

Date Application Completed: _____

Date of Enrollment: _____

CHILD'S APPLICATION FOR ENROLLMENT

To be completed, signed, and placed on file in the facility on the first day and updated as changes occur and at least annually

CHILD INFORMATION:

Date of Birth: _____

Full Name: _____
Last First Middle Nickname

Child's Physical

Address: _____

FAMILY INFORMATION:

Child lives with: _____

Father/Guardian's Name _____ Home Phone _____

Address (if different from child's) _____ Zip Code _____

Work Phone _____ Cell Phone _____

Mother/Guardian's Name _____ Home Phone _____

Address (if different from child's) _____ Zip Code _____

Work Phone _____ Cell Phone _____

CONTACTS:

Child will be released only to the parents/guardians listed above. The child can also be released to the following individuals, as authorized by the person who signs this application. In the event of an emergency, if the parents/guardians cannot be reached, the facility has permission to contact the following individuals.

Name	Relationship	Address	Phone Number

HEALTH CARE NEEDS:

For any child with health care needs such as allergies, asthma, or other chronic conditions that require specialized health services, a medical action plan shall be attached to the application. The medical action plan must be completed by the child's parent or health care professional. Is there a Medical action plan attached? Yes No (Medical action plan must be updated on an annual basis and when changes to the plan occur)

List any allergies and the symptoms and type of response required for allergic reactions. _____

List any health care needs or concerns, symptoms of and type of response for these health care needs or concerns _____

List any particular fears or unique behavior characteristics the child has _____

List any types of medication taken for health care needs _____

Share any other information that has a direct bearing on assuring safe medical treatment for your child _____

EMERGENCY MEDICAL CARE INFORMATION:

Name of health care professional _____ Office Phone _____

Hospital preference _____ Phone _____

_____, as the parent/guardian, authorize the center to obtain medical attention for my child in an emergency.
Signature of Parent/Guardian _____ Date _____

_____, as the operator, do agree to provide transportation to an appropriate medical resource in the event of emergency. In an emergency situation, other children in the facility will be supervised by a responsible adult. I will not administer any drug or any medication without specific instructions from the physician or the child's parent, guardian, or full-time custodian.

Signature of Administrator _____ Date _____

Children's Medical Report

Name of Child _____ Birthdate _____

Name of Parent or Guardian _____

Address of Parent of Guardian _____

A. Medical History (May be completed by parent)

1. Is child allergic to anything? No ___ Yes ___ If yes, what? _____

2. Is child currently under a doctor's care? No ___ Yes ___ If yes, for what reason? _____

3. Is the child on any continuous medication? No ___ Yes ___ If yes, what? _____

4. Any previous hospitalizations or operations? No ___ Yes ___ If yes, when and for what? _____

5. Any history of significant previous diseases or recurrent illness? No ___ Yes ___; diabetes No ___ Yes ___;
convulsions No ___ Yes ___; heart trouble No ___ Yes ___; asthma No ___ Yes ___.
If others, what/when? _____

6. Does the child have any physical disabilities: No ___ Yes ___ If yes, please describe: _____

Any mental disabilities? No ___ Yes ___ If yes, please describe: _____

Signature of Parent or Guardian _____ Date _____

B. Physical Examination: This examination must be completed and signed by a licensed physician, his authorized agent currently approved by the N. C. Board of Medical Examiners (or a comparable board from bordering states), a certified nurse practitioner, or a public health nurse meeting DHHS standards for EPSDT program.

