. Our center must inform parents in advance of every field trip, outing, or special event away from the center, and must obtain prior written consent from parents before taking a child on each such trip.

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

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

Anyone who has reasonable cause to believe that an enrolled child has been or is being subjected to any form of hitting, corporal punishment, abusive language, ridicule, harsh, humiliating or frightening treatment, or any other kind of child abuse, neglect, or exploitation by any adult, whether working at the center or not, is required by State law to report the concern immediately to the *State Central Registry Hotline, toll free at (877) NJ ABUSE/(877) 652-2873*. Such reports may be made anonymously. 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/.

Signature X

Date:

POLICY ON THE RELEASE OF CHILDREN

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

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

If the parent(s) or person(s) authorized by the parent(s) fails to pick up a child at the time of the center's daily closing, the center shall ensure that:

1. The child is supervised at all times;
2. Staff members attempt to contact the parent(s) or person(s) authorized by the parent(s); and
3. An hour or more after closing time, and provided that other arrangements for releasing the child to his/her parent(s) or person(s) authorized by the parent(s), have failed and the staff member(s) cannot continue to supervise the child at the center, the staff member shall call the *24-hour State Central Registry Hotline 1-877-NJ-ABUSE (1-877-652-2873)* to seek assistance in caring for the child until the parent(s) or person(s) authorized by the child's parent(s) is able to pick-up the child.

If the parent(s) or person(s) authorized by the parent(s) appears to be physically and/or emotionally impaired to the extent that, in the judgment of the director and/or staff member, the child would be placed at risk of harm if released to such an individual, the center shall ensure that:

1. The child may not be released to such an impaired individual;
2. Staff members attempt to contact the child's other parent or an alternative person(s) authorized by the parent(s); and
3. If the center is unable to make alternative arrangements, a staff member shall call the *24-hour State Central Registry Hotline 1-877-NJ-ABUSE (1-877-652-2873)* to seek assistance in caring for the child.

For school-age child care programs, no child shall be released from the program unsupervised except upon written instruction from the child's parent(s).

Steps to Success VIII

GUIDELINES FOR POSITIVE DISCIPLINE

Positive discipline is a process of teaching children how to behave appropriately. Positive discipline respects the rights of the individual child, the group, and the adult. Methods of positive discipline shall be consistent with the age and developmental needs of the children, and lead to the ability to develop and maintain self-control.

Positive discipline is different from punishment. Punishment tells children what they should not do; positive discipline tells children what they should do. Punishment teaches fear; positive discipline teaches self-esteem.

You can use positive discipline by planning ahead:

- Anticipate and eliminate potential problems.
- Have a few consistent, clear rules that are explained to children and understood by adults.
- Have a well-planned daily schedule.
- Plan for ample elements of fun and humor.
- Include some group decision-making.
- Provide time and space for each child to be alone.
- Make it possible for each child to feel he/she has had some positive impact on the group.
- Provide the structure and support children need to resolve their differences.
- Share ownership and responsibility with the children. Talk about our room, our toys.

You can use positive discipline by intervening when necessary:

- Re-direct to a new activity to change the focus of a child's behavior.
- Provide individualized attention to help the child deal with a particular situation.
- Use time-out -- by removing a child for a few minutes from the area or activity so that he/she may gain self-control. (One minute for each year of the child's age is a good rule of thumb).
- Divert the child and remove from the area of conflict.
- Provide alternative activities and acceptable ways to release feelings.
- Point out natural or logical consequences of children's behavior.
- Offer a choice only if there are two acceptable options.
- Criticize the behavior, not the child. Don't say "bad boy" or "bad girl." Instead you might say "That is not allowed here."

You can use positive discipline by showing love and encouragement:

- Catch the child being good. Respond to and reinforce positive behavior; acknowledge or praise to let the child know you approve of what he/she is doing.
- Provide positive reinforcement through rewards for good behavior.
- Use encouragement rather than competition, comparison or criticism.
- Overlook small annoyances, and deliberately ignore provocations.
- Give hugs and caring to every child every day.
- Appreciate the child's point of view.
- Be loving, but don't confuse loving with license.

