P.O. Box 1957

72125 Military Road

Covington, LA 70434-1957

Phone: (985) 893-3112

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**Application for Enrollment**

**PLEASE NOTE: IT IS LEGAL FOR EITHER PARENT TO PICK UP THEIR CHILD, AT THEIR DISCRETION, UNLESS A CERTIFIED/NOTARIZED COPY OF A COURT ORDER RESTRICTING VISITATIONS IS IN THE CHILD'S FILE IN THE OFFICE OF THE ACADEMY.**

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Child’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(First) (Middle) (Last)

Name commonly used: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Birthday:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Gender:\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mother's Home Telephone#: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Father's Home Telephone#:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Mother's Name**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Marital Status: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Place of Employment: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Occupation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Cell phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Work phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Father's Name**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Marital Status: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Place of Employment: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Occupation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Work phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If divorced or separated, who does your child live with mom or dad or joint custody? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If joint custody, what are the daily arrangements for your child?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**THIRD PARTY PICK-UP AUTHORIZATION**

**THIS SECTION MUST BE COMPLETED AND SIGNED**

My child has permission to be released to the following individuals in addition to emergency contact persons.

The following persons, properly identified, are authorized to pick up my child,

,from AppleTREE Academy.

**Name Relationship**

1.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Work phone: \_\_Cell phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Home phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Work phone: \_\_Cell phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Home phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Work phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Cell phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Home phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

4.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Work phone: \_\_Cell phone: \_\_Home phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

5.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Work phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Cell phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Home phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Parent/Guardian's Signature Date**

I authorize the facility to secure emergency medical treatment for my child. Preferred Hospital: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent's Signature: \_\_\_Date: \_\_\_\_

Individuals to contact in case of an emergency:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone #:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

List of family members that live with the child (other than the parents):

Name Age Gender

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

What language is usually spoken at home? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If more than one language is spoken, what other language is spoken, how often and by whom? \_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Present general health status of child (describe any handicaps or special problems) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Twice a year AppleTREE Academy checks your child's developmental milestones. You will be given a copy of your child's milestones. If your child has already been formally assessed and diagnosed with anything that may assist us in our observations, please list: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Child's Doctor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Doctor's Phone #:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Child's Dentist: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Dentist's Phone #:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Does your child have any food allergies? Yes No

Does your child have any other allergies? Yes No

Does your child have any dietary restrictions? Yes No

If “yes, please explain: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

What are your child’s favorite foods? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

What are your child's least favorite foods? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Does your child enjoy being read to? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Which play materials (toys) does your child use the most frequently? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Does your child watch TV? Yes or No if so how many hours per day? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

What is your child's interest or favorite activities? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Does your child initiate his/her own activities? \_\_Never, \_\_ Seldom, \_\_Sometimes, \_\_ Often

Does your child enjoy playing alone? \_\_Never, \_\_ Seldom, \_\_Sometimes, \_\_ Often

Do other children tend to stimulate your child? \_\_\_\_\_\_\_\_\_\_\_\_\_ Make him/her shy? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Cause him/her to lose self-control? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Have little or no effect? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Does your child participate in dressing? Yes No Can he/she button? Yes No

Can he/she use a zipper? Yes or No Tie? Yes or No Put on a Coat? Yes or No

Does your child sing songs? Yes or No if so what are some of his/her favorites: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Does your child listen to music on a regular basis? Yes or No What type? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

List any previous group experiences (Day Care, Mother's Day Out, etc.) and the child's reactions to these:\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Does your child have separation anxiety and if so how do you handle it? Yes or No

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

How does your child comfort him/herself when they are distressed? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

List any fears your child has: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Is your child a biter and if so how have you handled it in the past? Yes or No \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Does your child wear diapers? Yes or No

Is your child completely potty trained? Yes or No

Does your child have bladder control? Yes or No

* If “no”, how many times a day does your child soil his/hers clothes? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Does your child have bowel control? Yes or No

* If “yes” about what time does he/she have their bowel movements? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

What terminology does your child use regarding toileting? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

How much sleep does your child get a night? \_\_\_\_\_\_\_ Does he/she nap? Yes or No If so for how long? \_\_\_\_\_

Does your child fall asleep easily? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

What do you do if he/she has trouble sleeping? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Does your child presently suck a pacifier? Yes or No Thumb or Fingers? Yes or No

Does your child sleep with a special toy? Yes or No if so what? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Why have you chosen to place your child at AppleTREE Academy? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

How did you hear about AppleTREE Academy? \_\_\_\_\_ Google, \_\_\_\_\_Newspaper, \_\_\_\_\_Kids Directory, \_\_\_\_Facebook, or by Whom\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

What do you hope your child will gain or learn from his/her experience here? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

What do you, as parents, expect or hope that AppleTREE can do for you? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Please list anything else you think would be helpful to us in understanding and aiding the development of your child. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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I will bring my child to school about \_\_\_\_\_\_\_\_\_\_\_\_\_a.m.

I will pick up my child at school about\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_p.m.

