



Attendance & Sick Student Policy

2019 – 2020 School Year

Please remember it is REQUIRED to keep your child at home if the following conditions exist:

- A fever of 100.5 or above
- A skin rash that has not been identified by a phone call or in writing by a doctor
- Diarrhea and or vomiting two or more times in a day
- Evidence of head lice (without proof of treatment)
- Severe coughing or excessive runny nose
- Conjunctivitis (pink eye)
- Sore throat or difficulty swallowing
- Stiff neck
- Infected skin patches
- Pain of which the child complains and interferes with normal activity
- Evidence of infection
- Excessive fatigue
- A moist or open sore

Children ill because of communicable **diseases must have a written statement from a doctor stating that they are no longer contagious before returning to school.** All children sent home must be symptom free for 24 hours per the child care ordinance before returning to school.

Excused Absences:

1. Medical appointment of child or other family member
2. Any illness or communicable disease listed below
3. Family emergency (may include car accident, lack of transportation, death of family member, catastrophe)
4. Severe weather conditions that prohibit travel to and from school
5. Official or legal agency appointments (immigration, court appearance, etc.)
6. Court-ordered visitation
7. Religious/cultural celebrations

Unexcused Absences (Limited to 10 per fiscal year)

1. Preschool child did not want to go to school
2. Parent/child overslept
3. Any absence for which a specific reason is not given

Child's Name

Parent's Name

Parent's Signature

Date





Physical Activity Policy

2019 – 2020 School Year

Students at New Generation Montessori will play outdoors daily when weather and air quality conditions do not pose a significant health risk. Time planned for outdoor play and physical activity depends on the age group and weather conditions. Activities shall include structured play and free play. Students ages one to five shall participate in a minimum of 30 minutes per day of moderate to vigorous physical activity.

Samples of physical activities: (indoor, outdoor)

- Use music for stepping, hopping, jumping in place.
- Have kids make up dances or share the latest popular or line dances. Play “keep the ball up”. Use one ball per child or one ball per small group. The group may add additional balloons as they gain control and awareness.
- Play "fitness with the leader." This is "follow the leader," using exercises.
- Measure heart rates after various movements [hop, walk, jump, skip, etc.].
- Make up "hand jive" routines, share and teach to others.
- Yoga
- Try juggling, top spinning, or yo-yo contests.
- Sport mimics: act out sport movements such as batting, kicking, dribbling, throwing/catching, dunking, swimming various strokes, and volleyball passing/serving. Everyone is skillful without the equipment!!

Dress policy for physical activity:

- Children shall be dressed appropriately for the weather, including wearing appropriate seasonal clothing and footwear, so they can participate fully, move freely, and play safely.
- Footwear should provide support for running and climbing. Examples of appropriate footwear include sneakers, gym shoes, and other shoes with rubber soles that enclose the feet and will not come off easily.

Examples of inappropriate clothing and footwear include:

- Footwear that can come off while running, or that does not provide support for climbing (examples: flip-flops and clogs).
- Clothing that can catch on playground equipment (examples: clothes with drawstrings or loops).

Child's Name

Parent's Name

Parent's Signature

Date





Biting Policy

2019 – 2020 School Year

Biting is a very common behavior among children birth to three years of age. Biting is a form of communication and is almost always a response to the child's needs not being met or coping with a challenge or stressor. At New Generation Montessori of Delray Beach, we believe in understanding the developmental stages of our students and their individual needs, we can proactively prevent many biting behaviors by the environment which we create for the children. We understand that children biting other children, is one of the most common and most difficult behaviors to deal with in group child care settings. It can occur without warning, can be difficult to defend against, and provokes strong emotional responses in the biter, the victim, the families, and the caregivers involved. For many toddlers, the biting stage is just a passing problem. Toddlers sometimes try it out as a way to get what they want from another toddler. They are in the process of learning what is socially acceptable and what is not. They discover that biting is a sure-fire way to cause the other child to drop what they are holding so the biter can pick it up. However, they experience the disapproval of the adults nearby and eventually learn other ways of gaining possession of objects or expressing difficult feelings. For other children, biting is a persistent and chronic problem. They may bite for a variety of reasons: teething, frustration, boredom, inadequate language skills, stress or change in the environment, feeling threatened, or to feel a sense of power.