Positive discipline is NOT:

- Disciplining a child for failing to eat or sleep or for soiling themselves
- Hitting, shaking, or any other form of corporal punishment
- Using abusive language, ridicule, harsh, humiliating or frightening treatment or any other form of emotional punishment of children
- Engaging in or inflicting any form of child abuse and/or neglect
- Withholding food, emotional responses, stimulation, or opportunities for rest or sleep
- Requiring a child to remain silent or inactive for an inappropriately long period of time

Positive discipline takes time, patience, repetition and the willingness to change the way you deal with children. But it's worth it, because positive discipline works.



Parent Notification Policy

Should your child become ill or injured at the center, Steps to Success VIII will contact a parent or guardian directly via phone call. All parents/guardians must have an active number on file where he/she can be reached during the center's operational hours: 7:00am to 7:00pm. Steps to Success may also call a parent/guardian to provide information pertaining to the center or the child.

Steps to Success VIII sends daily, weekly and monthly communications via email. This includes but not limited to important center information/policies, changes in schedules and updates on a child.

Valid mailing address are required should we need to send documents or letters than cannot be sent via email.

Signature

Date

Steps to Success VIII

Policy on the Management of Communicable Diseases

If a child exhibits any of the following symptoms, the child should not attend the center. If such symptoms occur at the center, the child will be removed from the group, and parents will be called to take the child home.

- Severe pain or discomfort
- Acute diarrhea
- Episodes of acute vomiting
- Elevated oral temperature of 101.5 degrees Fahrenheit
- Lethargy
- Severe coughing
- Yellow eyes or jaundiced skin
- Red eyes with discharge
- Infected, untreated skin patches
- Difficult or rapid breathing
- Skin rashes in conjunction with fever or behavior changes
- Skin lesions that are weeping or bleeding
- Mouth sores with drooling
- Stiff neck

Once the child is symptom-free, or has a health care provider's note stating that the child no longer poses a serious health risk to himself/herself or others, the child may return to the center unless contraindicated by local health department or Department of Health.

EXCLUDABLE COMMUNICABLE DISEASES

A child or staff member who contracts an excludable communicable disease may not return to the center without a health care provider's note stating that the child presents no risk to himself/herself or others.

Note: If a child has chicken pox, a note from the parent stating that all sores have dried and crusted is required.

If a child is exposed to any excludable disease at the center, parents will be notified in writing.

COMMUNICABLE DISEASE REPORTING GUIDELINES

Some excludable communicable diseases must be reported to the health department by the center. The Department of Health's Reporting Requirements for Communicable Diseases and Work-Related Conditions Quick Reference Guide, a complete list of reportable excludable communicable diseases, can be found at:

http://www.nj.gov/health/cd/documents/reportable_disease_magnet.pdf.

EXPULSION POLICY

NAME OF CENTER: Steps to Success VIII

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 we will do everything possible to work with the family of the child(ren) in order 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 himself/herself.
- Parent threatens physical or intimidating actions toward staff members.
- Parent 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.
- Other (explain)

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.
- Other (explain)

SCHEDULE OF EXPULSION:

If after the remedial actions above have not worked, the child's parent/guardian will be advised verbally and in writing about the child's or parent's behavior warranting an expulsion. An expulsion action is meant to be a period of time so that the parent/ guardian may work on the child's behavior or to come to an agreement with the center. The parent/guardian will be informed regarding the length of the expulsion period and the expected behavioral changes required in order for the child or parent to return to the center. The parent/guardian will be given a specific expulsion date that allows the parent sufficient time to seek alternate child care (approximately one to two weeks' notice depending on risk to other children's welfare or safety). Failure of the child/parent to satisfy the terms of the plan may result in permanent expulsion from the center.

A CHILD WILL NOT BE EXPELLED IF A PARENT/GUARDIAN:

- Made a complaint to the Office of Licensing regarding a center's alleged violations of the licensing requirements.
- Reported abuse or neglect occurring at the center.
- Questioned the center regarding policies and procedures.
- Without giving the parent sufficient time to make other child care arrangements.