P.O. Box 1957

72125 Military Road

Covington, LA 70434-1957

Phone: (985) 893-3112

Fax: (985) 893-5852

**Emergency Information**

Child's Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date Of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mother's Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell Phone: ( ) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Phone: ( ) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Work Phone: ( ) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Father's Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell Phone: ( ) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Phone: ( ) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Work Phone: ( ) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**PERSONS TO CALL IF PARENTS CANNOT BE REACHED**

1. Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell Phone :( )\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Phone: ( ) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Work Phone: ( ) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Relationship To Child: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2. Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell Phone: ( ) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Phone: ( ) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Work Phone :( )\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Relationship to Child: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Doctor's Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Office Phone: ( )\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Dentist's Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Office Phone: ( )\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Hospital Preference: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: ( )\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Hospitalization Insurance Carrier: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Policy Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Group Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

EMERGENCY CARE AUTHORIZATION

I/we, the undersigned, being the parents or legal guardian/s of the child, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_do hereby authorize the Director and/or staff members of AppleTREE Academy to administer and/or procure emergency medical care or treatment for the child, as deemed necessary, in the event I/we cannot be reached.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Parent or Guardian's Signature) (Parent or Guardian's Signature)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Director/Administrator's Signature)

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Description automatically generatedP.O. Box 1957

72125 Military Road

Covington, LA 70434-1957

Phone: (985) 893-3112

Fax: (985) 893-5852

**Children's Records**

**Confidentiality and Security of information on file.**

The administrator of AppleTREE Academy will supervise the maintenance of children's records. The records are located in the Administrators office. Each child's teacher will receive a copy of the child's enrollment application. The copy is included in the classes Orientation Training Book. The book, is in the classroom cabinet unless, it is in use in the class.

**Employees of AppleTREE Academy MUST HAVE written permission from the parent before any pictures and or information concerning a child will be released.**

**Pictures**

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ give permission to AppleTREE Academy, for my child to be photographed. Photographs may include newspaper and or school photographs. I understand that the pictures may be displayed throughout the school or used for the purpose of advertising AppleTREE Academy.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent Signature Date

**Address and Phone Number**

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ give permission to AppleTREE academy to release my child's address or phone number for the purpose of inviting children to parties, or to send thank-you notes, get well notes, etc.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent Signature Date

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**AppleTREE Academy**

**Tuition Information Acceptance Form**

~TUITION~

Fall Registration $150

Summer Registration $50

**Month**  **Week**  **3-day** **2-day** **Extra Day**

Regular Student:

$715 $165 $130 $95 $50

Infant Student

$780 $180

Tuition is paid by the week except in situations where other payment arrangements have been made through the office. Weekly payments are due on Monday of each week. If tuition is not paid by Wednesday a late fee of $10.00 will be charged. An additional $10.00 late fee will be charged for each week tuition is not paid. If your account becomes delinquent (2 weeks) we will ask that you withdraw your child from the Academy. You will be held responsible for any delinquent amounts plus any legal costs incurred during collection efforts by the Academy.

**N.S.F. CHECKS**

All N.S.F. checks will automatically be redeposited. There is a $35.00 charge on all N.S.F. checks. The fee must be paid within 5 working days of notification to AppleTREE Academy from your bank. After three N.S.F. checks you must pay cash for the next 90 days.

**LATE PICK-UP CHARGES**

An overtime fee will be charged when children are left at the Academy past closing time. The fee will be $1.00 per minute for each child. The Closing Manager or Employee will collect this fee on the spot. If this is abused it will be handled on a one on one basis and may lead to dismissal.

**SICK DAYS**

If your child is sick, you are responsible for paying your child's tuition. Sick days only apply to children who are enrolled full time, twelve months per year, September to September. The child is eligible for five sick days annually and must attend school one hundred days before sick days may be taken. The sick days are limited to a maximum of two days per week. If you withdraw your child or change your child's enrollment to part time

you are no longer qualified for sick days and therefore must reimburse AppleTREE Academy for sick days that

have been taken.

**LATE SICK PICK-UP CHARGES**

When your child gets sick at school and a parent has been called to pick up their child from school you will have 75 minutes to pick up your child. If a child is not picked up within the 75 minute period the responsible parent will be charged $1.00 per minute late pick-up fee. That fee will be due when the child returns to school.

**WITHDRAWAL PROCEDURES**

**AppleTREE Academy requires a two-week (ten school days) notification of intent to withdraw a student**. The parent will be held financially responsible for two full weeks of tuition.

I agree to pay in advance, the following amounts for my child's care:

Fall (Sept.) Registration Fee: $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Full-time tuition: $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_per week

Part-time tuition: $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_per week

Summer (June) Registration Fee $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Full-time tuition: $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_per week

Part-time tuition: $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_per week

I, undersigned parent or guardian of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, do hereby acknowledge my receipt, understanding and acceptance of the Tuition Information Acceptance Form that covers Tuition, N.S.F. Checks, Late Pick-Up Charges, Sick Days, Breakfast Prices, Late Sick Pick-Up Charges and Withdrawal Procedures. I also signify my agreement to cooperate with the Academy by complying with policies and procedures.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent's Signature Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Director's / Administrator's Signature Date

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Fax: (985) 893-5852

**Medication Policy**

**AppleTREE Academy does not administer medication!**

You are welcome to come to the school and administer medication to your child. However, you must fill out the proper medicine form before giving the medicine to your child. AppleTREE Academy will **NOT** store medicine for your child, here at the center! You must take your medicine with you after you have administered the medication. Any questions or concerns, please ask Staff Management.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Guardian Signature Date

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**Parent Handbook Acceptance**

I, the undersigned parent or guardian of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, do hereby acknowledge my receipt, understanding and acceptance of the Parent Handbook of AppleTREE Academy. I also signify my agreement to cooperate with the Academy by complying with those policies and procedures.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Parent/Guardian's Signature) (Date)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Director/ Administrator) (Date)

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**AppleTREE Academy**

**Bottle Authorization Policy**

I give permission for my child, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ to hold his/her bottle

(Child's Name)

while in a crib, on a mat, etc.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Parent/Guardian’s Signature) (Date)