Height _____ % Weight _____ %

Head _____ Eyes _____ Ears _____ Nose _____ Teeth _____ Throat _____

Neck _____ Heart _____ Chest _____ Abd/GU _____ Ext _____

Neurological System _____ Skin _____ Vision _____ Hearing _____

Results of Tuberculin Test, if given: Type _____ date _____ Normal ___ Abnormal ___ followup _____

Developmental Evaluation: delayed _____ age appropriate _____

If delay, note significance and special care needed; _____

Should activities be limited? No ___ Yes ___ If yes, explain: _____

Any other recommendations: _____

Date of Examination _____

Signature of authorized examiner/title _____ Phone # _____

Randleman Enrichment Center

611 S. Main St.

Randleman, NC 27317

336.498.1010/336.498.1014

NC Child Care Laws and Rules Summary Statement

I have received and read my copy of the NC Child Care Rules and Summary Sheet from Randleman Enrichment Center.

Child's Name _____

Parent/Guardian Signature _____

Date _____

Parent Handbook Statement

I have received my copy of the Parent Handbook from Randleman Enrichment Center. I am aware of and understand all center policies listed in this handbook. I also understand that I should always speak with the Owner/Director or Assistant Directors with any questions I may have pertained to center operations, staffing, handbook policies, state policies, and health and sanitation policies. I also understand that my ideas or suggestions are always welcomed by Randleman Enrichment Center.

Parent/Guardian Signature _____

Date _____

DISCIPLINE AND BEHAVIOR MANAGEMENT POLICY

No child shall be subjected to any form of corporal punishment. Praise and positive reinforcement are effective methods of the behavior management of children. When children receive positive, non-violent, and understanding interactions from adults and others, they develop good self-concepts, problem solving abilities, and self-discipline. Based on this belief of how children learn and develop values, this facility will practice the following age and developmentally appropriate discipline and behavior management policy:

WE:

1. DO praise, reward, and encourage the children.
2. DO reason with and set limits for the children.
3. DO model appropriate behavior for the children.
4. DO modify the classroom environment to attempt to prevent problems before they occur.
5. DO listen to the children.
6. DO provide alternatives for inappropriate behavior to the children.
7. DO provide the children with natural and logical consequences of their behavior.
8. DO treat the children as people and respect their needs, desires, and feelings.
9. DO ignore minor misbehaviors.
10. DO explain things to children on their level.
11. DO use short, supervised periods of time-out sparingly (no longer than their age in minutes Ex: 2 years old – 2 minutes).
12. DO stay consistent in our behavior management program.
13. DO use effective guidance and behavior management techniques that focus on a child's development.

WE:

1. DO NOT handle children roughly in any way, including shaking, pushing, shoving, pinching, slapping, biting, kicking, or spanking.
2. DO NOT place children in a locked room, closet, or box or leave children alone in a room or hallway separated from staff.
3. DO NOT delegate discipline to another child.
4. DO NOT withhold food (or candy) as punishment or give food (or candy) as a means of reward.
5. DO NOT discipline for toileting accidents.
6. DO NOT discipline for not sleeping during rest period.
7. DO NOT discipline children by assigning chores that require contact with or use of hazardous materials, such as cleaning bathrooms, floors, or emptying diaper pails.
8. DO NOT without or require physical activity, such as running/walking laps, doing push-ups, or jumping jacks, as punishment.
9. DO NOT yell at, shame, humiliate, frighten, threaten, or bully children.
10. DO NOT restrain children as a form of discipline unless the child's safety or the safety of others is at risk.

TIME OUT

Time-out is the removal of a child for a short period of time from a situation in which the child is misbehaving and has not responded to other discipline techniques. The time-out space, usually a chair, is located away from classroom activity, but within the teacher's sight. During time-out, the child has a chance to think about the misbehavior which led to their removal from the group. After the brief interval, the teacher discusses the incident and appropriate behavior with the child. When the child returns to the group, the incident is over and the child is treated with the same affection and respect shown the other children.

I agree that I have read and received a copy of the facility's Discipline and Behavior Management Policy.

