

Smart Start Preschool



PARENT'S HANDBOOK AND APPLICATION FOR PRESCHOOL ENROLLMENT 2011-2012 SCHOOL YEAR

A. IVES REID CELEBRATION CENTER
609 MINNIE AVE.
BELTON, MO 64012
322.7976
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Belton Park Department
609 Minnie Ave.
Belton, MO 64012
Phone:
816.322.7976

This is a preschool learning center operated by the Belton Parks and Recreation Department as an outreach program to the local community. We offer our preschool program to children in the community who are 2 to 5 years old.

We are dedicated to providing a rich learning experience in a fun and exciting way. We welcome and encourage parent participation!

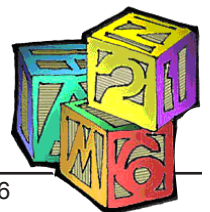
STATEMENT OF PURPOSE

The preschool curriculum is based on the results of scientific studies by French child psychologist Jean Piaget, who wrote, "Children learn and grow best by actively participating in an enriched environment." This program is designed to provide a variety of educational material and activities. Children are asked to take part in planning what they are going to do and how they are going to do it. This permits children to begin to set goals for themselves and to generate and evaluate alternative solutions to problems en route to achieving their goals. Teachers ask and make suggestions in order to set the stage for key experiences that stimulate the child's thinking processes, language development and social development.

The preschool operates on a structured plan (which will be shared with each family). Each age group has his/her own teacher. Your child also will have music, learn finger play and have flannel board stories.

Parents are encouraged to visit the preschool to observe the children in action. Parents must feel free to call the director or the child's teacher at any time for any reason concerning their child.

Any kind of problems you may have during the year with your child may be discussed in confidence with the director and/or your child's teacher. Our goal is to work closely with you as parents to help you understand and help your child to develop a unique and self-confident personality.



PRESCHOOL TUITION PROCEDURES

ALL TUITION PAYMENTS ARE DUE on the first day of each month. Any other arrangements **MUST BE CLEARED WITH THE PRESCHOOL SUPERVISOR**. Those payments not in by the tenth day of the month will be considered delinquent and a late fee will be applied. It is the responsibility of the parents to ensure that payments are made on time. Those students whose payments are delinquent will be removed from the class roll until the tuition is paid.

PRE-KINDERGARTEN TESTING

Children attending Kindergarten in the Fall must turn 5 years old before August 1. They will be required to take a screening test, which is given at the elementary school they will be attending.

The dates of the testing will be available in the spring and will be posted on the bulletin board at Preschool. At this time you will call the school and set up an appointment.

HEALTH REGULATIONS

MEDICINES:

We would prefer that medicines be administered outside preschool hours. However, if it is impossible to do so, parents should follow the following guidelines:

- a. Parents need to give medicine to the teacher, with the child's name clearly marked.
- b. Medicine will be placed in a secured area away from children's reach.
- c. Parents need to complete a medication form (found in this packet). Medicines **CANNOT** be given unless a parent signs a completed medication form.

PRESCHOOL DRESS CODE



Children **MUST** wear very washable play clothing suitable for prevailing weather.



Children **MUST** wear self-help clothing.



All clothing removed by children (sweaters, coats, etc.) **MUST HAVE NAMES CLEARLY MARKED INSIDE.**



Children **MUST NOT** bring toys from home.



Children **MUST NOT** bring money.



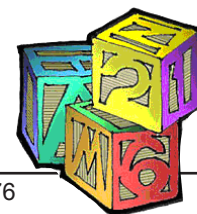
Children **MUST NOT** bring handbags/purses.



Tennis shoes are preferred. For safety reasons, children will not be allowed on any climbing equipment unless they are wearing tennis shoes.








NO flip-flops please...they can be dangerous for children to wear when playing.



PROGRAM OPPORTUNITIES

ENROLLMENT OPTIONS

-  PRESCHOOL 1/2 DAY ONE DAY A WEEK
-  PRESCHOOL 1/2 DAY TWO DAYS A WEEK
-  PRESCHOOL 1/2 DAY THREE DAYS A WEEK
-  PRESCHOOL 1/2 DAY FOUR DAYS A WEEK
-  PRESCHOOL 1/2 DAY FIVE DAYS A WEEK

PROGRAMS

Our program is designed for children 2-5 years of age and based on a commitment to offering children an educationally sound and happy preschool experience. Here they can learn about themselves and about the world around them. We have a dedicated staff to provide experiences that will nurture pre-academic readiness skills. We know the preschool experience is a first and very important step in a long education process, and we will strive to make it as fun and stress-free as possible.