**Play Equipment Policy**

I give permission for my child, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ to use all of the play

(Child's Name)

equipment and participate in all of AppleTREE Academy's activities that are age appropriate.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

{Parent/Guardian's Signature) (Date)

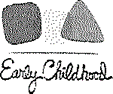
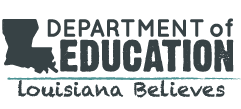
**Fever Policy**

I understand that I will be contacted to pick, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ up from school if

(Child’s Name) his/her temperature exceeds 100.4 degrees. The Academy will not be allowed to administer any fever reducing medicine. Your child may **NOT** return until her/she has been fever free for 24 hours without fever reducing medicine or until the Academy receives a doctor's note stating that the child is no longer contagious and can return to school. The doctor's note can be faxed to (985) 893-5852.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Parent/Guardian's Signature) (Date)



§1913.A

**Water Activities Authorization Form**

My child has permission\* to participate in the following type(s) of water activity:

Location(s) of activity\*\*

(Description of all types of water activities included)

Parent's Signature Date

Parent's Signature Date

Parent's Signature Date

Parent's Signature Date

\*permission must be updated at a minimum, annually

\*\* if activity is off-site, transportation authorization is required and regulations regarding transportation must be followed.

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Fax: (985) 893-5852

**Recording and Taping of Children**

5307.D.

The provider utilizing any type of recordings or taping of children including but not limited to digital recordings, videotaping, audio recordings, web cam, etc. shall obtain documentation signed and dated by the parent indicating their awareness of such recordings.

Parents as of this time we do not use web cams in the classroom. Thus far only times we have videotaped students have been for an occasion such as holiday activity, classroom performance, etc.

This is not a permission form. AppleTREE Academy in compliance with Bureau of Licensing is making you aware of such recordings.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent's Signature Date

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**AppleTree Academy Authorization**

**for the Application of Topical Products**

Child's Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I give permission for AppleTree Academy's staff to apply the following topical products to my child.

**Yes** **No**

( ) ( ) Sunscreen

( ) ( ) Insect Repellant

( ) ( ) Diaper Rash Ointment

( ) ( ) Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Name of Product)

This one time authorization will remain in effect until a new authorization is signed.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Guardian's Signature Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Director/Administrator Signature Date

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Phone: (985) 893-3112

Fax: (985) 893-5852

**Parent Interview Form**

Child's Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Interview: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Guardian's Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Yes or No Completed Application for Enrollment

Yes or No Received Parent Handbook

Yes or No Received Class Schedule

Yes or No Received Calendar

Yes or No Tour Conducted of School

Yes or No Meet the Teacher (if available)

Yes or No Received Federal Food Program Forms (CCAFP)

Yes or No Tuition

Special Needs for Child:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Areas of Concerns (Past Experiences):

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

AppleTREE Academy Staff Member Signature Date

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Parent

Handbook

Updated: 1/5/2023

**INTRODUCTION**

AppleTREE Academy provides a program designed for children 6 weeks to 5 years of age. The Academy’s curriculum emphasizes the whole child – physical, emotional, intellectual, social – and is presented primarily in choices of learning experiences and activities which the staff structures. Each room is divided with areas for fine and gross motor activity personal, social, and cognitive development, quiet and active play, and creative expression. Children’s development is fostered by a staff, which listens and talks to children about what they are doing in all these activities.

**GOALS FOR THE CHILDREN**

Our goal is to provide a positive, loving atmosphere that will promote all areas of a young child’s growth. Specifically, our goals are to give the children the opportunity to:

* Develop healthy self-concept.
* Develop both socially and emotionally.
* Develop trust in adults and peers.
* Develop independence and responsibility for self.
* Develop security and a feeling of success.
* Develop skills in the physical, cognitive, and language area.
* Develop self-expression in art, music, and socio-dramatic play.

**EQUAL OPPORTUNITY**

In accordance with Federal law and U.S. Department of Agriculture policy, AppleTREE Academy does not discriminate against any person(s) based on race, color, national origin, sex, age, or disability. Any person(s) alleging discrimination has a right to file a complaint within 180 days of the alleged discriminatory action. To file a complaint of discrimination, write immediately to:

**USDA**

**Director, Office of Civil Rights**

**1400 Independence Avenue, S.W.**

**Washington, D.C. 20250-9410**

**Or Call (800) 795-3272 or 720-6382 (TTY)**

The complaint should contain the name, address, and telephone number of person filing complaint, the specific location and name of the entity for whom complaint is against, the nature of the incident or action that led the complainant to feel discrimination was a factor, the basis on which when complainant feels discrimination exists, and the date, names, titles, and business addresses of persons who may have knowledge of the discriminatory action.

“USDA is an equal opportunity provider and employer”

**ENROLLMENT PROCEDURES**

AppleTREE Academy assures equal opportunity for all qualified persons without regard to race, color, religion, sex, national origin, age, handicap, marital status or veteran’s status in admission, attendance and/or employment at the Academy.

The parent is responsible for completing all enrollment forms prior to the child’s attendance at the academy.

**Priority –** Children will be admitted in the following order or preference until maximum enrollment is achieved:

Staff Children

Siblings

Full-time children

Part-time children

Children are enrolled in the order in which applications are received. When space is not available, the application form will be kept on file and the child’s name will be placed on a waiting list, the order of which is determined by the “date of application” on the application form.

**HOURS OF OPERATION**

The Academy opens at 6:30 a.m. and closes at 6:00 p.m.

**SUMMER SESSION**

Any full-time students that change their enrollment to part-time for the summer are not eligible for sick days and cannot be guaranteed full-time enrollment for Fall.