Response to Biting - Action Plan

When a child is bitten:

For the biter:

1. The biter is immediately removed with no emotion, using words such as *"biting is not okay – it hurts."* We will avoid any immediate response that reinforces the biting or calls attention to the biter. Caring attention will be focused on the child who was bitten.
2. The biter will not be allowed to return to work/play and will be talked to on a level which he/she can understand. *"I can see that you want that truck, but I can't let you hurt him. We don't put our teeth on people."*
3. The child will be redirected to other work/play.
4. Staff will complete a incident report and notify the family of the biter when the child is picked up for the day.

For the victim:

1. Staff will separate the child who was bitten from the biter.
2. Special attention will be given to comfort the child.
3. Staff will administer appropriate first aid
4. Staff will then complete an incident report to notify family of the victim that the child has been bitten
5. Classroom staff will confer with the director to review the context of the biting incident, whether adequate supervision was present and whether the environment contributed to the biting incident. If changes in supervision and/or environment are warranted, then those changes will be implemented





When biting continues:

1. Classroom staff will meet with the director on a routine basis for advice, support and strategy planning.
2. Staff will chart every occurrence, including attempted bites, and indicate location, time, participants, behaviors, staff present, and circumstances.
3. Staff will “shadow” children who indicate a tendency to bite, to:
 - a. Head off biting situations before they occur.
 - b. Teach non-biting responses to situations and reinforce appropriate behavior.
 - c. Adapt the program to better fit the individual child’s needs.
 - d. Teach responses to potential biting situations: “Stop” or “That hurts!”
4. Staff will work together as partners with the parents of both biting children and frequent victims to keep all informed and develop a joint strategy for change.
5. Teachers will hold a conference with the parents of the biting child to develop a written plan of action.
6. Teachers will consider early transition of a child “stuck” in a biting behavior pattern for a change of environment, if developmentally appropriate.
7. Prepare the parents of the biting child for the possibility that the child may have to be removed from the Center and help them to make contingency plans.
8. If it is deemed in the best interest of the child, center, and other children, terminate the child from New Generation Montessori for the duration of the biting stage. Written warning will be given to the families before this action will be taken.

Biting Confidentiality

In compliance with NAEYC confidentiality guidelines, DMS staff will maintain complete confidentiality of all children involved when notifying parents that their child has been bitten or bit another child.

Child’s Name

Parent’s Name

Parent’s Signature

Date





Expulsion Policy

2019 – 2020 School Year

Unfortunately, there are sometimes reasons we have to ask that a child be removed 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.

WHEN A CHILD IS HAVING A PROBLEM IN THE CLASSROOM

- Staff will try to redirect child from negative behavior.
- Staff will reassess classroom environment, appropriate of activities, supervision.
- Staff will always use positive methods and language while disciplining children.
- Staff will praise appropriate behaviors.
- Staff will consistently apply consequences for rules.
- Child will be given verbal warnings.
- Child will be given time to regain control.
- Child's disruptive behavior will be documented and maintained in confidentiality.
- Parent/guardian will be notified verbally.
- Parent/guardian will be given written copies of the disruptive behaviors that might lead to expulsion.
- The director, classroom staff and parent/guardian will have a conference(s) to discuss how to promote positive behaviors.
- The parent will be given literature or other resources regarding methods of improving behavior.
- Recommendation of evaluation by professional consultation.
- Recommendation of evaluation by local school district child study team.

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 school.
- The parent/guardian will be informed regarding the length of the expulsion policy.
- The parent/guardian will be informed about the expected behavioral changes required in order for the child or parent to return to the school.





PARENTAL ACTIONS FOR CHILD'S EXPULSION

- Failure to pay/habitual lateness in payment.
- Failure to complete required forms including the child's immunization records.
- Verbal abuse to staff.
- Parent threatens physical or intimidating actions toward staff members.

CHILD'S ACTIONS FOR EXPULSION

- Failure of child to adjust after a reasonable amount of time.
- Uncontrollable tantrums/angry outbursts.
- Ongoing physical abuse to staff or other children.
- Unable to toilet train in our three-year-old program.

