

Child: First Name: _____ M.I. _____ Last Name: _____

Gender: Male Female Age _____ Date of Birth: _____

Child's physical address: _____

Mother/Legal Guardian: First Name: _____ Last Name: _____

Address if different from child's: _____

Cell Phone: _____ Cell Phone Carrier: _____ Occupation: _____

Custodial Parent Marital Status: Married Single Divorced Separated Widowed

Email: _____

Father/Legal Guardian: First Name: _____ Last Name: _____

Address if different from child's: _____

Cell Phone: _____ Cell Phone Carrier: _____ Occupation: _____

Custodial Parent Marital Status: Married Single Divorced Separated Widowed

Email: _____

I give permission to have our contact information printed in my child's class directory. ____ yes ____ no

Our computer management program allows two email addresses per family. Another adult caregiver's address can be added in place of one of the parent's addresses to receive email notifications.

Remove: mother's email or father's email to add:

Name _____ Relationship _____ Email _____

Person(s) responsible for payments:

Payer(s) Name _____ relationship _____

Telephone: _____ Email Address: _____

PLEASE CHECK THE PROGRAM DESIRED:

The child must be the age appropriate to the class by August 31 of enrollment year.

4-year-old, Mon-Fri, \$335.00 monthly - toilet independent required

3-year-old, Mon-Tues, \$245.00 monthly - toilet independent required

3-year-old, Wed-Fri, \$265 monthly - toilet independent required

2-year-old, Mon-Tues, \$255.00 monthly

2-year-old, Wed-Fri, \$275.00 monthly

Emergency Contacts & Authorized Pickup Persons (other than the Legal Guardians)

1st Contact/Pick Up Name: _____ Phone: _____
Relationship to the Child: _____

2nd Contact/Pick Up Name: _____ Phone: _____
Relationship to the Child: _____

Additional Comments & Information:

Is there any other information that would be helpful for us to know about your child?

_____ Religious Affiliation/ Belief _____

List allergies, medical conditions, or special care your child may require.

Has your child been identified with a delay, developmental disability, or special need? _____

If so, please explain _____

Previous Preschool experience: [] Yes [] No. If yes, where? _____

How did you learn about Covenant Community Preschool? _____

FIVE-HOUR FAMILY VOLUNTEER ANNUAL COMMITMENT

The parents/guardians agree donate 5 volunteer hours to the school annually.

I agree that an adult will volunteer 5 hours during **2024-25** school year.

Legal Guardian: _____ **Date:** _____

Liability Release

I assume responsibility for illness, or injury that may occur due to my child and my participation in the program. I release the Covenant Community School, INC, and Christ Church from all liability, costs, and damages that might arise from participation in the program.

I further consent Covenant Community School, INC, to seek emergency treatment for my child.

Legal Guardian: _____ **Date:** _____

THE FOLLOWING MATERIALS ARE REQUIRED TO HOLD A CHILD'S CLASS POSITION AT REGISTRATION

- Completed registration form.
- \$90 registration fee
- A non-refundable advance month tuition, that is applied to May 2025, is due at registration or before May 1.

Amount due to hold child's position:

2YO-Two-day class- \$255 advance May 2025 tuition plus \$90 registration total - \$345

2YO-Three-day class- \$275 advance May 2025 tuition plus \$90 registration total - \$365

3YO-Two-day class- \$245 advance May 2025 tuition plus \$90 registration total - \$335

3YO-Three-day class- \$265 advance May 2025 tuition plus \$90 registration total - \$355

4YO-Five-day class- \$335 advance May 2025 tuition plus \$90 registration total - \$425

COVENANT COMMUNITY PRESCHOOL (CCP) INCLUSION POLICY

POLICY STATEMENT:

CCP is committed to providing developmentally appropriate early learning and development experiences that support the access and participation of each child. Each child is unique and will work in partnership with families and professionals involved in the child's care to provide the support needed for school success.

Strategies:

Inclusive Environment CCP uses developmentally appropriate practices and considers the unique needs of each child when planning and making the realistic adaptations necessary to meet the needs of children. CCP's staff will work with children's therapists and other professionals to implement strategies into class routines and activities.

Family-Centered Practices CCP acknowledges and respects each family's priority for their child. Legal Guardians are encouraged and supported to collaborate with staff to ensure that each child has an opportunity for school success.

Professional Development and Support for Staff CCP is not a therapeutic school; however, efforts are made to ensure that CCP staff are confident of meeting the developmental and educational needs of the children we serve.

Collaboration with Other Professionals Many children with special needs, including behavioral, are supported by developmental and educational professionals. CCP welcomes professionals and works with them to help ensure the child's success. The service provider may provide services for the child in the classroom environment and work collaboratively with the teachers to determine the best strategies to support the child in the group setting. CCP supports the child's teacher's participation in Individualized Education Program (IEP) meetings. Student shadow support is welcomed and occasionally required by CCP if it is deemed necessary by staff or outside professionals for the child's success in school.