Child's Name: _____

Parent Signature: _____ Date: _____

Child's Enrollment Date: _____

Randleman Enrichment Center

611 S. Main St.

Randleman, NC 27317

336.498.1010/336.498.1014

Safe Arrival and Departure Procedures

- Upon arrival, all children must be accompanied inside the facility by an adult.
- Staff must be notified of the child's arrival.
- Upon the child's departure, an adult must come inside the facility and notify staff that the child is leaving.
- Children will only be released to persons listed on the child's application as authorized by the parent/guardian. Staff may request to view a driver's license to verify identity of persons other than known parent/guardian.
- Authorization from parent/guardian is required in writing when anyone other than the designated person(s) as listed on the child's application arrives to pick up the child.
- Children must be signed in and out. Daily arrival and departure times must be recorded.
- Children must never be left unattended.

have read and understand these policies:

Child's Name _____

Parent/Guardian Signature _____

Date _____

We, Randleman Enrichment Center, believe that preventing, recognizing, responding to, and reporting shaken baby syndrome and abusive head trauma (SBS/AHT) is an important function of keeping children safe, protecting their healthy development, providing quality child care, and educating families.

Background

SBS/AHT is the name given to a form of physical child abuse that occurs when an infant or small child is violently shaken and/or there is trauma to the head. Shaking may last only a few seconds but can result in severe injury or even death. According to North Carolina Child Care Rule (child care centers, 10A NCAC 09 .0608, family child care homes, 10A NCAC 09 .1726), each child care facility licensed to care for children up to five years of age shall develop and adopt a policy to prevent SBS/AHT.

Recognizing:

- Children are observed for signs of abusive head trauma including irritability and/or high-pitched crying, difficulty staying awake/lethargy or loss of consciousness, difficulty breathing, inability to lift the head, seizures, lack of appetite, vomiting, bruises, poor feeding/sucking, no smiling or vocalization, inability of the eyes to track and/or decreased muscle tone. Bruises may be found on the upper arms, rib cage, or head resulting from gripping or from hitting the head.

Responding to:

- If SBS/AHT is suspected, staff will:
 - o Call 911 immediately upon suspecting SBS/AHT and inform the director.
 - o Call the parents/guardians.
 - o If the child has stopped breathing, trained staff will begin pediatric CPR.

Reporting:

- Instances of suspected child maltreatment in child care are reported to Division of Child Development and Early Education (DCDEE) by calling 1-800-859-0829 or by emailing webmasterdcd@dhs.nc.gov.
- Instances of suspected child maltreatment in the home are reported to the county Department of Social Services. Phone number: 336-683-8200

Prevention strategies to assist staff in coping with a crying, fussing, or distraught child Staff first determine if the child has any physical needs such as being hungry, tired, sick, or in need of a diaper change. If no physical need is identified, staff will attempt one or more of the following strategies:

- Rock the child, hold the child close, or walk with the child.
- Stand up, hold the child close, and repeatedly bend knees.
- Sing or talk to the child in a soothing voice.
- Gently rub or stroke the child's back, chest, or tummy.
- Offer a pacifier or try to distract the child with a rattle or toy.

I, the parent or guardian of _____, acknowledged that I have read and received a copy of the facility's Shaken Baby Syndrome/Abusive Head Trauma Policy.

Date of Child's Enrollment _____ Parent Signature _____

Shaken Baby Syndrome and Abusive Head Trauma

- Turn on music or white noise.
- In addition, the facility:
 - o Allows for staff who feel they may lose control to have a short, but relatively immediate break away from the children.
 - o Provides support when parents/guardians are trying to calm a crying child and encourage parents to take a calming break if needed.

