



Tree of Life Early Learning Center

Branches Academy and Early Learning Center, Inc. doing business as Tree of Life Academy and Early Learning Center, Inc.
(02/06/12)

Registration Form 2012-2013

“The mission of Tree of Life Academy and Early Learning Center, Inc. is to provide an education based on God’s principles in a Christ-centered academic atmosphere, which will enable students to establish a personal relationship with Jesus Christ, develop a respect for authority; and be spiritually, emotionally, intellectually, socially, and physically prepared to meet each challenge life brings.”

**Tree of Life Early Learning Center
2812 Greenview Drive
Lynchburg, Virginia 24502
Office 434-455-0294
Fax 434-455-5952
thebranches@tolm.net
www.branchesacademy.org**

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Thank you for your recent inquiry about our school. We hope that you will become part of our family. We currently offer either a three-day or a five-day preschool/daycare program.

We teach in a developmentally appropriate classroom and all teachers are fully prepared both professionally and spiritually for an academic ministry with children. Curriculum materials are chosen primarily from **A Beka** since it is Christian and has a strong emphasis on good reading skills.

It is also necessary for the parents and student to interview with the administrator. We will contact you to schedule a time after we have received your application and the necessary records.

Our sponsoring church, Tree of Life Ministries, is a Bible believing church. As a school, we strive to concentrate on those things on which all Christians can agree. We expect all students to follow Christian standards of behavior in the school. Please read the Statement of Faith, which is enclosed.

Our number one priority at Tree of Life Early Learning Center is to lead your child to a closer relationship with Jesus Christ, and to instill in him/her the knowledge that is needed to lead a successful life in today's troubled world.

The goals of education are not easy to achieve, but diligent efforts of godly teachers empowered by the Holy Spirit can have an eternal impact on young people. Our school does not supplant the home or church but supplements them. When the home, church, and school have the same goals, the student can thrive. Our commitment is to honor God and bring glory to Christ by developing Christ-likeness in character and conduct in the lives of the students who attend Tree of Life Early Learning Center and to encourage their commitment to serving God faithfully with the knowledge and skills they receive. We hope and pray that you will join with us as we move forward for Christ.

Families who elect to send their children to Tree of Life Early Learning Center enter into a contractual agreement with the school. Therefore, they are obligated to fulfill that contract.

If you desire more information or would like to set up an interview, please call us at 434-455-0294. We desire to assist you in producing children who love God with their minds and hearts. We count it a privilege to work for Christ through children. "Train up a child in the way he should go, and when he is old, he shall not depart from it." Proverbs 22:6

Serving Christ through Children,

Dr. Fay Andrist

Dr. Fay Andrist, Administrator

Tree of Life Early Learning Center Statement of Faith

Convinced that the Bible is the inspired and only infallible, authoritative Word of God, Tree of Life Early Learning Center is a Christ-centered, interdenominational, Christian school. It is the policy of the school not to discriminate in the admission of students, or hiring, based on race, color, gender, or national/ethnic origins. Therefore, we affirm the following truths:

1. **Scripture** – We believe the Bible is the inspired and only infallible, authoritative Word of God.
2. **God** – We believe there is one God, eternally existent in three persons: Father, Son and Holy Spirit. We believe God is the Creator and Sustainer of all things and the Source of all truth.
3. **The Person and Work of Jesus Christ** –We believe in the deity of our Lord Jesus Christ, in His virgin birth, in His sinless life, in His miracles, in His vicarious and atoning death through His shed blood, in His bodily resurrection, in His ascension to the right hand of the Father where He makes intercession for believers, and in His personal return in power and glory.
4. **The Holy Spirit** – We believe the Holy Spirit, proceeding from the Father and the Son, is of one substance, majesty and glory with the Father and the Son, very and eternal God. We believe in the continuing ministry of the Holy Spirit, in that He dwells within the Christian thus enabling each to live a Godly life.
5. **Satan** –We believe in the reality and personality of Satan: that he is a created being, once known as the “anointed angel” that fell because of pride; that he is the “god of this world” and the “prince of the power of the air”, that the judgment already passed on him will be executed at the Revelation of Jesus Christ; and that ultimately he will be cast into the lake of fire.
6. **Man** –We believe man was created by God in His own image, not by evolution but by a special act of creation. We believe the Scripture records the fall of man through his own disobedience, bringing the whole race under sin and death.
7. **Salvation** – We believe salvation is by grace through faith in the shed blood of Jesus on the cross. Every individual is a sinner by birth; and that all accountable human beings are sinners by practice and choice and therefore must exercise personal faith in the redeeming work of Christ on Calvary and receive Him as Savior in order to be saved.
8. **The Church** –We believe the local church is a congregation of believers associated together by faith and fellowship of the gospel.
9. **The Righteous and the Wicked** –We believe in the resurrection of both the saved and the lost. They who are saved will have eternal life and they who are lost will have eternal damnation.