PROACTIVE ACTIONS THAT CAN BE TAKEN IN ORDER TO PREVENT EXPULSION:

- Try to redirect child from negative behavior.
- Reassess classroom environment, appropriateness of activities, supervision.
- Always use positive methods and language while disciplining children.
- Praise appropriate behaviors.
- Consistently apply consequences for rules.
- Give the child verbal warnings.
- Give the child time to regain control.
- Document the child's disruptive behavior and maintain confidentiality.
- Give the parent/guardian written copies of the disruptive behavior that might lead to expulsion.
- Schedule a conference including the director, classroom staff, and parent/guardian to discuss how to promote positive behaviors.
- Give the parent literature of other resources regarding methods of improving behavior.
- Recommend an evaluation by professional consultation on premises.
- Recommend an evaluation by local school district study team.

UNIVERSAL CHILD HEALTH RECORD

*Endorsed by: American Academy of Pediatrics, New Jersey Chapter
New Jersey Academy of Family Physicians
New Jersey Department of Health*

SECTION I - TO BE COMPLETED BY PARENT(S)						
Child's Name (Last)		(First)		Gender <input type="checkbox"/> Male <input type="checkbox"/> Female	Date of Birth / /	
Does Child Have Health Insurance? <input type="checkbox"/> Yes <input type="checkbox"/> No		If Yes, Name of Child's Health Insurance Carrier				
Parent/Guardian Name		Home Telephone Number		Work Telephone/Cell Phone Number		
Parent/Guardian Name		Home Telephone Number		Work Telephone/Cell Phone Number		
<i>I give my consent for my child's Health Care Provider and Child Care Provider/School Nurse to discuss the information on this form.</i>						
Signature/Date				This form may be released to WIC. <input type="checkbox"/> Yes <input type="checkbox"/> No		
SECTION II - TO BE COMPLETED BY HEALTH CARE PROVIDER						
Date of Physical Examination:			Results of physical examination normal? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Abnormalities Noted:			Weight (must be taken within 30 days for WIC)			
			Height (must be taken within 30 days for WIC)			
			Head Circumference (if <2 Years)			
			Blood Pressure (if ≥3 Years)			
IMMUNIZATIONS			<input type="checkbox"/> Immunization Record Attached <input type="checkbox"/> Date Next Immunization Due:			
MEDICAL CONDITIONS						
Chronic Medical Conditions/Related Surgeries • List medical conditions/ongoing surgical concerns:		<input type="checkbox"/> None <input type="checkbox"/> Special Care Plan Attached		Comments		
Medications/Treatments • List medications/treatments:		<input type="checkbox"/> None <input type="checkbox"/> Special Care Plan Attached		Comments		
Limitations to Physical Activity • List limitations/special considerations:		<input type="checkbox"/> None <input type="checkbox"/> Special Care Plan Attached		Comments		
Special Equipment Needs • List items necessary for daily activities		<input type="checkbox"/> None <input type="checkbox"/> Special Care Plan Attached		Comments		
Allergies/Sensitivities • List allergies:		<input type="checkbox"/> None <input type="checkbox"/> Special Care Plan Attached		Comments		
Special Diet/Vitamin & Mineral Supplements • List dietary specifications:		<input type="checkbox"/> None <input type="checkbox"/> Special Care Plan Attached		Comments		
Behavioral Issues/Mental Health Diagnosis • List behavioral/mental health issues/concerns:		<input type="checkbox"/> None <input type="checkbox"/> Special Care Plan Attached		Comments		
Emergency Plans • List emergency plan that might be needed and the signs/symptoms to watch for:		<input type="checkbox"/> None <input type="checkbox"/> Special Care Plan Attached		Comments		
PREVENTIVE HEALTH SCREENINGS						
Type Screening		Date Performed	Record Value	Type Screening	Date Performed	Note If Abnormal
Hgb/Hct				Hearing		
Lead: <input type="checkbox"/> Capillary <input type="checkbox"/> Venous				Vision		
TB (mm of Induration)				Dental		
Other:				Developmental		
Other:				Scoliosis		
<input type="checkbox"/> I have examined the above student and reviewed his/her physical history. It is my opinion that he/she is medically cleared to participate fully in all child care/school activities, including physical education and competitive contact sports, unless noted above.						
Name of Health Care Provider (Print)			Health Care Provider Stamp:			
Signature/Date						