Prohibited Behaviors

Behaviors that are prohibited include (but are not limited to):

- shaking or jerking a child
- tossing a child into the air or into a crib, chair, or car seat
- pushing a child into walls, doors, or furniture
- Strategies to assist staff members understand how to care for infants
- The five goals and developmental indicators in the 2013 North Carolina Foundations for Early Learning and Development, nchildcare.nc.gov/PDF_forms/NC_Foundations.pdf
- How to Care for Infants and Toddlers in Groups, the National Center for Infants, Toddlers and Families, www.zerotothree.org/resources/77-how-to-care-for-infants-and-toddlers-in-groups
- Including Relationship-Based Care Practices in Infant-Toddler Care: Implications for Practice and Policy, the Network of Infant/Toddler Researchers, pages 7-9, www.acf.hhs.gov/sites/default/files/opre/nitr_inquire_may_2016_070616_b508compliant.pdf
- Strategies to ensure staff members understand the brain development of children up to five years of age

All staff take training on SBS/AHT within first two weeks of employment. Training includes recognizing, responding to, and reporting child abuse, neglect, or maltreatment as well as the brain development of children up to five years of age.

- Brain Development from Birth video, the National Center for Infants, Toddlers and Families, www.zerotothree.org/resources/156-brain-wonders-nurturing-healthy-brain-development-from-birth

• The Science of Early Childhood Development, Center on the Developing Child, developingchild.harvard.edu/resources/inbrief-science-of-ecd/

Resources

- Parent web resources
- The American Academy of Pediatrics: www.healthychildren.org/English/safety-prevention/at-home/Pages/Abusive-Head-Trauma-Shaken-Baby-Syndrome.aspx
- The National Center on Shaken Baby Syndrome: <http://domishake.org/family-resources>
- The Period of Purple Crying: <http://purplecrying.info/>

Application

This policy applies to children up to five years of age and their families, operators, early educators, substitute providers, and uncompensated providers.

Shaken Baby Policy Agreement

_____, acknowledged that I have read and received a copy of the facility's Shaken Baby

Date of Child's Enrollment _____

Parent Signature _____

Date _____

Infant/Toddler Safe Sleep Policy



A safe sleep environment for infants reduces the risk of sudden infant death syndrome (SIDS) and other sleep related infant deaths. According to N.C. Law, child care providers caring for infants 12 months of age or younger are required to implement a safe sleep policy and share the policy with parents/guardians and staff.

REC

(facility name) implements the following safe sleep policy:

Safe Sleep Practices

- We train all staff, substitutes, and volunteers caring for infants aged 12 months or younger on how to implement our Infant/Toddler Safe Sleep Policy.
- We always place infants under 12 months of age on their backs to sleep, unless:
 - the infant is 6 months or younger and a signed ITS-SIDS Alternate Sleep Position Health Care Professional Waiver is in the infant's file and a notice of the waiver is posted at the infant's crib.
 - the infant is 6 months or older (choose one)
 - We do not accept the ITS-SIDS Alternate Sleep Position Parent Waiver.*
 - We accept the ITS-SIDS Alternate Sleep Position Parent Waiver.

We retain the waiver in the child's record for as long as they are enrolled.

- We place infants on their back to sleep even after they are able to independently roll back and forth from their back to their front and back again. We then allow the infant to sleep in their preferred position.
 - We document when each infant is able to roll both ways independently and communicate with parents. We put a notice in the child's file and on or near the infant's crib.*
- We visually check sleeping infants every 15 minutes and record what we see on a Sleep Chart. The chart is retained for at least one month.
 - We check infants 2-4 month of age more frequently.*
- We maintain the temperature between 68-75°F in the room where infants sleep.
 - We further reduce the risk of overheating by not over-dressing infants*
- We provide infants supervised tummy time daily. We stay within arm's reach of infants during tummy time.
- We follow N.C. Child Care Rules .0901(j) and .1706(g) regarding breastfeeding.
 - We further encourage breastfeeding in the following ways: private room available for nursing