We encourage parents to visit the program whenever possible. We also encourage parents to be a part of the program especially by sharing any special talents or skills they may have. We hope you and your child have an enjoyable year.

SCHOOL YEAR 2011-2012 ENROLLMENT AND TUITION FEES

Enrollment:	\$30/student annual fee
Monthly Tuition*:	1 day a week - \$70
	2 days a week - \$125
	3 days a week - \$175
	4 days a week - \$225
	5 days a week - \$265

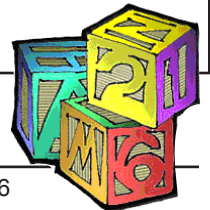
Monthly Transportation: \$36

School Supply List

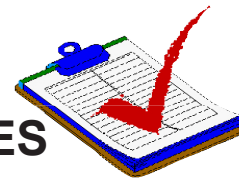
- 24 Crayola Crayons
- Glue Stick
- Kleenex
- Antibacterial Wipes

**Fees are based on the regular school calendar, which includes 166 full days.*

**Stop by the High Blue Wellness Center, 16400 N. Mullen Road,
or download a complete enrollment packet from the
website at www.beltonparks.org**



DAILY CHECK-IN PROCEDURES



In order to provide a smooth and safe beginning (and end) to each school day, please observe the following arrival and dismissal procedures:



Morning Session - 2-5 year olds

Arrival 8:15 a.m.

Dismissal 11:15 a.m.



Afternoon Session - 3-5 year olds

Arrival 12:15 p.m.

Dismissal 3:15 p.m.



Please sign children in at the front entrance. **IT IS VERY IMPORTANT THAT AN AUTHORIZED ADULT BRING THE CHILD INTO THE BUILDING, SIGN THE CHILD IN AND RELEASE HIM TO THE TEACHER IN CHARGE.** The sign in sheets are for fire and emergency purposes.



A brief goodbye is best for your child. A teacher will help if there is a problem.



Most parents feel guilty if they leave their child when he/she doesn't want to stay. However, children always calm down after their parents leave and go on with their schedule. Rest easy and feel free to call and check on your child's situation.

ONGOING REMINDERS



Check the bulletin board for important notices.



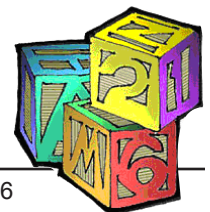
Check your child's locker/cubby daily.



Always read the program newsletter for upcoming special events and dates. Information will also be posted on our website at www.beltonparks.org



If there is something you need to discuss in length concerning your child, check with the preschool supervisor or arrange for another time to talk with your child's teacher.



CELEBRATION DAYS



BIRTHDAYS:

We celebrate birthdays during snack time. WE PREFER THAT YOU SEND COOKIES. Cookies are easier to handle and the children really enjoy them as a special treat. Your child's teacher will add special songs, stories, etc. to make this a special time for your child.



HALF BIRTHDAYS:

We celebrate children's half birthdays for those who have summer birthdays and will not be in preschool to celebrate during the school year. Please notify the director or your child's teacher if you would like to send treats to celebrate your child's half birthday.











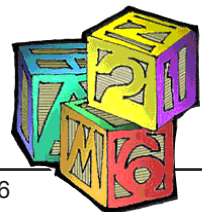
GRADUATION:

All children will take part in a graduation program and receive their diploma or certificate. A reception follows the program. Invitations will be sent out with all the information.



HELPFUL HINTS

-  Never talk about your child's problems to someone else - in the child's presence.
-  When your child draws or paints an unrecognizable picture, say: "tell me about it."
-  Please do not conduct personal conversations with the teachers during Preschool.
-  Your child has had enough rest if he/she wakes up by himself/herself in the morning.
-  Nature items (insects, leaves, rocks, etc.) will be delightfully shared.
-  PLEASE WATCH THE BULLETIN BOARD FOR IMPORTANT DATES AND INFORMATION.
-  PLEASE OBTAIN AND READ THE PROGRAM NEWSLETTER FOR IMPORTANT DATES AND INFORMATION.
-  PLEASE READ ALL OF THE INFORMATION IN THIS PACKET, AS WE BELIEVE IT WILL HELP YOU TO BETTER UNDERSTAND OUR PROGRAM



Preschool Enrollment Form

Child's Name _____

Shirt Size _____ (Youth sizes)

XS (2-4) S (6-8) M (10-12) Lg (14-16)