Social Media Policy:

Steps to Success VIII participates in the following social media platforms:

- Steps to Success website
- Brightwheel App
- Email
- Instagram
- Facebook

Staff members are allowed to use their personal cell phones to capture photos and post to their respective Brightwheel accounts.

Steps to Success Administration is responsible for posting on Instagram, Facebook, and StepstoSuccess.com, as well as emailing photos to families. Only children whose families have granted photo permission will be posted on the aforementioned social media forums.

Parents must grant Steps to Success VIII permission allowing photographs to be taken of a child for the above-mentioned uses. Please select one of the following photos - permitting options below:

_____ Option 1: I grant Steps to Success VIII permission to photograph my child and to use those photos on social media, to send via email, to use for montages and to utilize for any arts and crafts projects throughout the center.

_____ Option 2: I grant Steps to Success permission to photograph my child and ONLY use those photos to send via email, to utilize in a montage or for center- based projects.

The Steps to Success VIII Cell Phone is as follows:

Administration:

- Steps VIII Administration will monitor all communication between staff and families on the Brightwheel App.
- Steps VIII Administration is permitted to use their personal cell phones to capture photos of children for the purpose of emailing or posting on social media forums.

Staff:

- Staff members are permitted to use their personal phones throughout the workday to capture photos of children to post on Brightwheel. Staff members are permitted to use their personal phones to communicate with parents via the Brightwheel app. Staff members are not permitted to share their personal contact information and/or social media accounts with any Steps to Success VIII families while their children are enrolled in the center. Staff members are not permitted to post photos of any students on their personal social media accounts. All photos of children must be erased from personal cell phones after staff is done posting. Staff members are NOT permitted to use their personal cell phones throughout their work day (excluding break time) for anything other than capturing photos of students and/or communicating with families via Brightwheel.

- Staff members are not permitted to hold public discussions on social media sites pertaining to center matters, any children within the center, or anything that would negatively impact the center's reputation or bring offense to any staff member and/or family attending the center.

Families:

- Parents/guardians are not permitted to post photos of children other than their own on any public forums, including any social media accounts.
- Parents/guardians are not permitted to share their personal contact information with any staff members while their child is actively enrolled at Steps to Success VIII.
- Parents/guardians are not permitted to hold public discussions on social media sites pertaining to center matters, any children within the center, or anything that would negatively impact the center's reputation or bring offense to any staff member and/or family attending the center.

Any parent/guardian or staff member found to be breaching any of the aforementioned policies may face disciplinary action in line with our disciplinary and expulsion procedures.

Child's Name: _____

Signature

Date

Updated Steps to Success Protocols and Guidelines- COVID-19 Related Health and Safety Requirements