Safe Sleep Environment

- We use Consumer Product Safety Commission (CPSC) approved cribs or other approved sleep spaces for infants. Each infant has his or her own crib or sleep space.
- We do not allow pacifiers to be used with attachments.
- Safe pacifier practices:
 - We do not reinsert the pacifier in the infant's mouth if it falls out.*
 - We remove the pacifier from the crib once it has fallen from the infant's mouth.*
- We do not allow infants to be swaddled.
 - We do not allow garments that restrict movement.*
- We do not cover infants' heads with blankets or bedding.
- We do not allow any objects other than pacifiers such as, pillows, blankets, or toys in the crib or sleep space.
- Infants are not placed in or left in car safety seats, strollers, swings, or infant carriers to sleep.
- We give all parents/guardians of infants a written copy of this policy before enrollment. We review the policy with them and ask them to sign the policy.
 - We encourage families to follow the same safe sleep practices to ease infants' transition to child care.*
- Posters and policies:
 - Family child care homes:** We post a copy of this policy and a safe sleep practices poster in the infant sleep room where it can easily be read.
 - Centers:** We post a copy of this policy in the infant sleep room where it can easily be read.
 - We also post a safe sleep practices poster in the infant sleep room where it can easily be read.*

Communication

- We inform everyone if changes are made to this policy 14 days before the effective date.
 - We review the policy annually and make changes as necessary.*

*Best practice recommendation.

Effective date: 1/2008 Review date(s): _____ Revision date(s): 1/1/22

I, the parent/guardian of _____ (child's name), received a copy of the facility's Infant/Toddler Safe Sleep Policy. I have read the policy and discussed it with the facility director/operator or other designated staff member.

Child's Enrollment Date: _____ Parent/Guardian Signature: _____ Date: _____

Facility Representative Signature: Shuren Wavers Date: _____

North Carolina Department of Health and Human Services
 Division of Child and Family Well-Being, Community Nutrition Services Section
 Child and Adult Care Food Program
INFANT AND CHILD INCOME ELIGIBILITY APPLICATION



INSTITUTION NAME: EC CANADA & ASSOCIATES, INC. FACILITY NAME: Randleman Enrichment Center, LLC 134 AGREEMENT #: 6417

1. PARTICIPANT'S NAME & DATE OF BIRTH:

First Name	Last Name	Date of Birth	First Name	Last Name	Date of Birth
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2. SNAP, TANF or FDPIR case number:

SNAP# _____ TANF#: _____ FDPIR # _____

If you have provided the case number, DO NOT complete #3 and #4. Skip to complete #5 and #6.

3. Is this application for a:

Foster Infant/Child? Yes No Homeless Infant/Child? Yes No Infant/Child from a migrant family? Yes No

4. HOUSEHOLD MEMBERS MONTHLY INCOME:

Names of All Other Household Members	Monthly Wages / Salaries	Monthly Social Security	Monthly Public Assistance / Child Support	Monthly Retirement Pensions	Other Monthly Income
	\$	\$	\$	\$	\$
	\$	\$	\$	\$	\$
	\$	\$	\$	\$	\$
	\$	\$	\$	\$	\$

5. ETHNIC IDENTITY: (Check one).

Hispanic or Latino Not Hispanic or Latino

RACE (Check one or more):

White Black or African American American Indian or Alaskan Native Asian
 Native Hawaiian or Other Pacific Islander

SIGNATURE AND LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER: I certify that all of the above information is true and correct; that the application is being made in connection with the receipt of federal funds, that Program officials may verify the information on the application; and that deliberate misrepresentation of any of the information on the application may subject me to prosecution under applicable State and Federal criminal statutes.

Signature of Adult Household Member (Required) _____ Date _____

Check if no SSN

Last Four Digits of Social Security Number (Required if qualifying by income)

Printed Name _____

Home Telephone # _____ Work Telephone # _____

Address _____ City _____ Zip Code _____

Richard B. Russell National School Lunch Act requires the information on this application. You do not have to give the information, but if you do not we cannot approve your child for free or reduced-price meals. You must include the last four digits of the social security number of the adult household member who signs the application. The last four digits of the social security number is not required when you apply on behalf of a foster child or you list a Supplemental Nutrition Assistance Program (SNAP), Temporary Assistance for Needy Families (TANF) Program or Food Distribution Program on Indian Reservations (FDPIR) case number for your child or other FDPIR identifier or when you indicate that the adult household member signing the application does not have a social security number. We will use this information to determine if your child is eligible for free or reduced price meals and for administration and enforcement of the Program.

