LS Childhood Education Program

Parent Acknowledgement Page

Name of Student \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Grade Level \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Classroom Teachers \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please initial each item

\_\_\_\_\_ I understand that this program must follow the rules and regulations set forth by the Tennessee Department of Education.

\_\_\_\_\_ I have received a current copy of the Department of Education Child Care Rules Summary.  This information is found on the LS page of the St. Mary’s website.

\_\_\_\_\_ I have received a digital copy of the St. Mary’s LS Parent Handbook for the program detailing policies and procedures and dis-enrollment criteria. The handbook is found on the LS page of the St. Mary’s website.

\_\_\_\_\_ I was given the opportunity to visit the facility prior to enrolling my child.

\_\_\_\_\_ I have been provided information on child abuse detecting and reporting. This information is found on the LS page of the St. Mary’s website.

\_\_\_\_\_ I am aware that my child will be taught The Safe Child Curriculum by Judy Bearman, Head of Health Services and Mary Henry Thompson, ECC Chaplain, and that I may ask to review this curriculum housed in the Moss Hall Health Center. A letter explaining this curriculum can be found on the LS page of the St. Mary’s website.

\_\_\_\_\_ I understand that it is a state law that all students be signed into and out of the program daily and that this requirement is satisfied by classroom teachers and Ms. Williams’ daily attendance records recorded in the My Backpack systems program.

Please list the names and numbers of 3 emergency contacts

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

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

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 Parents’ Signature   Date