Tree of Life Early Learning Center Enrollment Information for Applicants

Thank you for your interest in Tree of Life Early Learning Center. The following steps summarize the enrollment process. The necessary forms are attached. If we can be of further assistance to you, please feel free to call.

1. **Registration:** Complete the registration and return it as soon as possible. We must have a copy of the birth certificate that is recorded in the State Bureau of Vital Statistics, a copy of the Social Security card, and the medical information that shows each student's immunizations and boosters are up-to-date. Students applying for kindergarten must be 5 years old by September 30. For purposes of enrollment priority, we will use the date that we have received **ALL** of the required information from you.

2. **Fees:** The registration, supply and the book fees are due with the initial registration for enrollment in the Tree of Life Early Learning Center. The re-enrollment registration fee is due by April 15 and book fees are due by July 1. All fees are non-refundable.

3. **Interview:** An appointment will be scheduled to discuss your child's enrollment and to interview the student after we receive your application form and fees.

4. **Physical Examination:** This form must be completed, signed by a physician, and returned as soon as possible. This **MUST** include immunization records.

5. **Reservation:** We will not be able to reserve a place for your child until the following items are completed:
 - ❖ A completed and signed application form and fees
 - ❖ A completed and signed contract with Tree of Life Early Learning Center
 - ❖ The Family Agreement
 - ❖ The Emergency Medical Information Card
 - ❖ The payment of the non-refundable registration fee
 - ❖ A completed School Health Examination and Immunization Record
 - ❖ A copy of Birth Certificate and Social Security Card
 - ❖ A copy of the student's most recent report card (if applicable)
 - ❖ A copy of the student's most recent standardized testing (if applicable)
 - ❖ The Pastor Recommendation form from your Pastor
 - ❖ The Teacher Reference form (if applicable)

We look forward to hearing from you.

Tree of Life Early Learning Center
Enrollment Application

Date _____

Early Learning: Indicate desired program

_____ Infant (2 months – 11 months)

_____ Toddler (12 months (must be walking)-30 months)

_____ 2 ½ year old (must be 2 ½ years old to enter)

_____ 3 year old (must be 3 years old by September 30)

_____ 4 year old (must be 4 years old by September 30)

Student Information

Name _____ Age _____ Sex _____ Birth Date _____

Address _____ Phone _____ Place of Birth _____

City _____ State _____ Zip _____

School last attended _____ Reason for leaving _____

Do you owe a balance to the last school attended? _____

Has the student ever been given a psychological or learning disabilities test? _____
If yes, please explain _____

Please indicate any history of any other physical or emotional condition or learning disability that has required or might require attention (including attention deficit disorder). Please include copies of all reports. _____

Has your child ever been expelled, dismissed, suspended, or refused admission to another school? _____

Has your child ever had disciplinary difficulties? _____ Explain _____

Does your child have any allergies? Foods _____ Medications _____ Insect stings _____
If yes, please explain _____

Has your child been on medication for an extended period of time? _____ If yes, please explain _____

Other children in the family (please list name, age, grade) _____

Spiritual Background

Are you a Christian? ___ Is your spouse a Christian? ___ Is your child a Christian? ___