**WITHDRAWAL PROCEDURES**

AppleTREE Academy requires a two-week (ten School days) notification of intent to withdraw a student. The parent will be held financially responsible for two full weeks of tuition.

**CHILD’S RECORDS**

Any changes in name, address, parents place of employment, phone numbers, allergies, child’s doctor, or person authorized to pick the child up must be submitted in writing.

**AGES SERVED**

Children between the ages of 6 weeks to 5 years of age are eligible for enrollment. When you register your child, you sign an agreement to abide by the policies of the Academy and to be financially responsible for all fees.

The registration forms must be completed prior to the first day your child attends school. These forms are required by the State of Louisiana and by the Academy: *Application/Emergency Information Form, Child’s Immunization Record, Parent Consent Form and Parent Handbook and Tuition Acceptance Form.*

**FEES**

Tuition is paid weekly and is due in advance on Monday of each week. We will accept cash, credit/debit cards, check or money order made payable to AppleTREE Academy. If you pay by cash, please give the cash to a manager and a cash receipt will be issued to you.

***See Tuition Information sheet for fee schedule***

**NON-REFUNDABLE REGISTRATION FEES**

A registration fee is payable when you enroll a child or children for the first time. Registration is due for both summer and fall at the same time each year in February.

***See Tuition Information sheet for fee schedule***

**FINANCIAL ARRANGEMENTS**

1. Tuition is due on Monday considered late after Wednesday.
2. There is a $10.00 late fee per week for each week of tuition that has not been received by Wednesday.
3. Your child may not attend school if tuition and late fees have not been rendered by 6 working days past the Wednesday deadline. **Example**: Tuition due on Monday, late after Wednesday 6 working days later is the next Thursday.
4. If your child does not come to school, you are responsible for paying your child’s tuition! Sick days only apply to children who are enrolled **Full-time**, twelve months per year, September to September. The child is eligible for five sick days annually and must attend school one hundred days before sick days may be taken. The sick days are limited to maximum of two day per week. If you withdraw your child or change your child’s enrollment to Part-time you are no longer qualified for sick days and there for must reimburse AppleTREE Academy for sick days that have been taken.

**Charges for Late Pick-Up of Children –** An overtime fee will be charged when children are left at the Academy past closing time. The fee will be $1.00 per minute for each child. **This fee will be collected on the spot by the Administrator/Director or Employee.** The Academy expects parents to pick their children by 6:00p.m. If this is abused, it will be handled on a one-on-one basis and may lead to dismissal.

**N.S.F.** – There will be a $35.00 charge for all N.S.F. checks. This charge must be paid on the next week’s tuition! All N.S.F. checks will be redeposited. After three N.S.F. checks you must pay cash for the next 90 days.

**CHILD CARE ASSISTANCE**

Families who are receiving assistance from the State of Louisiana must keep up to date on all procedures concerning their account. It is mandatory that you check your child in and out for your child’s attendance and you must sign your child in and out on the sign-in sheet next to your child’s classroom. Each child has four people who must be fingerprinted to receive payment. If you have someone other than the four people to transport your child to or from the school than the next fingerprinting time you must key in the previous check-in or check-out (whichever one you missed).

If your child is sick and goes to the doctor you are to give us a note from the doctor. This will help insure your placement with C.C.A. This program is very strict on absences and will drop your child from the program if you have gone over the allotment. In addition, the State of Louisiana will not pay for unexcused absences. Each month you will receive a tuition statement letting you know what your child’s balance is. You are 100% responsible the anything the state does not pay, and it must be paid within 5 days of receiving the monthly statement. If your child attends school for only a half a day, then you will be responsible for paying for the other half of the day.

**VACATION AND HOLIDAY CREDIT**

No credit on tuition is given for scheduled school holidays and vacation periods.

**CREDIT FOR ABSENCES**

Sick days only apply to children who are enrolled Full-time, twelve months per year, September to September. The child is eligible for five sick days annually and must attend school one hundred days before sick days may be taken. The sick days are limited to maximum of two days per week.

If you withdraw your child or change your child’s enrollment to part-time, you are no longer qualified for sick days and therefore must reimburse AppleTREE Academy.

**MAKE UP DAYS FOR ABSENCES**

The Academy is licensed to handle a certain number of children per day, distributed among various classrooms in specific numbers. Therefore, the Academy cannot grant opportunities to make up any days lost because of absence.

**SCHOOL CLOSINGS**

When and if there is a school closing, you are responsible for the full amount of tuition.

**PERSONNEL**

AppleTREE Academy employs full and Part-time staff to provide continuous and consistent care and learning activities for the young children. Staff members are trained in child development and early childhood education and are continuing their training through in-service workshops and conferences. Staff members work closely together to provide the best possible care for the children. Staff members are trained in CPR and First Aid in addition to being state certified annually.

**FROG STREET CURRICULUM**

Each classroom has a designated curriculum; it is the teacher and the assistant’s responsibility to execute the curriculum.

