

**Austintown Community Church Preschool Childcare Center**

Student # \_\_\_\_\_  
 (^Office use above^)

**2018 - 2019 STUDENT APPLICATION**

CLASS \_\_\_\_\_  
 (^Office use above^)

<b>CHILD'S NAME</b> _____			GENDER: Male _____ Female _____	
(LAST)	(FIRST)	(MIDDLE INITIAL)	( ^ Circle ^ )	
FIRST NAME YOU WANT CHILD CALLED _____			BIRTHDATE _____	
			(MONTH)	(DAY) (YEAR)
ADDRESS _____				
(STREET)			(TOWN)	(ZIP)
HOME PHONE NUMBER ( _____ )				

If child is **SCHOOL-AGE**, what PUBLIC SCHOOL does your child attend? \_\_\_\_\_ ( < write name of school )

What GRADE will your **SCHOOL-AGE** child be in for the 2018-2019 school year? \_\_\_\_\_ ( < write which GRADE, K-1-2-3-4-5 )

<b>FATHER'S NAME</b>		<b>MOTHER'S NAME</b>	
FATHER'S ADDRESS		MOTHER'S ADDRESS	
CITY, STATE, ZIP		CITY, STATE, ZIP	
FATHER'S HOME PHONE ( _____ )		MOTHER'S HOME PHONE ( _____ )	
FATHER'S CELL PHONE ( _____ )		MOTHER'S CELL PHONE ( _____ )	
FATHER'S EMPLOYER		MOTHER'S EMPLOYER	
FATHER'S OCCUPATION		MOTHER'S OCCUPATION	
FATHER'S WORK PHONE ( _____ )		MOTHER'S WORK PHONE ( _____ )	
FATHER'S SOC. SEC. NO. _____ - _____ - _____		MOTHER'S SOC. SEC. NO. _____ - _____ - _____	
e-mail address		e-mail address	

Parent(s) is/are: (Circle which applies) SINGLE MARRIED SEPARATED DIVORCED WIDOWED

If separated or divorced, are BOTH parents to receive school information? \_\_\_\_\_ Yes \_\_\_\_\_ No

Person(s) responsible for payment: \_\_\_\_\_ Are you an ODJFS client? \_\_\_\_\_  
 (^ payment assistance is received through the ODJFS ^)

Other Children in Family: \_\_\_\_\_  
 ( NAMES AND AGES )

WHAT OTHER PRESCHOOL, CHILDCARE or GROUP EXPERIENCES HAS YOUR CHILD HAD? \_\_\_\_\_  
 \_\_\_\_\_ HAS CHILD ATTENDED ANOTHER SCHOOL? \_\_\_\_\_ WHERE? \_\_\_\_\_

WHAT SCHOOL YEAR DO YOU EXPECT YOUR PRESCHOOL CHILD TO ATTEND KINDERGARTEN? \_\_\_\_\_

HOW DID YOU LEARN ABOUT OUR CENTER? \_\_\_\_\_

ARE YOU A MEMBER OF AUSTINTOWN COMMUNITY CHURCH? \_\_\_\_\_

IF NO, WHAT IS YOUR CHURCH AFFILIATION? \_\_\_\_\_

PLEASE LIST ANY PHYSICAL, EMOTIONAL, or LANGUAGE / SPEECH CONCERNS THAT YOU MAY HAVE: \_\_\_\_\_

**Check Program Needed:**

_____ 3 Hr. Program	Circle Days Needed:	M T W Th F	Times Needed:	_____ to _____
_____ HALF Day Program	Circle Days Needed:	M T W Th F	Times Needed:	_____ to _____
_____ Full Day Program	Circle Days Needed:	M T W Th F	Times Needed:	_____ to _____
_____ Grade K-5 Before and/or After School	Circle Days Needed:	M T W Th F	Times Needed:	_____ to _____