If yes, give a short testimony how you became a Christian _____

Local church attending _____ Phone _____

Address _____

Pastor's Name _____ Is your family a member? _____

Does your family attend church or Sunday School regularly? _____

Does your child have Bible reading and prayer time at home? _____

What is your reason for wanting to enroll your child in our school? _____

School referred by _____

Family Information

Father's Name _____ Social Security # _____

Employment _____ Business Phone _____

Mother's Name _____ Social Security # _____

Employment _____ Business Phone _____

Marital Status: Married ___ Widow ___ Divorced ___ Separated ___ Single ___

Student is living with: Both parents ___ father ___ mother ___ other ___

If you have checked other, please complete the following:

Who has legal custody:

_____ ?

Name _____ Address _____

Employer _____ Home Phone _____ Business Phone _____

Does the biological parent have legal access? _____ If no, provide the necessary documentation.

List the name and telephone number of persons authorized to pick up your child from Tree of Life Early Learning Center.

1. _____

2. _____

3. _____

4. _____

I would like to receive school newsletters, upcoming events and other notices by e-mail. I understand that Tree of Life Early Learning Center will not share my e-mail address with anyone and will only use it for official school business.

E-mail address: _____ @ _____

This application must be filled out completely before it can be processed. The registration fee must accompany this application and is not refundable. An interview with the parents and the child will be required before final acceptance.

No person shall be denied enrollment, be excluded from participation in, be denied the benefit of, or subject to discrimination in any program or activity, based on gender, race, color, national origin or ethnic group. Tree of Life Early Learning Center reserves the right to deny admission to any applicant where, by reason of their entry into the school, additional personnel, special training for existing personnel or additional equipment may be required to appropriately meet the needs of the applicant. Attendance at Tree of Life Early Learning Center is a privilege. Any student whose conduct, language, or attitude in or out of school shows him/her to be in opposition to the basic principles and purpose of the school, or who maliciously destroys school property, will be asked to withdraw from the school. All parents or legal guardians are required to sign and return the Parental Statement.

View Student's Proof of Identity and Age

Document /Date/Certificate Number _____

Date of Notification of Local Law-Enforcement Agency (when required proof of identity is not provided). _____

Date of Application _____ Date of Enrollment _____

Date transferred/Graduated _____

For office use only

Emergency Information _____ Birth Certificate/Social Security Card _____

Signed Contract _____ Parental Statement signed and returned _____

Health and Immunization Record _____ Previous Transcripts _____

Registration Fee Paid _____ Date _____

Book Fee Paid _____ Date _____

Supply Fee Paid _____ Date _____

Fundraiser Donation Paid _____ Date _____

Tuition Payment Plan: Weekly _____

Parental Statement

Please keep and refer to this copy of Parental Statement.

1. We hereby pledge to pay our financial obligations to the school on the date due and understand that it may be necessary to withdraw our child if prior arrangements are not made on a past due account.
2. We give permission for our child to take part in all school activities and absolve the school from liability to us or our child because of any injury to our child at school or during any school activity. In case of an accident or serious illness, we request the school to contact us. If the school is unable to reach us, we hereby authorize the school to take whatever action it deems necessary.
3. We understand that our child's needs cannot be greater than the educational capabilities of the school.
4. We agree that, if for any reason our child does not respond favorably to the school, we will not seek to alter the Biblical principles under which the school is operating, but will seek to help our child to adjust to these principles in his/her own life. If, in consultation with the administrator and teacher, we are not able to achieve this in a reasonable time, we accept the responsibility to withdraw our child in a spirit of love and cooperation.
5. We agree to uphold and support the academic standard of the school by providing a place at home for our child to study and giving our child encouragement in the completion of any homework or assignments.
6. We appreciate the standards of the school and do not tolerate profanity, obscenity in word or action, dishonor to the Trinity and the Word of God, or disrespect to the personnel of this school. I hereby agree to support all regulations of the school in the applicant's behalf and authorize this school to employ such discipline, as it deems wise and expedient for the training of our child.
7. We understand that the school reserves the right to dismiss any child who fails to comply with the established regulations and discipline or whose financial obligation remains unpaid.
8. We understand that the school is an extension of the family and the parent and teacher are co-workers in the child's education. We will contact the teacher and discuss any areas of concern before discussing the problems with others. We will encourage and support our child's teacher.
9. We have read the dress code and will see that our child comes to school dressed in accordance with the dress code.
10. We understand that our child will not be allowed to leave with an unauthorized person. Any persons other than those authorized on the application form must be designated by the parent/s by either a note or phone call. Identification will be required.
11. We understand that we must provide the school a copy of all appropriate legal paperwork if there are custodial issues.
12. We understand that as an adult, we must exhibit mature, adult behavior and proper language while on school property. If improper behavior and language occurs at any time, our child may be denied the privilege to attend the school.
13. We understand that assessments will be made to cover damages sustained to school property by our child.
14. We will attend the Parent/Teacher conferences. These meetings are necessary for the partnership between the school and the family in the education of our child.
15. We do, hereby, state that we have made a thorough investigation of the philosophy and objectives, discipline and motives of the school, and do agree to make them our choice for this school year.