Entry Protocols

- At this time, our revised hours of operation are 7:30 AM- 6:00 PM. This is to ensure that adequate staffing is available at all times. These hours are temporary and subject to change contingent upon NJ guidelines.
- Upon arrival, each family must line up in the foyer maintaining a distance of 6ft from neighboring families. In order to ensure that proper social distancing protocols are adhered to upon arrival, we will have floor decals outside of our Center for each family to stand on in order to ensure the safety of all awaiting entry into the Center.
- All students and staff will be screened for fever and other COVID-19 symptoms prior to entry into the Center daily. Children and staff with a fever in excess of 100.4 degrees Fahrenheit, or exhibiting symptoms of COVID-19, will not be allowed to enter the Center, nor will families that have exposure to persons known to have COVID-19 during the preceding 14 days. We encourage all families to be on the alert for signs of illness in their children. Should your child present any signs of illness, please keep them home.
- Steps To Success reserves the right to deny entry to any child exhibiting a low grade fever of 99.6 degrees or higher AND exhibiting signs of illness, which could include flushed cheeks, rapid breathing or difficulty breathing, fatigue, a runny nose and/or cough, or extreme fussiness.
- Upon entry into the Center, all staff, children, parents and guardians will be required to approach the newly installed, FDA approved temperature kiosks to record their temperatures upon arrival. All staff members will be required to sanitize their hands prior to entry using the touchless sanitization feature in the kiosk.
- Service providers or therapists will always be required to wear a mask when entering the building. They will have their temperature taken, sanitize their hands and sign in at the main office. They will NOT be allowed into the classroom to service the child. Children whom receive services will do so in a separate area while maintaining social distancing.
- In addition to having their temperatures taken, parents and guardians will be required to answer a series of questions daily. All responses and temperatures will be recorded on the daily log mandated by the Dept of Health.

- According to the State Guidelines, parents, guardians, and all visitors, including but not limited to entertainers, will not be permitted to enter the Center during operating hours, with the exception of emergency or law enforcement personnel in their official capacity, and Department of Children and Families personnel for child protection or child care licensing purposes.
- Once all students have been screened and cleared for entry, a staff member will escort your child(ren) to their respective classrooms and assist them into changing into their classroom clothes/shoes prior to entering their room.

Classroom Protocols

- Children and staff will practice frequent hand washing with soap and water for at least 20 seconds, and shall be required to wash their hands upon entering the classroom, before meals or snacks, after outdoor play activities, after going to the bathroom, and prior to leaving for home. Children will be monitored to ensure proper technique.
- Teachers will provide lessons to their students on healthy hygiene practices such as proper hand washing techniques and covering of coughs and sneezes. Healthy hygiene practices will be reinforced daily.
- There will be a maximum capacity of fifteen children per room and two teachers. Staff members will be assigned to one group upon arrival and will remain with that group throughout the duration of the day. Combining of groups in the morning and in the evening will not be permitted at this time.
- Staff members will be required to wear cloth masks while working unless doing so would inhibit the individual's health.
- At the discretion of the family, children over the age of two will be encouraged to wear cloth face coverings within the Center, although at this time it is not a mandated requirement. No children will wear cloth face coverings during napping periods due to the dangers of suffocation. Children will be frequently reminded not to touch the face covering and to wash their hands often.
- Close person to person contact (hugging, kissing, games involving touching or tagging, etc) will be strictly limited. Students will be reminded to limit these behaviors as needed.
- All Enrichment Programs will be cancelled at this time to avoid the combining of students in different classes and limit activities involving direct physical contact or shared equipment.
- Sharing of supplies, food, toys, and other high touch items such as art supplies, school supplies, equipment, etc., will be strictly limited. All students will be

assigned individual storage bins for toys and art supplies and all items will be cleaned and sanitized at the end of each day. Children's personal belongings will be kept separate in their cubbies.

- Toys and items that are not easily cleaned or disinfected (i.e. soft, cloth, or plush toys and blankets) will not be utilized in the Center and will be removed from each classroom. Please refrain from allowing your children to bring ANY toys and items to the Center.
- Use of shared spaces, specifically bathrooms shared by two classes, will be carefully controlled to ensure that children and staff maintain at least six feet of separation from children or staff in other groups. Staggered bathroom schedules will be implemented when possible and all shared spaces will be disinfected between uses.
- As has always been practiced at Steps to Success, teachers will continue to use disposable gloves when diapering and changing children, handling food, and cleaning classroom surfaces using disinfectants
- During napping periods, cots and bedding will be positioned alternatively head-to-toe and at a reasonable distance from each other to minimize potential virus transmission between children.
- Outdoor play time on our shared playgrounds will be staggered to prevent mixing between groups. Children and staff must wash their hands upon returning from outdoor play.