**Infants**

* Designed around the latest scientific early brain development research, **Frog Street Infant** curriculum is designed to build strong foundations for little ones ages 0-18 months. This child-centered program includes easy-to-use activities that:
  + Equip caregivers to nurture the little ones in their care
  + Optimize key windows of opportunity for growth and development
  + Are designed with intention and purpose and organized around developmental learning domains
  + Feature Dr. Becky Bailey’s Conscious Discipline® strategies to enhance social and emotional development

**Toddlers**

* Designed around the latest scientific early brain development research, this year-round program focuses on enhancing the simple joy of childhood while equipping caregivers to nurture curiosity through exploration. Frog Street Toddler, created by Dr. Pam Schiller, incorporates Dr. Becky Bailey’s Conscious Discipline® and includes 52 weeks of activity choices specifically created for children ages 18-36 months. Frog Street Toddler offers:
  + Activity choices organized around five developmental domains  
    Differentiated instruction options to meet the needs of all learners
  + Easy infusion into daily routines, such as diaper changing, transitions and outdoor play
  + Designed with intention and purpose to move children forward in their development

**Threes**

* The cognitive, physical, and social skills of most rapidly developing three-year-olds are significantly different from other ages, according to early childhood brain research. Despite these differences, three-year-olds have been combined with either younger or older children in traditional classrooms, due to the lack of developmentally appropriate instruction.
  + Recognizing this gap, Frog Street has announced the launch of the first-ever comprehensive curriculum for three-year-olds!
  + Frog Street Threes provides intentional instruction in key areas of development so children ages 36-48 months can effectively continue the path to kindergarten readiness. Key components include:

• Easy-to-use activities developed around early brain development research  
• Well-rounded scope of activities that address all developmental domains  
• Intentional instruction that optimizes key windows of opportunity for growth and development  
• Social and emotional emphasis featuring Dr. Becky Bailey’s Conscious Discipline

**Pre-K**

* Frog Street Pre-K is a comprehensive, research-based program that integrates instruction across developmental domains and early learning disciplines. The program is engaging for both teachers and children and is easy to implement!
  + The cornerstones of the program include:
    - An extensive integration of theme, disciplines, and domains
    - Social and Emotional development includes Dr. Becky Bailey’s Conscious Discipline ®
    - Differentiated instruction
    - Equity of English and Spanish materials and instruction
    - Joyful approach to learning

**GUIDANCE AND DISCIPLINE**

The purpose of discipline at AppleTREE Academy is to help children learn acceptable behavior and develop inner controls. When redirecting or guiding a child’s behavior, the age, intellectual development, emotional make-up, and experiences will be considered, and consistency will be maintained in setting rules and limits for each child. **CORPORAL PUNISHMENT IS PROHIBITED** at AppleTREE Academy. No child shall be subject to verbal abuse or threats, cruel, severe, and unusual punishment. Derogatory remarks shall not be made in the presence of the children about family members of the children in care or about the children themselves. No child or group of children shall be allowed to discipline another child. No child shall be deprived meals or any part of meals for disciplinary reasons.

The following is a list of some of the alternate forms of positive discipline that will be used at AppleTREE Academy.

* Tell the child what they CAN DO.
* Establish eye contact when speaking with the child.
* Give choices whenever possible, but only when the child really had a choice.
* Encourage children to solve their own problems, and to work out conflicts whenever possible.
* Redirect the child to another activity.
* Cuddle a child until they gain control of themselves.
* Remove a child from the situation.
* Time out to separate the child from the situation no longer than five minutes where they can have time to gain self-control. The child that is separated will never be out of sight of a staff member. The time is determined by one minute for each year of age.

**Nutrition**

We would appreciate if your child could be in the classroom no later than 8:15 a.m. The Academy will serve well balanced, nutritious breakfast, lunch and there will be three nutritious snacks each day.

Any special dietary food must be sent to the Academy already prepared and labeled with the child’s name. Children who need special drinks or food must have physician’s note.

**Breakfast**

The Academy provides breakfast for each child between 8:00 a.m. to 8:30 a.m. When your child arrives to school later than 8:30 a.m. the parent/guardian is responsible for feeding their child off campus. The State of Louisiana Department of Licensing strictly prohibits outside food unless for a school party.

The following is a reminder of the State Policy regarding food.

**Section 5323- Care of the Children:**

1. It is not permissible for children to bring their food to the center with the following exceptions:

b. Children on therapeutic diets prescribed by a physician may bring their own food for meals and snacks if a written request is received and kept on file.

c. Refreshments for special occasions such as birthday parties and holiday with prior approval from the director of teacher.

**Nap Time**

All children are required to take a nap. All blankets, if dirty, will be sent home on Friday to be washed and returned on Monday. Children do not share bedding articles. Each child needs one small pillow, mat cover, and blanket. **Please label all items.**

**Abuse and Neglect**

Any suspected abuse and/or neglect of a child in a childcare center may be reported in accordance with LA R.S. 14:403 to the local Child Protection Agency.

St. Tammany Parish

Office of Childcare Services

300 Covington Center

Covington, La 70433

**5306. G. ABUSE AND NEGLECT CONT.**

As mandated reporters, all center staff shall report any suspected abuse and/or neglect of a child in accordance with LA R.S. 24:403 to the local child protection agency. This written policy as well as the local child protection agency’s telephone number shall be posted. (The number is above this paragraph.)

**Children’s Records Confidentiality and Security of File**

The Administrator of AppleTREE Academy will supervise the maintenance of children’s records. The records will be in the office. Each child’s teacher will receive a copy of the child’s enrollment application to be kept in the Orientation Training Book. This book is to be kept in the classroom cabinet unless is use.

Employees of AppleTREE Academy must have written permission from the parent before releasing any information about the child.

**Parent Participation**

**Visiting the Center-** Parents are always welcome to visit, observe, and participate. The Academy has an open-door policy. If you wish to eat a meal/snack with your child, please tell the child’s teacher so we can set a place for you. We hope to develop a positive and open relationship with each of you as we share in these very important years in your child’s life.

Whenever possible we invite parents to participate in career day, hobby day, talent day, or to read a book to the children. It is very important that parents be a part of their child’s life at AppleTREE Academy.