A CHILD WILL NOT BE EXPELLED

If child's parents:

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

Child's Name

Parent's Name

Parent's Signature

Date





Participation in food-related activities

2019 – 2020 School Year

To comply with Child Care Licensing and Enforcement Ordinance 65C-22.005(1)(c)2, parents and legal guardians of children attending New Generation Montessori must be advised in advance that children may participate in food-related activities during the school year. Parent consent to participate in special occasion food events such as group snack provided by a parent (Smart School Snacks), birthday celebrations and/or similar events where food will be served, must be obtained in writing. Consent must also be obtained for children to participate in learning activities where food may be consumed, such as classroom cooking activities. Signed consent forms will be maintained in each child's file (one consent form must be completed for each child enrolled in the program).

Activity	Yes	No
I give permission for my child to participate in classroom food-related learning activities such as cooking.	<input type="checkbox"/>	<input type="checkbox"/>
I give permission for my child to participate in group snack events where food is provided by a parent (using the guidelines of MSC's Smart School Snacks.)	<input type="checkbox"/>	<input type="checkbox"/>
I give permission for my child to participate in special occasion food events such as birthday treats.	<input type="checkbox"/>	<input type="checkbox"/>

Child's Name

Parent's Name

Parent's Signature

Date





VPK Attendance Policy

2019 – 2020 School Year

Parents/Guardians of children enrolled in a VPK class must comply with the VPK Attendance policy. Because VPK is a state-funded program, there are rules and regulations set by the state that both the provider and parents/guardians must follow. Please read the information below.

1. Sign In/Out Attendance Verification

Daily: Your child must be signed in upon arrival and signed out at dismissal every day by the adult who drops off and/or picks up. Arrival and dismissal time must be recorded at the time the child enters/exits the classroom. The time and full signature must be written on the attendance sheet.

2. Attendance/Absence:

Regular attendance is required in this program. It is important that your child attends every day in order to receive the maximum benefit of this program so that your child is prepared to succeed in Kindergarten. Our VPK program hours are 9:00-12:00 Monday through Friday. If your VPK child is absent please send written documentation (reason for absence, doctor's note, etc.) to the main office. VPK students should meet the attendance requirement set by the state (80% of the program year). If this is not met, then she/he may be dismissed from the program.

Child's Name

Parent's Name

Parent's Signature

Date





Safe Sleep Policy

2019 – 2020 School Year

1. All child care staff caring for infants and child care staff that may potentially care for infants will receive training on how to implement our infant Safe Sleep Policy.
2. Infants will always be placed on their backs to sleep, unless there is a signed Alternate Sleep Position Waiver-Health Care Professional Recommendation in the infant's file. A waiver notice will be posted at the infant's crib. This facility does not accept Alternate Sleep Position Waiver – Parent Request. Waivers will be retained in the children's record as long as they are enrolled.
3. When babies can easily turn over from the back to the stomach, they will be placed to sleep on their backs. This is in accordance with the American Academy of Pediatrics (AAP) recommendations. Child care staff can further discuss with parents how to address circumstances when the baby turns onto their stomach or side.
4. Sleeping infants will be visually checked daily, every 15-20 minutes, by assigned staff. The sleep information will be recorded on a Sleep Chart. The Sleep Chart will be kept on file for one month after the reporting month. We will be especially alert to monitoring a sleeping infant during the first weeks the infant is in child care. We will check the infant for:
 - a. Normal skin color
 - b. Normal breathing by watching the rise and fall of the chest
His or her level of sleep
 - c. Signs of overheating: flushed skin color, increase in body temperature (touch the skin), and restlessness
5. Staff will reduce the risk of overheating by not over-dressing or over-wrapping the infants.
6. All parents/guardians of infants cared for in the facility will receive a written copy of our Infant/Toddler Safe Sleep Policy before enrollment, will review the policy with staff, and sign a statement saying they received and reviewed the policy.
7. The temperature in the room where the infant(s) sleep will be kept between 68-75°F and monitored by the thermometer kept in the infant sleeping room.
8. To promote healthy development, awake infants will be given supervised "tummy time" for exercise and for play.