6. TO BE COMPLETED BY INSTITUTION/SPONSOR

TOTAL HOUSEHOLD SIZE _____ TOTAL HOUSEHOLD MONTHLY INCOME \$ _____

Approved: Free Reduced-Price Denied
 Reason for denial: Income too high Incomplete application Other: _____
 Withdrawn on (Date): _____

For state use only:
 Verified by: _____ Date: _____
 Verified classification:
 Free Reduced-Price Denied
 Reason for classification change: _____

Signature of Eligibility Official (Individual at the Institution Level) - Required

Date - Required

North Carolina Department of Health and Human Services
 Division of Child and Family Well-Being, Community Nutrition Services Section
 Child and Adult Care Food Program
Infant and Child Enrollment Form



INSTITUTION

NAME: EC CANADA & ASSOCIATES, INC.

FACILITY

NAME: Randleman Enrichment Center, LLC 134 AGREEMENT#: 6417

Dear Parent/Guardian,

This center/program receives funding from the U.S. Department of Agriculture (USDA) Child and Adult Care Food Program (CACFP). CACFP needs proof of enrollment for all infants and children. Please complete the table below for each infant and/or child in your family enrolled at this center/program. Be sure to sign and date in the space below.

The information below should be completed by the parent or guardian.

Infant/Child's First Name	Infant/Child's Last Name	Date of Birth	Normal/Typical Hours of Care	Normal/Typical Days of Care (Circle all that apply)	Meals Normally Eaten (Circle all that apply)
			_____ to _____	M T W Th F Sat Sun	B AM L PM S LPM
			_____ to _____	M T W Th F Sat Sun	B AM L PM S LPM
			_____ to _____	M T W Th F Sat Sun	B AM L PM S LPM
			_____ to _____	M T W Th F Sat Sun	B AM L PM S LPM
			_____ to _____	M T W Th F Sat Sun	B AM L PM S LPM

Normal/Typical Hours of Care: Write in each infant/child's usual arrival and departure time. Indicate a.m. or p.m.

Normal Days of Care: Circle the days of the week each infant/child is usually in attendance at the facility.

(M-Monday; T-Tuesday; W-Wednesday; Th- Thursday; F-Friday; Sat-Saturday; Sun-Sunday)

Meals Normally Eaten - Circle the meals each infant/child usually eats at the facility.

(B-Breakfast; AM-AM Snack; L-Lunch; PM-PM Snack; S-Supper; LPM-Late PM/Evening Snack)

Parent/Guardian Signature: _____ Date: _____

Print Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Home Telephone Number: () _____ Work Telephone Number: () _____

For Facility/Provider Use Only:	
Signature of Facility Representative/Provider: _____	Date: _____
Date each infant/child withdrew: _____	

For State Use Only: Complete: _____ Incomplete _____ Reason: _____ Verified by: _____ Date: _____
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This institution is an equal opportunity provider.

Randleman Enrichment Center

611 S. Main St.

Randleman, NC 27317

336.498.1010/336.498.1014

Child's Name: _____

- I **give** permission for Tracy Harrell (Director), Lauren Havens (Assistant Director), or Teryn Millikan (Assistant Director) to administer a ONE time, emergency dose of Pain Reliever/Fever Reducer (Children's Tylenol) to my child. I understand that I must still come pick up my child as soon as possible.

- I **refuse** permission to administer emergency medication to my child.