Cleaning and Sanitization Protocols

- Toys, playground equipment, and other frequently touched surfaces such as hands-on learning equipment, doorknobs, light switches, countertops, faucet handles, and restrooms will be cleaned, sanitized and disinfected multiple times throughout the day using Lysol spray, Clorox wipes, Health grade Clorox wipes, and alcohol. Cleaning, sanitization, and disinfection will be in accordance with the CDC's Guidance for Cleaning and Disinfecting Public Spaces, Workspaces, Businesses, Schools and Homes.
- Toys that children have placed in their mouths or are contaminated by body secretion or excretion will be set aside until they can be cleaned by hand by a person wearing gloves. Items will be cleaned in a water and bleach solution, sanitized with an EPA-registered disinfectant (Lysol or Clorox wipes) and air-dried.

- Each child's bedding will be separately stored in individual laundry bags and cots will be labeled for each child. Please return your child's bedding to the Center in a laundry bag labelled with their name. Bedding will be sent home each week for washing and all cots will be thoroughly sanitized and disinfected before use the following week.
- Our cleaning crew that comes in on a nightly basis will continue to clean all surfaces and common areas using a bleach solution daily.
- In addition to the above listed cleaning and sanitization protocols, all Steps To Success locations have purchased and enforced Germicidal UV Disinfection Lamps and portable UV-C Sanitizing Wands into our enhanced daily cleaning, disinfection, and sanitization procedures. The germicidal UV disinfection lamps will be used in each classroom twice a week for 30-60 minutes to remove, kill and eliminate 99% of viruses, molds, bacteria, parasites, and allergens in addition to odors in the air. The HygenX Vray UV-C sanitizing wands kills 99.9% of bacteria on all everyday objects. The UV-C wands will be used to sanitize and disinfect all commonly touched surfaces and objects including but not limited to toys, cots, tables, desks, chairs, classroom supplies, doorknobs, light switches, countertops, faucet handles, changing tables, and restrooms. In addition to using EPA approved disinfectants (Lysol, bleach, Clorox, and alcohol), we will utilize these wands in all of our classrooms and throughout the Center two-three times per week.
- If a student leaves the center with a fever or any other illness it is mandated that they must stay home 48 hours. Within the 48 hours they MUST visit a doctor and will not be allowed back into the building without a detailed note which MUST indicate the child's diagnosis. A doctor's note simply stating the "child can return to school" will no longer be accepted!!!!

Dismissal Protocol

- Dismissal protocols will be similar to entry/drop off protocols. Upon approaching the Center during pick up hours, please buzz the door/call ahead and notify us of whom you're picking up. Please reserve a floor decal in the foyer of the Center to maintain social distancing protocols and wait until your child(ren) are brought out to you. Teachers will assist our students with getting dressed and gathering all of their belongings. Once ready, the teacher will then bring your child to meet you in the foyer. As previously mentioned under "Entry Protocols," parents and guardians are prohibited from entering the Center.

I, _____, have read the “Updated Steps To Success Protocols and Guidelines- COVID-19 Related Health and Safety Requirements,” and agree to all of the protocols and guidelines implemented by Steps To Success under the guidance of the New York State Department of Children and Families.

Child’s Name: _____

Signature: _____

Date: _____

**STEPS TO SUCCESS VIII, LLC
WAIVER AND RELEASE OF LIABILITY**

I, _____ (referred to as "Customer") am the parent or legal guardian of _____ (the "Child"), who desires to receive certain child care services for my Child (the "Services") to be provided by Steps to Success _____, a New Jersey limited liability company with a location of _____ (the "Company"). In consideration for and as a condition precedent for receiving the Services and for the Child and Customer Parties (as defined herein) being permitted on Company's property, Customer agrees to all the terms and conditions set forth in this Waiver and Release of Liability (this "Waiver and Release").