9. Infants' heads will not be covered with blankets or bedding. Infants' cribs will not be covered with blankets or bedding. We may use a sleep sack instead of a blanket.
10. No loose bedding, pillows, bumper pads, etc. will be used in cribs. We will tuck any infant blankets in at the foot of the crib and along the sides of the crib mattress.
11. Toys and stuffed animals will be removed from the crib when the infant is sleeping.
12. Pacifiers will be allowed in infants' cribs while they sleep. When the pacifier falls out of the sleeping infant's mouth, it will not be reinserted into the infant's mouth. The pacifier is the only object we will allow in a crib.
13. A safety-approved crib with a firm mattress and tight-fitting sheet will be used.
14. Each infant will sleep have his or her own crib. Only one infant will be in a crib at a time, unless we are evacuating infants in an emergency.
15. No smoking or electronic cigarettes are permitted in the infant room or on the premises.

I, the undersigned parent or guardian of _____ (child's full name), do hereby state that I have read and received a copy of the facility's Infant/Toddler Safe Sleep Policy and that the facility's director/ owner/operator (or other designated staff member) has discussed the facility's Infant/Toddler Safe Sleep Policy with me.

Child's Name

Parent's Name

Parent's Signature

Date





Tuition and Fees

2019 – 2020 School Year

Student Name: _____

Academic Program	Hours	Annual	10 Installments
Preschool Program (Full + Pre/After Care)	7:00 am to 6:00 pm	<input type="checkbox"/> \$11,000	<input type="checkbox"/> \$1,150
Preschool Program (Full Program)	8:30 am to 3:30 pm	<input type="checkbox"/> \$9,200	<input type="checkbox"/> \$950
Preschool Program (Half Day)	8:30 am to 12:30 pm	<input type="checkbox"/> \$8,200	<input type="checkbox"/> \$850
Infant Program		<input type="checkbox"/> \$12,500	<input type="checkbox"/> \$1,300
Pre/After Program Care		<input type="checkbox"/> \$1,800	<input type="checkbox"/> \$200
VPK Wrap Around Full Time	7:00 am to 6:00 pm	<input type="checkbox"/> \$8,700	<input type="checkbox"/> \$870
VPK Wrap Around Part Time	8:30 am to 3:30 pm	<input type="checkbox"/> \$7,700	<input type="checkbox"/> \$770
VPK only	9:00 am to 12:00 pm	<input type="checkbox"/> \$0	<input type="checkbox"/> \$0

First installment is due on the 1st on the enrolling month and is non-refundable. Sibling Discount of 5% is applied to the youngest sibling (2 years old and older only).

Summer Program	Hours	Annual	2 Installments
Preschool Program (Full + Pre/After Care)	7:00 am to 6:00 pm	<input type="checkbox"/> \$2,400	<input type="checkbox"/> \$1,250
Preschool Program (Full Program)	8:30 am to 3:30 pm	<input type="checkbox"/> \$1,840	<input type="checkbox"/> \$950
Preschool Program (Half Day)	8:30 am to 12:30 pm	<input type="checkbox"/> \$1,640	<input type="checkbox"/> \$850
Infant Program		<input type="checkbox"/> \$2,500	<input type="checkbox"/> \$1,300

Required Fees:

New Student Enrollment Fee \$300
 Current Student Re-Enrollment Fee \$300

Optional Fees:

Diaper/Wipes/Bibs/ monthly fee F/T \$80 Monthly
 Diaper/Wipes/Bibs monthly fee P/T \$45 Monthly
 Organic Food Program \$110 Monthly
 Extracurricular **four** activities \$120 Monthly
 Extracurricular individual activities \$35 Monthly
 Uniform shirts \$18 each.

Program:
Parent Name:
Signature:
Date:



Tuition Agreement

2019 – 2020 School Year

Student Name: _____

Fees and Discounts (Please initial each one)

- _____ Registration/Processing fee: \$300.00 per student each school year
- _____ Registration fee is non-refundable and is due at enrollment
- _____ Organic Food Program option is charged on a monthly basis
- _____ Late pickup fee: \$15 for the first 5 minutes and \$1 per minute after
- _____ After 3rd late pickup will be \$15 for the first 5 minutes and \$15 per each five minutes after
- _____ Returned check fee \$30.00
- _____ Late Payment Fee \$30.00 (**payment made after the 5th**)
- _____ 5% Sibling discount full time tuition only – does not apply to infants.