Parent Signature

Date

Date/Time Given:

Dose Given:

Reason:

Administration Signature: _____

Date: _____

Summary of the North Carolina Child Care Law and Rules for Child Care Centers

The law defines child care as:

- three or more unrelated children under 13 years of age
- receiving care from a non-relative
- on a regular basis, at least once a week, for more than four hours per day but less than 24 hours.

It is only when all of these conditions exist that regulation is required. The North Carolina Department of Health and Human Services is responsible for regulating child care. This is carried out through the Division of Child Development and Early Education. The purpose of regulation is to protect the health and well-being of children while they are away from their parents. The law defining child care is in the North Carolina General Statutes, Article 7, Chapter 110. The North Carolina Child Care Commission is responsible for adopting rules to carry out the law. Some counties and cities in North Carolina also have local zoning requirements for child care programs.

Licensing as a center is required when six or more children are cared for in a residence or when three or more children are in care in a building other than a residence. Religious-sponsored programs are exempt from some of the regulations described below if they choose not to be licensed. Child care centers may voluntarily meet higher standards and receive a license with a higher rating. Centers will be visited at least annually to make sure they are following the law and to receive technical assistance from child care consultants.

Centers that meet the minimum licensing requirements will receive a one-star license. Programs that choose to voluntarily meet higher standards can apply for a two through five-star rated license. The number of stars a program earns is based upon the education levels their staff meet, the program standards met by the program, and one quality point option.

Every citizen has a responsibility to report suspected child abuse, neglect or maltreatment. This occurs when a parent or caregiver injures or allows another to injure a child physically or emotionally. It may also occur when a parent or caregiver puts a child at risk of serious injury or allows another to put a child at risk of serious injury. It also occurs when a child does not receive proper care, supervision, appropriate discipline, or when a child is not in a safe environment. North Carolina law requires any person who suspects child maltreatment at a child care facility to report the situation to the Department of Child Development and Early Education. A person cannot be held liable for a report made in good faith. North Carolina law requires any person who suspects child abuse or neglect in a family to report that to the county department of social services.

- Parents have the right to enter a center at any time while their child is present.
- Parents have the right to see the license displayed in a prominent place.
- Parents have the right to know how their child will be disciplined.

North Carolina law requires staff from the Division of Child Development and Early Education to investigate a child care center when there has been a complaint. Child care providers who violate the law or rules may be fined, issued an administrative action, and may have their licenses suspended or revoked. Administrative action must be posted in the facility. If you believe that a child care provider fails to meet the child care requirements, or if you have questions, please call the Division of Child Development and Early Education at 703-622-7272.

The administrator of a child care center must be at least 21 and have at least a North Carolina Early Childhood Administration Credential or its equivalent. Lead teachers in a child care center must be at least 18 and have at least a North Carolina Early Childhood Credential or its equivalent. If administrators and lead teachers do not meet this requirement, they must begin credential coursework within six months of being hired. Staff younger than 19 years of age must work under the direct supervision of staff 21 years of age or older. All staff must work current certification in CPR and First Aid. All staff must complete health and safety training and a minimum number of ongoing training hours annually. ITS-SDS training is required for the administrator and any caregiver that works with infants 12 months of age or younger. One staff member must complete the Emergency Preparedness and Response in Child Care training and plan.

Criminal background qualification is a pre-service requirement. All staff must undergo a criminal background check initially, and every three years thereafter.

From the Division's Child Care Facility Search Site, the facility and visit documentation can be viewed

A public file is maintained in the Division's main office in Raleigh for every licensed center. These files can be viewed during business hours (8am-5pm) by contacting the Division at 703-622-7272, or 1-800-368-7272, or requested via the Division's web site at www.dhhs.gov.

Ratios are the number of staff required to supervise a certain number of children. Group size is the maximum number of children in one group. The minimum staff/child ratios and group sizes for single-age groups of children in centers are shown below and must be posted in each classroom. A sample staff/child ratio chart can be found on the DCDEE website under "Provider Documents and Forms".