Father's Signature _____ Date _____

Mother's Signature _____ Date _____

Guardian's Signature _____ Date _____

Note: This agreement must be signed by both parents except in the case of a one parent home. A copy will be given to the parent/s and a copy kept in the student file. Returning families need to sign this agreement when they submit their re-enrollment form.

Tree of Life Early Learning Center

Contract

The philosophy of Tree of Life Early Learning Center has been established upon the Biblical principle that God has given parents the primary responsibility for educating their children. The Christian professionals and educators at the Tree of Life Early Learning Center enter into a partnership with the parents to care for the students and to teach the academics integrated with Biblical values. The Bible is the guide for how we ought to live. Its principles for living will be taught to our students daily and students will be encouraged by their teachers to put these principles into practice. It is the role of the school to support and complement the Biblical principles taught at home. We are a school whose board and staff are Christians and thus serve God and families as openly and honestly as we can. It is our hope that all our students and families have or will have a personal relationship with Jesus as Savior and Lord.

Understanding the philosophy of Tree of Life Early Learning Center, we the undersigned agree to the following items:

1. To support the pursuit of academic excellence and the development of Christ-like character by being actively involved with our child's educational process
2. That we will adhere to the standard of conduct expected by the school
3. That attendance is a privilege that may be withdrawn upon sufficient cause as determined by the administration.
4. We will be proactive when dealing with the issues of academic, moral, spiritual, and social growth of our child at the school. If a problem or concern should arise, we will take our concern directly to the person involved, in keeping with the Matthew 18 Principle.
5. We will regularly attend such meetings and other functions requiring our participation.
6. Students new to Tree of Life Early Learning Center or those returning after being dismissed are accepted on a trial basis for the first thirty (30) days.
7. All withdrawals, whether before the school year begins or during the year, must be made in writing. The total amount due upon withdrawal from Tree of Life Early Learning Center will be calculated by adding the cost of 20 additional school days (one month) beyond the effective date of withdrawal. Tuition charges continue until written notice of withdrawal is received in the school office.
8. Tuition payment is due on Monday of the week of attendance. Late charges will be \$5.00 per child, per day, for each day if tuition has not been received by Monday of the week of attendance. When payment is 30 days delinquent, the child will be removed from class until full payment (this includes the late charges) is made. No reductions will be made for absences regardless of the cause of such absences, unless it is the tuition-free vacation allowance of one week that is allowed per policy 2160.1 C. Tree of Life Early Learning Center, Inc. is in no way responsible for mail delays and payment is not considered made until it is received at the school office. A \$25.00 charge is added to an account for returned checks to handle the additional processing involved. When checks are returned for the second time, tuition will be required to be paid by cash or money order.
9. To the extent permitted by law, parents/guardians, on behalf of their child/children, does hereby release and waive all claims against Tree of Life Early Learning Center for personal injury or property damage arising out of or related to the child/children's attendance at Tree of Life Early Learning Center and agrees to hold Tree of Life Early Learning Center harmless from any and all claims or suit related to such attendance.
10. We agree to pay the tuition listed below in weekly installments. All accounts and obligations to the school must be satisfied before academic transcripts and final report cards can be released. Students cannot be re-enrolled until all accounts are current.
11. Families are expected to participate in the fundraising activities of Tree of Life Early Learning Center. If you desire not to participate by selling items valued at \$100.00 or more, a Fundraiser Donation will be required. Please sign below if you do not wish to participate in fundraising activities.

