1790 Sequoia BLVD.
Tracy, CA 95376
WeeCare@Weecaredaycare.com



Student Information

First Name:		M.I.:	Last Name:	e:		
Birthdate:	Age:		Sex: M or F		Ethnicity:	
Siblings Enrolled in Wee Ca	are Day Care a	and/or WVC	A:			
Does your child wear unde	rwear succes	sfully in mul	ltiple environr	nents,	and accident free?	
Student History						
What are your hopes for e	nrolling your	child in Wee	e Care Prescho	ool?		
Has your child previously a	ttended anot	her school o	or child care?			
If yes, did your child have I	oositive exper	rience?				
Has your child been asked previous care provider exp		•				
What are your child's stren	ngths?					
Has your child ever been e have a current IEP? If yes,		ssessed for a	a developmer	ital or r	nental concern, or	
Authorized Representative (P	arent/Guardia	n)				
First Name:		Last Name:			Relationship:	
Address:		City:		Zip Co	de:	
Home Phone:	Cell Pho	none: Work Phone:		one:		
SSN:	CA Drive	CA Driver License #:		Representative Live with the Parent? Y or N		
Email Address:	•		1			

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at this center.



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Additional Authorized Representative (First Name:			Last Name:			Relationship:	
Address:			City:		Zip Co	ode:	
Home Phone:	C	Cell Ph	one:		Work Phone:		
SSN:	C	CA Driv	•		•	epresentative Live with the arent? Y or N	
Email Address:							
Requested Program Opti Check Requested Progran		ead th	e Wee Care Prescho	ool Fee Sc	chedule _	initia	ı. Please
Program Option			Selection Option	ons- See	Fee Sch	edule	Selection
Pre-Kindergarten and P	reschool	N	Ionday-Friday Full Day	/			
Pre-Kindergarten eligible			IWF Full Day				
turning five between JAI			TTH Full Day				
Preschool eligible stude four between IAN 1-DEC	_	- 1	Monday-Friday Part Time				
four between JAN 1-DEC 31.			MWF Part Time				
			ΓΗ Part Time				
Young Preschool		N	londay-Friday Full Day	/			
Minimum 24 Mos at enr	ollment, and	N	IWF Full Day				
turning three this school year.		Т	ΓΗ Full Day				
Consent for Student Rele	ease						
l,	the au	thoriz	ed representative of	f			give my
permission for West Valle	y Christian A	Acadei	my Preschool to pho	tograph	my chile	d for classroo	m use as an
enrolled student. I furthe	r authorize t	he use	of my child's image	e in the fo	ollowing	: Please circle	e Y (Yes) or N
(No)			, , ,		J		, ,
Y or N Yearbook							
Y or N Website and Mar	keting Mate	erials					
Y or N Newsletter							
Authorized Representativ	e Signature:	·				Date:	
Non-Discriminatory State	ement						
West Valley Christian Aca	-			_	-		-
ethnic origin to all the rig	hts, privilege	es, pro	grams, and activitie	es accord	ed or m	ade available	to students

Child's Name _____

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2019-2020 Admissions Agreement

First	Last	
Children's attendance is outlined with	chool operates from 6:00 AM to 6:00 PM In the feature of the feature option, and enrounded program and schedule option.	
	chool provides preschool and child care se Community Care Licensed facility, and is a Biblical Worldview <i>Initial</i>	
Department of Health and Human Se	ervices Right	
West Valley Christian Academy Presch Service, Community Care Licensing, T CCL, Title 22 101200	chool is licensed by the California Departm Title 22: LIC #390307976.	nent of Health and Human
•	ection authority specified in Health and S 6.8535.	afety Code Sections
•	nority to interview children or staff withou	ut prior consent.
Attendance Schedule		
	lule. West Valley Christian Academy Presogram options, attendance schedules, fees in the office.	•
that tuition schedules are published a	Academy Preschool Fee Schedule in its en annually before the start of a school year, e according to CCL, Title22 Init.	and will not be changed
Financial Policy		
Accounts are due on the first (1st) of	each month whether or not a courtesy st	atement is received. Any

account which becomes thirty (30) days delinquent from the first (1st) of each month will result in student dismissal. There is a grace period until the last working day before the third (3rd), after which a

\$50.00 late fee will be charged. In addition, a \$10.00 fee will be charged for any returned check.