If your child receives therapy of any kind the therapist must bring us a copy to keep on file of their criminal background check. This is a mandatory regulation from the State of Louisiana. It is AppleTREE Academy’s policy that no therapist enters without the proper identification.

**Parent-Teacher Conferences-** We will hold parent-teacher conferences at intervals during the year to help parents and staff work together for the best interest of the children. Please feel free to request a conference with your child’s teacher, Administrator, or director at any time.

It is difficult for a teacher to be attentive to their class when a parent/guardian wants to talk. We ask that you send a note to either the teacher or call to schedule an appointment.

**Arrival and Departures Procedures**

It is mandatory that you sign in your child and sign them out every day. This form will be in your child’s classroom or with his/her teacher. This attendance form is important in cases of emergencies and is a regulation of the State of Louisiana Department of Licensing. If your child receives Childcare Assistance, please read the above section for the proper procedure.

**Late Arrival**

If your child will not be at school by 8:30 a.m. when the attendance is taken, please call the office. We will inform the cook to count them for lunch. If your child slept late and do not think he/she will rest quietly on their mat, do not bring them until after naptime. If you arrive at naptime, allow enough time to lie down with your child to help get them to sleep.

**Pick-Up Procedures**

Arrangements for the child’s return to the parent shall not include third parties unless there is a written agreement between the Academy and the parent that is on file with the Academy. All third-party persons will be asked to show driver’s license. In addition to this policy if your child receives Childcare Assistance, please read the Child Care Assistance section for the proper procedure.

Should a child be left at AppleTREE Academy thirty minutes passed closing time, the St. Tammany Police will be contacted.

**Parent Bulletin Board**

A Parent Bulletin Board will help keep you informed about the Academy’s Activities. Posted by your child’s classroom are daily activities schedules, menus, and other pertinent information.

**Family Functions**

Family functions, parenting programs and group meetings will be planned throughout the year.

**School Outing**

AppleTREE Academy does not have field trips! However, we do have School Outings for the Preschool children. Parents/guardians will meet as a group at a plan destination. Each child must have their own adult to attend with them to the outing!

**Clothing**

**Children’s Needs**

Children attend school to participate in active, busy play, to explore the world freely and to experiment with many kinds of materials. The clothing they wear can add to or detract from their enjoyment if school.

To meet the children’s needs of fully participating in the program and being successful in dressing themselves, parents should keep the following in mind when dressing their children for the Academy:

1. Be simple enough so that the child can put in on and take it off easily**.**
2. Be loose enough to provide freedom of movement.
3. Be durable and washable enough to permit vigorous play.
4. Be inexpensive so that soiling, damage, or loss will not cause great concern.
5. Be appropriate to present weather conditions.
6. Shoes should be sturdy and low-heeled. Rubber soiled tennis shoes are most appropriate.
7. All clothing should be labeled with child’s name.
8. No sandals
9. No crocs
10. No jewelry

Staff will take normal precautions to protect the children’s clothing, but accidents do occur.

**Clothing at School**

All children need a complete change of clothing at school. Toddlers and children being toilet trained need extra changes of clothing in their cubbies. Many pairs of training pants will be necessary. **Label all items.**

**Clothing Suited to the Weather**

Mittens, warm head coverings, long pants, and a coat should be worn on all cold days. The weather is unpredictable, so please always keep appropriate outerwear for your child at school. Note: All clothing, including shoes, must be marked with the child’s name.

**Diapers**

Disposable diapers are necessary, and we recommend you keep a bag of diapers on hand at the Academy. Please label the pack of diapers and wipes with your child’s name.

**Mat Policy**

AppleTREE Academy provides all children with a mat. Parents provided small child’s pillow, blanket, and mat cover. Slipcover finished dimension should be 29 inches by 50 inches. Mat cover and pillow sets are available for sale at the office.

Ask Mrs. Jane about Mat cover

**Toys**

The Academy provides ample toys and materials for children to share. We urge you to keep personal toys at home or check with your child’s teacher before sending a special toy or video to school. Please mark the item with your child’s name. Children may bring a special “comfort” item, such as a blanket or small stuffed animal, which may be necessary for sleep or reducing separation distress. Remember to put your child’s name on the item. The Academy will not be held responsible for loss or damage of items. Please do not bring anything that has a large monetary value.

**Superheroes**

Because of the violent nature of **Superheroes,** we ask that you refrain your child from bringing any items to school resembling these characters. These items include T-shirts, sweat suits, underwear, socks, dolls, jewelry, hats, blankets, pillows, backpacks, and shoes.

**Binkies and Bottles**

All binkies must have the child’s first and last name initials on them. Bottles must have first and last name on the bottle, neck of bottle and the cap. There are companies that you can order rubber bottle bands with the child’s name on them. These bands make it so much easier for labeling!!!!

**Birthday Party**

1. You may bring a special treat to be served at snack time.
2. Let your child’s teacher know when you will be bringing a snack.
3. Talk with your child’s teacher before passing out invitations to parties.
4. You may pass out invitations to parties at school only if you pass out invitations for every child in the class. Unless everyone in the class is invited to the party, please put invitations in the mail. There is nothing more humiliating for a child of any age than to watch party invitations being handed out in class and not receive one.

**Chewing Gum**

Children are strictly prohibited from chewing gum. NO GUM ALLOWED!

**Smoking**

Smoking is strictly prohibited on the Academy grounds.

**Photographs and videotaping**

From time-to-time photographs are taken of children in school activities by their teachers and newspaper photographers (to run with stories about the Academy). On occasion we will also video tape the children throughout the day and play it for the parents viewing.