Date: _____

Number of children attending preschool: _____

Child's Name: _____
Last First MI Gender _____ DOB _____

Medical Concerns (i.e., asthma, allergies): _____

Name Child Goes By: _____

Mother's Name: _____
Last First MI Date of Birth _____

Address: _____

Home Phone: _____ Work Phone: _____ Cell Phone: _____

Place of Employment: _____ E-mail: _____

Address: _____

Father's Name: _____
Last First MI Date of Birth _____

Address (if different): _____

Home Phone: _____ Work Phone: _____ Cell Phone: _____

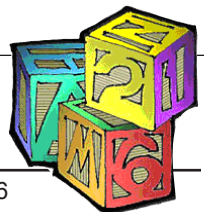
Place of Employment: _____ E-mail: _____

Address: _____

Parent's Marital Status: Married () Single () Separated () Divorced ()

Please explain any special considerations/circumstances with regards to the custody of your children. _____

Indicate person(s) authorized to pick up child without prior notice by parents (ID *must* be shown when picking up children):



Child's Name _____

Emergency Contact: (other than parent)

Name: _____ Phone: _____ Relationship: _____

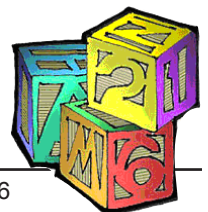
Name: _____ Phone: _____ Relationship: _____

Does your child take medication on a daily basis?

If so, please give reason, name of medication, dosage, and time of distribution.

If your child will be given medication during preschool hours - you must fill out a medical release form (attached)

In case of an emergency, which hospital do you prefer: _____



Child's Name: _____

TOWARD A BETTER UNDERSTANDING

Child's Name: _____ Date of Birth: _____

Address: _____ City: _____

Elementary School District: _____

Father's Name: _____ Occupation: _____

Mother's Name: _____ Occupation: _____

What language other than English is spoken in the home: _____

Others living in the home	Age	Relationship
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Does your child need help in (please mark all that apply):

Undressing _____ Eating _____ Washing _____ Toileting _____

What words does your child use to indicate:

Urination _____ BM _____



Child's Name: _____

Please indicate any major experience which might affect his/her behavior (i.e., serious illness, illness of a family member, residential changes, new siblings, death of a family member, etc.):

What type of television programming does your child watch/enjoy?

What kind of group experience has the child had? _____

Is your child generally shy with strangers? _____ children? _____ adults? _____

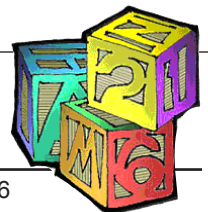
Has your child been cared for by other adults at home? _____ other? _____

Does your child have imaginary friends? _____ If so, the name(s): _____

Does your child have any specific fears (animals, darkness, thunder, etc.)?

Do you have a specific reason for sending your child to preschool? If so, please describe:

Is there any thing specific you would like to see your child learn from his/her experience at preschool?



Child's Name: _____

Please describe what methods your child responds to best, i.e. praise, reasoning, rewards:

It helps the teacher to know what kind of behavior is unacceptable in the home and what form of control or punishment is used. Would you briefly describe this phase of parent-child relationship in your home:

Is there anything additional that the teacher should know about your child?

Who will normally be bringing the child to preschool each day? _____

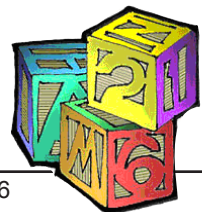
Please indicate relationship, i.e., mother, father, baby sitter, school transportation, etc.

Who will normally be picking up the child from preschool each day? _____

Please indicate relationship, i.e., mother, father, baby sitter, school transportation, etc.

Please indicate the address where the child is to be picked up if you are using school transportation.

PLEASE RETURN THIS FORM AS SOON AS POSSIBLE. THANKS.



MEDIA RELEASE

I, _____, give the Belton Park Department permission to photograph/video record my child's likeness and/or voice for use by the department for publicity purposes only. Please be aware that these photos are for Parks and Recreation use only and may be used in future catalogs, flyers and on the department's website.

Parent's Signature

Date

Child's Name: _____ Age: _____

Please select which preschool session you plan to attend:

Morning Session

Afternoon Session

Please select how many days a week you plan to attend preschool:

1 day a week

2 days a week

3 days a week

4 days a week

5 days a week

Please specify which days of the week you plan to attend:

Mondays

Tuesdays

Wednesdays

Thursdays

Fridays

Parent's Signature: _____ Date: _____