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Payment Options

New and enrolled families will receive a monthly invoice. First month tuition is due in person before the child's first day of attendance. Payments are due on the first (1st) of each month, and late on the third (3rd) of each month. Alternative payment schedules must be approved by administration. The following payment options are available:

- 1. Personal Check, Cashier's Check, Money Order, or Cash paid at the WVCAP Office.
- 2. Credit Card and Online Tuition Submission (i.e. Paypal) (\$5 processing fee)

Account activity, payment, and/or inquiry will be made in person, online or by mail to the WVCAP Care Office:

West Valley Christian Academy Preschool

1790 Sequoia Blvd.

Tracy, CA 95376
(209) 835-2787

Late Drop-off and Pick-up Fees

Children arriving after 9:30 AM will be charged a \$10 late drop-off fee for each occurrence. A late pick-up fee of \$20 after 6:00 PM for Full Time, and 2:30 PM for Part Time, will be added to for every fifteen (15) minute interval or portion thereof. Persistent late pick-up for Full Day students will result in termination due to CCL regulations of program hours. ______initial

School Closures

All school closure days, inclusive of holidays, are posted on our Parent Board in the WVCAP Office annually, and are calculated into the monthly fees. No tuition credit is given for school closure or student absence. _____initial

Status Change

Two status changes are permitted without fee per school year (September-August). Additional status change requests will result in a \$25 fee added to your bill. Status changes are reflected on the next billing period per date of submission of the *Status Change Request Form*. All status changes must be approved by the Director, and a new Admissions Agreement must be completed. *initial*

Schedule Changes

Schedule Changes require a two week written notification, an updated Admission Agreement, and director approval. A maximum of 4 schedule changes are permitted each program year, and are subject to a \$50.00 processing fee. **initial**

Potty Training

West Valley Christian Academy Preschool provides potty training children in the Young Preschool Department Monday-Friday schedule option only. There is a monthly fee of \$50 a month while the child is potty training. Children who can meet the potty trained definition according outlined in the parent handbook will no longer be charged the fee beginning the following billing statement.

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Withdrawal/Withdrawal with Intent to Return

A family initiated withdrawal must be in writing and submitted a minimum of two weeks in advance of the last desired date of attendance. A \$250 fee will be applied automatically to the account if written withdrawal notification is less than two weeks before the desired last date of attendance. First month tuition and application payments are nonrefundable, and will not be prorated for withdrawal in the first month of enrollment. No refunds will be provided for mid-month withdrawal. Refunds will be provided for services that were not received, but paid for. ______initial

Families who withdraw with intent to return are terminating the Admissions Agreement, and will be required to submit a new Application for review and acceptance by the Director no sooner than the day after the last day of attendance. A new admission decision letter with instruction will be sent. Families who withdraw with intent to return are not guaranteed placement; placement is based on current enrollment availability and may result in placement on the waitlist.

Termination of Admission Agreement The Admissions Agreement can be terminated resulting in dismissal of the child and family for the following conditions:

- Non-compliance with Community Care Licensing Regulations, Title 22 (available for review at www.ccld.ca.gov)
- Delinquent Accounts
- Violation of written policies outlined in the Preschool Parent Handbook
- False information on written documents
- Inappropriate behavior toward staff on the part of parent or child.
- Challenging behavior that impact the personal rights of enrolled children and/or employee rights, including but not limited to biting, hitting, kicking, and throwing of objects.
- A child has obtained eligibility for special education services that are recommended to be provided by a public and/or private special education service in compliance with the child's right to the Least Restricted Environment as outlined in their IFSP/IEP or eligibility for services documentation.

Environment as outlined in their IFSP/IEP or eligibility for services documentation.	
	initial
Non-Discriminatory Statement	
West Valley Christian Academy Preschool does not discriminate against any race, colo ethnic origin to all the rights, privileges, programs, and activities accorded or made avat this center.	•
Authorized Representative Signature	_ Date
Director Signature	Date