AppleTREE Academy does provide Peanut Butter and Jelly’s family viewing for their families. Only AppleTREE management and or staff will view, and parent/family members will have access to Peanut Butter and Jelly web cam. There will be guidelines for the viewing you will receive during the admissions process.

**Toilet Training**

Parents and teacher will discuss if the child is ready to toilet train. If both agree, then the teacher will go over the toilet training policy of AppleTREE Academy. Parents will be given a written copy of the toilet training policy.

**Hand Washing**

Staff and children shall wash their hands at least at the following times: upon entering the Academy, before preparing or serving meals, after toileting or changing diapers, before and after eating meals or snacks, and anytime hands become soiled with body fluid (urine, stool, saliva, blood, or nasal discharge).

**Cuts and Sores**

Parents are responsible for bandaging cuts and sores that may ooze or drain. Children with sores that could be contagious must have a doctor’s note before returning to school.

**Biting Policy**

If a child is bitten and the skin is not broken, ice will be applied, and the child will be consoled. If the skin is broken, soap and water will be applied to the area, the child will be consoled, and the child’s parent will be called. If the skin is broken the parents of the bitter will be called and the bitter will stay home for 3 days. Should you find a bite mark on your child, and you were not notified please tell a staff member when you return to AppleTREE Academy.

The biter will receive time out (2 years old and up). If the child continues the aggression, he/she will be mirrored with a teacher until the biting stops. It is the parents’ responsibility to discourage this behavior. If your child’s bites more than once a day, then you will need to pick up your child and keep them home for the rest of the day. In the event the biting continues and is disrupting the children, the biter’s parents will be asked to remove their child from AppleTREE Academy.

**Respecting Adults**

Children are expected to be age appropriate respectful to all adults at AppleTREE Academy. There will be no tolerance for a child who punches, bite, spit, or hurt an adult. Your child will be sent home immediately. Should this behavior continue, your child must stay home for three days or parents will be asked to remove their child from AppleTREE Academy.

**Illness Policy**

Young children have a greater susceptibility to illness because of their age and unique behavioral characteristics which increase the risk of disease transmission (they have close person-to-person contact, they lack fecal continence prior to toilet training, they frequently explore the environment with their mouths, and they require frequent hands-on contact by staff).

Development of workable solutions to the problem of disease control requires the cooperation of our program, children’s physicians, parents, and employees. We have taken the responsibility to educate our staff on the rules and rationale of basic hygiene practices appropriate in handling and caring for your children. These practices have been incorporated into our daily procedures in helping to prevent the spread of germs and illnesses.

Please report any infectious disease your child and/or family member has or has been exposed to within 24 hours of diagnosis so other parents can be informed and have their children checked, if necessary.

**Health**

Parents are required to submit a physician’s statement certifying that the child if free from communicable disease at the time of enrollment. Children are required to have their immunization records kept on file at the Academy and updated periodically throughout the year.

**Sick Pick-Up Policy**

When your child gets sick at school and a parent has been called to pick up their child from school you will have 75 minutes to pick-up your child. If a child is not picked-up within the 75-minute period, the responsible parent will be charged a $1.00 per minute late pick-up fee. That fee will be due when the child returns to school.

**Health Policies**

***PLEASE KEEP YOUR CHILD HOME / YOUR CHILD WILL BE SENT HOME WITH THE FOLLOWING SYMPTOMS:***

* 100.4-degree fever or higher
* Diarrhea (until regular movement)
* Vomiting
* Respiratory infection
* Ear infections (unless diagnosed and under treatment)
* Lice (Until treatment has begun &and all nits removed)
* Scabies (until treatment has begun)
* Streptococcal pharyngitis (until 24 hours after beginning treatment)
* One on one care

***PLEASE KEEP YOUR CHILD HOME / A CHILD WILL BE SENT HOME WITH THE FOLLOWING AND MAY NOT RETURN WITHOUT A DOCTOR’S APPROVAL:***

* Undiagnosed rash (except for diaper rash or any known allergy on record)
* Chicken Pox – skin lesions (blisters) all scabbed over
* COVID
* Conjunctivitis – Pink Eye
* Hepatitis A – one week after illness started and fever resolved
* Measles
* Meningitis
* Mouth Sores with drooling
* Mumps
* Pin Worms
* Rubella
* Strep Throat
* Tuberculosis
* Whopping Cough
* Impetigo
* Ring Worm
* AIDS (or HIV infection) – until child’s health, neurological development, behavior, and immune status is deemed appropriate (on a case-by-case basis) by qualified persons, including the child’s physician chosen by the child’s parent / guardian and AppleTREE Academy’s director.
* Meningococcal
* Hib Disease
* Thrush
* Undiagnosed generalized rash

**Ear Infections**

We know that according to most pediatricians, most ear infections are not contagious; therefore, we cannot require that your child remain at home. However, if your child has an ear infection, especially when combined with a fever, his/her resistance level may be lowered. This increases their susceptibility to other illnesses and can lead to recurring problems if not allowed enough time for your child’s system to fully recover.

Any illness which results in your child feeling poorly, sleeping, and eating problems, and/or requiring one on one care which we cannot provide, your child needs to stay home.

**Immunizations**

An immunization form must be filled out by your pediatrician upon registration of your child. It is mandatory to keep your child’s shots up to date and give the Academy a yellow Child’s Immunization Record. We will send home periodic reminders of any immunization that is overdue, as we are monitored by the State Board, and our files must be up to date.

**Medications**

**AppleTREE Academy does not administer medication!** You are welcome to come to the school and administer medication to your child. However, you must fill out the proper medicine form before giving the medicine to your child. AppleTREE Academy will not store medicine for your child! You must take your medicine with you after you have administered the medication.