Customer is aware and understands that the novel coronavirus known as COVID19, has been declared a worldwide pandemic by the World Health Organization. While the Company has established certain preventative measures to attempt to assist in the prevention or reduction in the spread of COVID-19, including but not limited to those set forth on Exhibit A attached hereto (the "Protocols and Guidelines"), Customer acknowledges that no precautions including the Protocols and Guidelines can eliminate the risks of exposure to COVID-19 and that the Company cannot assure that Customer or Customer's Child, agents, guests, invitees, and other representatives (collectively, "Customer Parties") will not become infected with COVID-19 through contact with individuals providing or receiving the Services or other invitees onto Company's property where the Services are rendered. An inherent risk of exposure to COVID-19 exists whenever people interact with one another face-to-face; therefore, receiving the Services could increase the Customer Parties' risk of contracting COVID-19.

Customer acknowledges the highly contagious nature of COVID-19 and acknowledges and agrees that Customer is knowingly and voluntarily receiving the Services with an express awareness of the danger involved to the Customer Parties. Additionally, Customer agrees to follow and comply with the Company Protocols and Guidelines as a condition to receiving the Services. By signing this Waiver and Release, Customer on behalf of Customer and the Child, voluntarily accepts and assumes any and all risks, whether caused by the negligence of the Company or any of its personnel, invitees or otherwise, of Customer Parties' exposure to or infection by COVID-19 and any and all risks that such exposure or infection may result in personal injury, illness, temporary or permanent disability, and/or death (collectively, "Injuries") of Customer Parties, their family members, and persons with whom any of the foregoing come in contact during or after Customer's receipt of the Services (collectively, "Customer Contacts").

Customer hereby expressly waives and releases any and all claims, now known or hereafter known, against the Company and its members, managers, officers, directors, employees, agents, advisors, affiliates, successors, and assigns (collectively, "Releasees"), on account of Injuries arising out of or attributable or related to any actual or potential exposure to COVID19 as a result of the Company's provision of the Services ("COVID-Related Claims"), whether such exposure arises out of the negligence of the Company or any Releasee or otherwise. Customer covenants not to make or bring any COVID-Related Claim against the Company or any other Releasee, and forever releases and discharges the Company and all other Releasees from liability under any such COVID-Related Claims.

Customer shall defend, indemnify, and hold harmless the Releasees from and against any and all liabilities, losses, damages, costs and expenses, including reasonable attorneys' fees, fees and the costs of enforcing any right to indemnification under this Waiver and Release, and the cost of pursuing any insurance providers, incurred by any Releasee, arising out of or resulting from any COVID-Related Claim brought against such Releasee by or on behalf of a Customer Party.

If any term or provision of this Waiver and Release is invalid, illegal, or unenforceable in any jurisdiction, such invalidity, illegality, or unenforceability shall not affect any other term or provision of this Waiver and Release or invalidate or render unenforceable such term or provision in any other jurisdiction and the affected provision shall be reformed so that the parties intent is enforced to the greatest extent permitted by law. This Waiver and Release is binding on and shall inure to the benefit of Customer and the Company and their respective successors and assigns. This Waiver and Release shall not be so construed as to limit or otherwise derogate from any rights and/or obligations pursuant to any other agreements by and between Customer and Company; provided, this Waiver and Release shall control and supersede all other agreements by and between Customer and Company with respect to any and all conflicting terms related to COVID-19. All matters arising out of or relating to this Waiver and Release shall be governed by and construed in accordance with, and enforced under, the internal laws of the State of New York. Any claim or cause of action arising under this Waiver and Release may be brought only in the state and federal courts located in Richmond County and/or the Eastern District of New York, and Customer hereby consents to the exclusive jurisdiction of such courts.

BY SIGNING BELOW, CUSTOMER ACKNOWLEDGES THAT IT HAS READ AND FULLY UNDERSTOOD ALL OF THE TERMS OF THIS AGREEMENT AND THAT IT IS VOLUNTARILY GIVING UP SUBSTANTIAL LEGAL RIGHTS, INCLUDING THE RIGHT TO SUE THE COMPANY.

Child Participant Name: _____

Parent/Guardian Signature: _____

Date: _____

Parent/Guardian Printed Name: _____



Child's First and Last Name: _____

Child's Class: _____

Things We Need to Know:

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____
9. _____
10. _____

Allergies (please list):