Weekly Tuition \$ _____ Registration \$ _____ Book \$ _____ Supply \$ _____ Fundraiser Donation _____
We have read this contract and its supporting documents carefully and hereby agree to the terms described above.

Father's signature/Guardian _____ Date _____

Mother's signature/Guardian _____ Date _____

Administrator's signature _____ Date _____

I, _____, choose not to participate in the fundraising activities.

Tree of Life Early Learning Center Fees 2012-2013

Infant Program (2 months – 11 months)

Fundraiser Donation (per family and optional)	\$100.00
Registration Fee (yearly) (non-refundable)	\$100.00
Tuition (infants) 5 Days	\$130.00
Tuition (infants) 3 Days	\$95.00

Toddler Program (12 months-30 months) (must be walking)

Fundraiser Donation (per family and optional)	\$ 100.00
Registration Fee (yearly) (non-refundable)	\$100.00
Tuition (toddlers) 5 Days	\$120.00
Tuition (toddlers) 3 Days	\$85.00

Early Learning Center Fees (2 ½ years old - 4 years old)

Fundraiser Donation (per family and optional)	\$100.00
Registration Fee (yearly) (non-refundable)	\$100.00
Registration Fee (yearly) if paid by April 15(non-refundable)	\$75.00
Book Fee (yearly w/application) (non-refundable) Preschool	\$70.00
K-4	\$70.00
Five Day Program	\$105.00
Three Day Program	\$75.00
Additional Daily Drop In Fee	\$21.00

Tuition is due on Monday of the week of attendance. Late fees will be applied.

Members in good standing of Tree of Life Ministries will receive a 10% discount on tuition (children and grandchildren).

A family will pay full tuition for the oldest child and the second and third child will each receive a 10% discount.

Tree of Life Early Learning Center Dress Code

BOYS AND GIRLS (P3&K4)

- 6635.1** Neat short sets (moderate length), culottes, pants, and jeans will be allowed for ELC students.
- 6635.2** Sundresses and halter- tops **are not** acceptable.
- 6635.3** Sweatshirts, tank tops, and t-shirts are not acceptable.
- 6635.4** Clothing with pictures, slogans, decals, or large logos is not acceptable unless Christian theme or logo.
- 6635.5** Tops should be long enough to be belted or tucked in when worn with slacks or a skirt.
- 6635.6** Skirts and dresses should be of adequate length as to not compromise the modesty of the wearer during routine school activities.
- 6635.7** Hair should be clean, neatly combed and kept away from the eyes. (Please avoid fad haircuts and unnatural colors).
- 6635.8** Pants with belt loops must be accompanied by a belt.
- 6635.9** Shoes and socks (or tights) must be worn at all times.
- 6635.10** Tennis shoes must be neat, properly tied, and in good condition. Street shoes must have rubber soles. **Sandals, thongs or flip-flops are not allowed for safety reasons.**

6640 – ITEMS BROUGHT TO SCHOOL

Lunch boxes, book bags, notebooks, gym bags, or anything relating to these categories should not have pictures, slogans, or writing on them that offends contemporary Christian standards of decency. All items must be labeled with the student's name.

Tree of Life Early Learning Center and Student Emergency Information Card

Student's Name _____ Grade _____

Address _____ Phone _____

Age _____ Date of Birth _____ Place of Birth _____

Gender _____

Physician _____ Phone _____

Dentist _____ Phone _____

Special Health Problems _____

Father's Name _____ Employment _____

Work Phone _____ Cell Phone or Pager _____

Mother's Name _____ Employment _____

Work Phone _____ Cell Phone or Pager _____

Other Emergency Contacts _____ Phone _____

_____ Phone _____

_____ Phone _____

Insurance Provider and Policy Number _____

List any allergies your child has _____

List any prescription or over the counter medication that your child takes

Please sign your name below if permission is granted the school to : (1) Deliver your child to the person named above by you; (2) the doctor named above; (3) the emergency room of the nearest hospital if you cannot be reached. (4) Parents' personal medical/hospital insurance will be the primary insurance for illness or injury.