**Emergency Procedures**

AppleTREE Academy’s Emergency Plan is based on the Louisiana Model Daycare Emergency Plan. This plan has been given to St. Tammany Office of Emergency Preparedness and The State Department of Social Services Office in St. Tammany.

**Hospital Information**

In case of severe injury or acute illness, the child will be transported immediately to St. Tammany Parish Hospital.

At the same time, the parent, or guardian will be called, advised of the injury or illness, and where the child has been taken. If a parent cannot be reached, a person listed on the Academy’s enrollment form will be called.

A staff member will accompany the child to the hospital and remain with them until the parent arrives and is informed of the situation.

Written reports of all accidents will be submitted to the Academy’s management personnel.

**Fire Procedures**

Specific procedures are provided for the Academy’s staff and children to follow in case of a fire. These procedures will be practiced through fire drills monthly. Exit routes are clearly marked in each room and diagram maps posted in each classroom.

**Closing Procedures**

In emergencies of imminent danger, such as hurricanes and floods, parents will be expected to pick up their child as soon as possible. The Academy will follow the closing schedule of the St. Tammany Parish Schools. If the school is closed, you are still responsible for full tuition payment.

**AppleTREE Academy Evacuation Procedure**

If an evacuation becomes necessary, we will call the local authorities and follow their recommendations.

**Complaints**

AppleTREE Academy is licensed Class “A” by the State of Louisiana. The State of Louisiana Bureau of License and Quality Assurance have the responsibility for seeing that we maintain the minimum standards for a Class “A” license. If, after discussing your concern or complaint with the Director or Administrator you may contact the Department at any time if you have “significant, unresolved licensing complaints.”

State of Louisiana

Department of Social Services

Office of the Secretary

Bureau of Licensing

2751 Wooddale Blvd., Suite 330

P.O. Box 3078

Baton Rouge, La. 70821

(225) 922-0015

**Holiday Schedule**

Holidays and school events are posted in the school and on the AppleTREE Academy school calendar.

**E-mail and Website Address**

Email: [appletreeacademy@hotmail.com](mailto:appletreeacademy@hotmail.com)

Website: <https://appletreeacademycov.com/>

**Facebook**

Teachers and staff members are not allowed to accept students’ parents, family members, or guardians on their Facebook.

**Disclosure of Information Policy**

Parents shall be advised of the licensing authority of the Licensing Division along with the current telephone number and email address. Parents shall also be advised that they may call or write to the Licensing Division should they have significant, unresolved licensing complaints. See above

**Computer Practices, Programs, Movies, and Video Games**

AppleTREE Academy’s children do not have access to electronic devices, computer practice, programs, movie, and video games.

**First Day of School Checklist**

**Infants (6 weeks to 1 year)**

* Enrollment Application, 1st Week’s Tuition, Registration Fee Paid, Emergency Information Form, child’s Immunization Record, Parent Consent Form, Parent Handbook and Tuition Acceptance Form
* Diapering Supplies
* Bottles
* Pacifier, if needed
* Naptime cuddly, if needed (such as a stuffed animal, pillow, etc.)
* Special meal/snack instructions if any
* Special diapering instructions if any
* Diaper rash cream

AppleTREE Academy requires that all washable items be brought home and cleaned on your child’s last schedule day of the week and brought back on the first schedule day of the next week.

To bring the child’s home life to the Academy, we ask that you bring ten pictures of the following: mom, dad, brother, sister, grandparents, animals, child’s room, the child, etc.

**\*Please label everything\***

**First Day of School Checklist**

**Toddlers (12 months to 2 years)**

* Enrollment Application, 1st Week’s Tuition, Registration Fee Paid, Emergency Information Form, child’s Immunization Record, Parent Consent Form, Parent Handbook and Tuition Acceptance Form
* Diapering Supplies
* One complete change of clothes (if your child is being potty-trained increase the change of clothes to three.)
* Bottles
* Pacifier, if needed
* Small Pillow, blanket, and mat cover (washable)
* Naptime cuddly, if needed (such as a stuffed animal, pillow, etc.)
* Special meal/snack instructions if any
* Special diapering instructions if any
* Diaper rash cream
* Children’s Repellent (deet free)

AppleTREE Academy requires that all washable items be brought home and cleaned on your child’s last schedule day of the week and brought back on the first schedule day of the next week.

To bring the child’s home life to the Academy, we ask that you bring ten pictures of the following: mom, dad, brother, sister, grandparents, animals, child’s room, the child, etc.

**\*Please label everything\***

**First Day of School Checklist**

**Preschoolers (3’s, 4’s, and 5’s)**

* Enrollment Application, 1st Week’s Tuition, Registration Fee Paid, Emergency Information Form, child’s Immunization Record, Parent Consent Form, Parent Handbook and Tuition Acceptance Form
* Diapering supplies, if needed
* One complete change of clothes (if your child is being potty-trained increase the change of clothes to three.)
* Small Pillow, blanket, and mat cover (washable)
* Naptime cuddly, if needed (such as a stuffed animal, pillow, etc.)
* Special meal/snack instructions if any
* Special diapering instructions if any
* Diaper rash cream
* Children’s Repellent (deet free)

AppleTREE Academy requires that all washable items be brought home and cleaned on your child’s last schedule day of the week and brought back on the first schedule day of the next week.

To bring the child’s home life to the Academy, we ask that you bring ten pictures of the following: mom, dad, brother, sister, grandparents, animals, child’s room, the child, etc.

**\*Please label everything\***