Agreement

1. I agree that monthly installments are due by the 1st of each month and payments are late after the 5th of each month.
2. I agree that payments can be made with a check delivered to the front desk or credit cards/ACH electronically via Tuition Express platform.
3. I agree to pay full tuition even if my child is absent. There will be no credits for sick days, absence or holidays.
4. If any payment has not been received and is late 20 days, the student(s) shall be subject to dismissal. Any exception must be made in writing. Terms and conditions of payment must be fully and promptly made.
5. New Generation Montessori reserves the right to send delinquent accounts to collection agency. If your account is not paid in full and it is turned over to a collection agency and/or attorney, I agree to be responsible for all reasonable fees necessary for the collection of the delinquent account including, but not limited to, due costs and reasonable attorney's fee of 33% of the balance.
6. I agree to pay the fees stated above
7. The terms of this agreement are subject to change by New Generation Montessori without previous notice.
8. In the event of a divorce/separation of parents, both will continue being responsible for paying the total tuition for their child
9. *I have read and agree to the above fees and Tuition Agreement. I understand that this agreement must be returned to the school along with all other requirements*

Summary of Monthly Tuition agreed:

Registration Fee \$ _____	Notes: _____
Monthly Tuition \$ _____	_____
Extra(s) \$ _____	_____
Extra(s) \$ _____	_____
Extra(s) \$ _____	_____
Extra(s) \$ _____	_____

Total Monthly Payment agreed: \$ _____

Person responsible for paying for pre-school Signature Relationship to child Enrollment Date



School Supply list 2019-2020



Hello Families!

Here is our school supply list for the 2018-2019 school year. Each item on the list is very important to the functioning of our classroom throughout the year. If you are unable to get something on the supply list, or have any questions, just let the front office know. If you are willing and able to do so, please buy extras. The more the merrier!

Please DO NOT label the individual items with your child's name, our classrooms are a community and we share our supplies. Only label the bag with all the items inside it.

- 1 Elmer's Glue Stick
- 2 bottles of Elmer's white glue
- 1 Package of Crayola Washable Markers
- 1 Set of Watercolor Paints or 1 bottle of any color
- 1 pack of thick crayons
- Copy & Print Paper, Letter Size Paper, 20 Lb, Ream Of 500 Sheets
- 1 pair of kid friendly scissors
- 2 package of color pencils
- 1 box of Tissues
- 1 box of zip-lock bags
- 1-2 packages of play dough
- 1 pack of Construction paper
- A brush or comb
- Face wipes
- Toothbrush
- Toothpaste
- One Age-appropriate "Montessori" book for classroom (See front desk for suggestions!)



Optional class items that we could always use if you are able (even throughout the year):

- Grocery Plastic Bags!!!
- Dish Sponges
- Scrap book paper
- Cotton Balls/ Q- Tips
- Colored Sharpies
- Copy Paper
- Pens
- Expo Dry erase markers
- Empty Spray Bottles
- Extra folders
- costumes
- empty little boxes
- empty little jars
- Hand Sanitizers
- Clorox wipes
- Lysol

Credit Card Recurrent Charge Authorization Form



Recurring Payments Will Make Your Life Easier:

- It's convenient (saving you time and postage)
- Your payment is always on time (even if you're out of town), eliminating late charges

Here's How Recurring Payments Work:

You authorize regularly scheduled charges to your credit card. You will be charged the amount indicated below each billing period. A receipt for each payment will be emailed to you and the charge will appear on your bank statement as an "ACH Debit." You agree that no prior-notification will be provided unless the date or amount changes, in which case you will receive notice from us at least 10 days prior to the payment being collected.

Instructions:

1. Ensure entire form is complete, check the info twice, then sign and date
2. Return signed form to the School Office

<input type="checkbox"/> Visa	<input type="checkbox"/> Master Card	<input type="checkbox"/> Amex	<input type="checkbox"/> Discover
Cardholder Name:			
Card Number:			
Expiration Date:			
CCV :			
			

Note: Remember to enter your ZIP CODE

Zip Code :

I, _____ (Full Name) authorize New Generation Montessori to charge my credit card or my checking account indicated above for \$ _____ (Amount) on the _____ (Day or Date) of each _____ (Frequency) for payment of my _____

Billing Address: _____ Phone Number: _____

City, State, Zip : _____ Email: _____

Signature: _____ Date: _____