Father's signature _____ Date _____

Mother's signature _____ Date _____

Guardian's signature _____ Date _____

Tree of Life Early Learning Center

Consent for Release of Information Under HIPAA

I authorize my child's healthcare provider, _____, to release to Tree of Life Early Learning Center information regarding the immunization records and developmental history of my child, _____. This information is to be made available to verify that vaccinations have been completed in compliance with State requirements or to assist the school in planning educational and developmental activities to meet the needs of my child.

This authorization is to remain in effect throughout the period in which my child is enrolled in any program of Tree of Life Early Learning Center and is required for enrollment. I understand that I may revoke this consent at any time, in writing, but that such revocation cannot be retroactive. I understand that there is a possibility that the information released under this authorization could be further disclosed by the recipient and no longer protected under HIPAA.

Parent's/Guardian's Signature: _____ **Date:** _____

Relationship to Child:

Agreements

1. Tree of Life Early Learning agrees to notify the parents(s)/guardians(s) whenever the child becomes ill and the parent(s)/guardian(s) will arrange to have the child picked up as soon as possible if so requested by the school.
2. The parent(s)/guardian(s) authorized Tree of Life Early Learning Center to obtain medical care if any emergency occurs when the parent(s)/guardian(s) cannot be located immediately.
3. The parent(s)/guardian(s) agree to inform Tree of Life Early Learning Center within 24 hours or the next business day after his child or any member of the immediate household has developed a reportable communicable disease, as defined by the State Board of Health, except for life threatening diseases which must be reported immediately.

Parent's /Guardian's Signature _____ **Date** _____

**Tree of Life
Early Learning Center
Parent Agreement**

The application process is not complete and the student cannot attend until this agreement is signed and returned to the office.

I, _____, whose child, _____.

is enrolled in Tree of Life Early Learning Center, have received a copy of the Parent's Handbook. I have read and understand the policies and guidelines in the Parent's Handbook and I agree to abide by them.

Parent's Signature _____ Date _____

Tree of Life Early Learning Center Photo Permission

I, _____, agree to allow photos of my child and my family to be used in published materials such as school newsletters, television commercials, newspaper articles, and on the school web site.

Date

Parent Signature

Tree of Life Early Learning Center

Dear Parents:

We count it a privilege that you have chosen Tree of Life Early Learning Center to assist you in producing children who love God with their hearts and minds. There may be opportunities for you to assist our school. Below you will find a list of possible ways. Please check those that are applicable.

- Fund-raising on a limited basis
- Leadership in fund-raising
- Assisting teachers as room mothers/fathers
- Assisting office personnel with mailings etc.
- Assisting with a school workday
- Assisting with book fairs
- Any area

Thank you for taking the time to complete this form.

T—ogether

E—veryone

A—chieves

M—ore

Teamwork is essential to achieve positive results.

Thank you for joining the Tree of Life Early Learning Center Team.

Tree of Life Early Learning Center Pastor Recommendation

Family Name _____

Address _____

Children applying to Tree of Life Early Learning Center: _____

Dear Pastor:

The above named student has applied for admission to Tree of Life Early Learning Center. Tree of Life Early Learning Center endeavors to look at an individual from an academic, spiritual, and personal character basis. Please complete this form and return it to us as soon as you are able. Your responses will be held in strictest of confidence.

If you, as a Pastor, are enrolling your child, please ask another minister, deacon or church leader to complete this form.

No person shall be denied enrollment, be excluded from participation in, be denied the benefit of, or subjected to discrimination in any program or activity on the basis of race, sex, color, national origin, or ethnic group.

Is the above family an active member of your church? yes no

Have any members of the family held a leadership position in the church? yes no

Are the children active in the youth/children's program of the church? yes no

What is your understanding of this family's relationship to God?

Are there any concerns that should be known by the school which could either positively or negatively influence the decision of the administration?