\*Date Child Will Start A.C.C. : \_\_\_\_\_ Will Child attend in Summer 2018? \_\_\_\_\_

~~~~~ Office Use Below ~~~~~

**REGISTRATION FEE:** \_\_\_\_\_ \$45.00 for returning preschoolers OR school-age students  
 \_\_\_\_\_ \$45.00 for new preschoolers (includes bookbag & A.C.C. T-shirt)

Check # \_\_\_\_\_ Cash Receipt # \_\_\_\_\_

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DATE ADMITTED \_\_\_\_\_ DATE WITHDRAWN \_\_\_\_\_ DATE REG. FEE PD. \_\_\_\_\_  
 ODJFS CLIENT? \_\_\_\_\_ APPROVED ON \_\_\_\_\_ CO-PAY AMT. \_\_\_\_\_ OVER >>

## 2018 ~ 2019 PARENT GUIDELINES & INFORMATION

- Registration** A non-refundable registration fee of \$45.00 is to be paid when student application is turned in.
- Contracts & Payments**
1. Parents will be issued a Parent Contract that reflects the days & hours requested each day and the weekly tuition amount. Weekly invoices will not be issued.
  2. Tuition payments are to be pre-paid each Friday prior to services. Payments received after 6:00 p.m. Friday are considered late and those accounts will accrue a \$10.00 late fee.
  3. Five personal days will be allotted for students attending 5-days per week. Personal days used will be kept on file in the office. (Personal days expire when the summer program begins in June.)
  4. **Tuition is due for the entire school year except for the following reasons:**
    - (a) relocation out of town
    - (b) failure to adjust after 1 month upon teacher & director's advice
    - (c) prolonged illness with a doctor's written statement
    - (d) loss/change of employment
  5. Parent must notify the school office at least 2 weeks in advance if child will need to be withdrawn. If child needs to re-enroll and if space is available, child must be re-registered.
  6. (Grades K-5) If public schools are closed and services are needed, parents will be charged per tuition chart on the rate sheet. If school-age child does not attend on these days, there is no charge.

**Attendance** - Students are required to attend a minimum of 2 days per week and are expected to attend regularly on their scheduled days. If it is necessary to revise the student's weekly schedule, a '**Child's Revised Schedule Request**' form must be completed and turned in to the office by Wed. at 6:00 p.m. the week before the change is needed. If the change cannot be accommodated, the parent will be notified.

**Dept. of Job & Family Services Clients** - Parents who receive assistance for their child care services through the Ohio Department of Job & Family Services (ODJFS) must pay the A.C.C. registration fee (\$45) before starting. ODJFS students are required to attend at least 80 percent of the time they are scheduled for. Failure to comply with this policy will result in the child being withdrawn from the center. Weekly co-pays are due each Friday prior to services. Client is responsible for any late pick up fees or unpaid ODJFS tuition.

**Required/Emergency Forms** - Parents must turn in ALL required forms on file BEFORE the child may begin attending A.C.C. Failure to return these forms will delay the child's starting day.

**Medical Statement** - Every enrolled preschool-age child is required by the State of Ohio to provide a current, completed medical form within 30 days of starting A.C.C. The medical form must be signed by a physician or nurse practitioner. This form must be updated annually. Failure to submit this necessary medical form or neglecting to notify director of a problem in obtaining the medical form will result in child not being able to attend the center.

**School-Age Students** - Parents whose school-age children will be transported to & from A.C.C. by Austintown School buses must complete an '**Alternative Transportation Schedule Request Form**' at the Austintown Schools transportation office PRIOR to starting at A.C.C.

**Parent Handbook** - Parents will be given a Parent Handbook stating guidelines, policies and yearly calendar. State Law requires parents to sign a statement that they have received and have read the Handbook.

**Field Trips** - Field trips may be scheduled by the director or as requested by teachers. Parents may be asked to volunteer to drive. Volunteer drivers must follow the guidelines as explained in the Parent Handbook. Child safety seats for children under 4 yrs. and/or 40 lbs. and booster seats for children ages 4-8 are mandatory as required by Ohio law. Occasionally transportation may be provided by school buses. Parents are responsible to pay any admission fees or transportation costs.

**Early Childhood Screenings** - As part of our program, children will be screened for amblyopia (lazy eye), will have a speech & language screening (at a minimal cost to parents), and parents will be asked to complete an '**Ages & Stages**' questionnaire (a child development monitoring system).

**Photographs** - Photos of special events, field trips or classroom activities may be taken throughout the school year.

**Annual Fundraiser** - Parents are asked to participate in our fundraising events.

**Discipline** - When a child is on school premises or at a school activity, under the supervision of either the teacher or a parent chaperone, the policies of the school relating to discipline must be followed. Any type of verbal threat by a child directed to another student or a staff member will result in parent being called immediately. If parents disagree with school policies, the parent may withdraw their child.

I understand the above information:

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

\_\_\_\_\_  
Date