Age	Teacher/Child Ratio	Maximum Group Size
0-12 months	1:5	10
12-24 months	1:8	12
2 to 3 years old	1:10	20
3 to 4 years old	1:15	25
4 to 5 years old	1:20	25
5 years old and Older	1:25	25

Centers located in a residence licensed for six to twelve children may care for up to three additional school-age children, depending on the other children in care. When the group has children of different ages, staff-child ratios and group size must be met for the youngest child in the group. Staff/child ratios for multi-age groupings are outlined in the child care rules and require prior approval.

There are space requirements for indoor and outdoor environments that must be measured prior to licensure. Outdoor play space must be fenced. Indoor equipment must be clean, safe, well-maintained, and age appropriate. Outdoor equipment and indoor furnishings must be child size, sturdy, and free of hazards that could injure children.

Centers must keep accurate records such as children's, staff, and program. A record of monthly fire drills and quarterly smelter-in-place or lockdown drills practiced must also be maintained. A safe sleep policy must be developed and shared with parents if children younger than 12 months are in care. Prevention of shaken baby syndrome and abusive head trauma policy must be developed and shared with parent/children up to five year of age.

Four and five-star programs must use an approved curriculum in classrooms serving four year old children. Other programs may choose to use an approved curriculum to earn a quality point for the star-rated license. The Division website maintains a list of approved curriculums for four-year-old children. Activity plans must be available to parents and must show a balance of active and quiet activities. A written activity plan that includes activities intended to stimulate the developmental domains, in accordance with North Carolina Foundations for Early Learning and Development. Rooms must be arranged to encourage children to explore and use materials on their own and have choices.

Children must be immunized on schedule. Each licensed center must ensure the health and safety of children by sanitizing areas and equipment used by children. Meals and snacks must be nutritious and meet the Meal Patterns for Children in Child Care. Food must be offered at least once every four hours. Local health, building, and fire inspectors visit licensed programs to make sure standards are met. All children must be allowed to play outdoors each day (weather conditions permitting) and must have space and time provided for rest. They must provide age-appropriate toys and activities. Centers must complete the Emergency Preparedness and Response in Child Care training and plan.

Child care centers providing transportation for children must meet all motor vehicle laws, including inspection, insurance, license, and restraint requirements. Children may never be left alone in a vehicle and child-staff ratio must be maintained.

Each program must have a written policy on discipline, must discuss it with parents, and must give parents a copy when the child is enrolled. Changes in discipline policy must be shared with parents in writing before going into effect. Corporal punishment (spanking, slapping, or other physical discipline) is prohibited in all centers. Religious-sponsored programs which notify the Division of Child Development and Early Education that corporal punishment is part of their religious training are exempt from that part of the law.

The law and rules are developed to establish minimum requirements. Most parents would like more than minimum care. Child Care Resource and referral agencies can provide help in choosing quality care. For more information about choosing quality child care, parent resources and in North Carolina law and rules, contact the Division of Child Development and Early Education at 703-622-7272 or 1-800-368-7272, or visit our homepage at www.dhhs.gov



Division of Child Development and Early Education
 NC Department of Health and Human Services
 333 Six Forks Road Raleigh, NC 27609

Child Care Commission

Randleman Enrichment Center

611 S. Main St.

Randleman, NC 27317

336.498.1010/336.498.1014

Beginning January 1, 2026

Preschool Program

Infants and Toddlers (6 wks-2 years)	- Per Week.....	\$195
3 years – 1 st Day of Kindergarten	- Per Week.....	\$180

School Age Program

School Age Care/NCPK WrapAround Care	- Per Week.....	\$85
Full Day Care	- Per Week.....	\$150

New/Annual Enrollment Fee \$100 per child
(paid at enrollment and annually in January)

Payments may be made with Cash, Debit/Credit Card, or Check. If paying with a check, make sure to write the child's name on the memo line. All balances must be paid by the last day of the month or the amount is subject to a 10% late fee.