Do you recommend the family for admission to Tree of Life Early Learning Center?

yes no

Pastor's Name _____

Church Name _____

Address _____

Phone _____

**Please return to:
Tree of Life Early Learning Center
2812 Greenview Drive
Lynchburg, Virginia 24502**

Religious Exempt Child Day Center
Program Decision to Administer Medications

Tree of Life Early Learning Center has made the following decision regarding the administration of medications to a child in our program:

The staff **WILL** administer prescription and non-prescription medications.

Provider and parent of each enrolled child must sign below. The provider must maintain a copy of this form in each child's individual record.

Provider's Name (please print):	Facility Name: Tree of Life Early Learning Center
Provider's Signature:	Date:
Parent's Signature:	Date:

Authorized Staff To Administer Prescription Medication

The program will administer prescription medications in accordance with the physician's or other prescriber's instructions and in accordance with the standards of practice in the MAT training. Only a provider who has successfully completed the MAT training or has appropriate licensure to administer prescription medications and is listed as a medication administrator in the Program's Decision Regarding Medication Plan will be permitted to administer prescription medications.

I understand that any individual listed in this section as a medication administrator is approved to administer prescription medication using the following routes: topical, oral, inhaled, eye, and ear, medication patches and epinephrine using an auto-injector device.

I understand that to be approved to administer prescription medication, all individuals listed in the Program's Decision Regarding Medication Plan (unless the individual is licensed to administer prescription medications) must have a valid:

- Medication Administration Training Certificate (MAT)
- CPR certificate which covers all ages of the children Tree of Life Early Learning Center is approved to care for as listed on the registration/license; and
- First aid certificate which covers all ages of children Tree of Life Early Learning Center is approved to care for as listed on the registration/license.

**Tree of Life Early Learning Center
2012-2013
ALL ABOUT ME**

My name is _____ My birthday is _____

My mom & dad are _____

There are _____ children in my family. These are my brothers and sisters names, ages and the school that

They attend: _____

I am the _____ oldest _____ middle _____ youngest

My previous child care was: _____

I am: Right Handed / Left Handed / Unsure

Please check the appropriate response - feel free to make additional comments.

NAP TIME

Self Help Skills	I need help	I can do it myself
Buttons		
Zippers		
Socks		
Shoes-correct foot		
Tie shoe laces		
Coat or Jacket Take off		
Coat or jacket Put on & fasten		
Coat or jacket- hang up		
Eat with spoon		
Eat with ford		
Drink from a regular cup		
Use napkin to wipe hands and face		
Bathroom-knows when to go & do so consistently		
Bathroom-will tell you when he/she needs to go and will say:		
Bathroom-fasten and unfasten pants		
Bathroom-wiping		
Bathroom-flushing		
Bathroom-wash hands		

Usual Bedtime	
Usual Naptime	
Length of Nap	
Frequency of potty:	
Accident during nap time:	

FOOD

My favorite foods are	
I really don't like	
My appetite is	

Please check any of the following that apply to me and make additional comments that might be helpful to my teacher.

- _____ I am coordinated for my age
- _____ I can be physically aggressive
- _____ I am generally cooperative
- _____ I enjoy playing alone
- _____ I like to play in groups
- _____ I can speak clearly for my age
- _____ I am talkative
- _____ I am quiet
- _____ I am shy
- _____ I am excitable
- _____ I am restless
- _____ I am very determined

My family reads to me	Hours	Minutes
My favorite books are	Title	Author

Our family likes to do these activities together:

Special Routines (don't forget to list items used such as blanket, pacifier or other special items)

Meal time: _____

Nap time: _____

Potty time: _____

Discipline (methods that my parents have found very effective:

This is what happens when I disobey: _____

This is what happens when I hurt others: _____

This is what happens when I won't share: _____

Other:

My favorite toys are: _____

I enjoying playing: _____

I am really good at: _____

I am working at improving: _____

Here is what I hope to gain from being a part of your preschool: _____

Below is a note from my parents. They think it would be very helpful for my teachers to know all the special things that are unique about me. They also want you to know things that will help you to help me adjust quickly to my new school.