In some cases, CCP may be unable to provide the services a child needs. If this is determined, CCP will work with the child's Legal Guardians to locate a facility that specializes in the child's particular learning profile.

CONSIDERATIONS FOR ENROLLMENT

Children who have been evaluated and identified as having special needs before their enrollment are considered for admission on an individual basis. Legal Guardians must provide relevant records and evaluations at the time of application, including an IEP if available. The Director will consult with Legal Guardians to learn about the child's developmental strengths and weaknesses. Based on this information, the Director will decide on school enrollment.

1. The Legal Guardian's failure to share pertinent records and evaluations will void the child's enrollment at CCP.
2. The behavior and maturity of the child may influence the child's success in school.
3. The determining factor for a child to attend CCP is that the child can consistently maintain the class schedule.

Two possible determinations are made:

- **The child's presence in the classroom is of mutual benefit to the child and CCP.**
- **CCP cannot meet the child's needs, and enrollment is void.**

A child not identified as having special needs before admission may be asked for an evaluation after acceptance to CCP. The assessment recommendation may originate with the staff, Legal Guardians, or health personnel. Legal Guardians are expected to arrange an evaluation within 30 days and share the date for the assessment with CCP staff to continue enrollment. CCP will offer guidance during this process. A copy of the evaluation result is required to continue enrollment. Based on the information received and consultations with Legal Guardians, teachers, and professionals, the Director will decide the child's continued enrollment. If Legal Guardians decline the evaluation of their child and it is determined the child is not functioning well in the classroom, Legal Guardians will then be asked to seek another placement.

CCP will make reasonable adaptations to meet each child's individual needs. However, the safety and successful functioning of the class unit always have priority over a child's individual needs.

CCP will strive to accommodate as broad a range as possible, believing that this diversity strengthens and enriches all children and the adults who work with them.

Legal Guardian: _____

Date: _____

The Health Certificate and Immunization Record are due before the first day of school and may be submitted after the registration forms.

Child: First Name: _____ M.I. _____ Last Name: _____

Gender: [] Male [] Female Age _____ Date of Birth: _____

A. History (This section may be completed by a parent/legal guardian or health caregiver.)

1. Is child allergic to anything? No___ Yes___ If yes, please describe:
2. Is child currently under a doctor's care? No___ Yes___ If yes, please describe:
3. Any previous hospitalizations or operations? No___ Yes___ If yes, please describe:
4. Any history of significant previous diseases or recurrent illness? No___ Yes___ If yes, please describe:
5. Does the child have any physical disabilities: No___ Yes___ If yes, please describe:
6. Any mental disabilities? No___ Yes___ If yes, please describe:

B. Physical Examination: The examination must be completed and signed by a licensed physician, an 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.

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 ___ Follow-up ___

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 # _____

INDIVIDUALIZED CARE PLAN

An Individualized Care Plan signed by the child's Health Care Provider is required for children with a special need that may require preschool staff intervention. Individualized Care Plans must include the child's condition, symptoms that may occur, and course of action the CCP staff should follow. Health care plan is required before the first day of school

3415 Union Road, Gastonia, NC 28056, 704-616-9253, lyndawilliamsccp@gmail.com, covenantcommunitypreschool.com

CCP provides faith-based, high-quality preschool programs for preschool age children. The registration process begins in January and continues until each class reaches capacity. A waitlist is available after classes are full.

CCP welcomes all children; however, some physical, emotional, behavioral, or cognitive needs may require more deliberation. Legal Guardians should consult with the Director regarding concerns before registering. In addition, children must be able to keep the pace of each class schedule to be considered for registration.

To best serve our students, the Director makes class assignments. Legal Guardians may contact the Director after January 31 to verify the child's class placement. A waitlist is available after classes are full. CCP will contact families on the waitlist as openings occur.

TUITION and FEES

A non-refundable annual registration fee of \$90.00

A non-refundable advance month tuition, that is applied to May 2025, is due at registration or before May 1, to secure the child's position. The remaining eight monthly tuition payments are due on the first day of the month from September through April.

There is no tuition reimbursement or forgiveness for days school is not in session due to preschool schedule, weather-related closings, power or water outages, or days when a child student is absent due to illness or travel.

MONTHLY TUITION PAYMENTS

Two-Year-Old classes-

Two-day class (Monday through Tuesday) \$255.00 monthly

Three-day class (Wednesday through Friday) \$275.00 monthly

Three-Year-Old classes

Two-day class (Monday through Tuesday) \$245.00 monthly

Three-day class (Wednesday through Friday) \$265.00 monthly

Four-Year-Old class

Five-day program (Monday through Friday) \$335.00 monthly

A non-refundable annual registration fee of \$90.00 due at registration

A \$100 supply fee is due on September 1

PAYMENTS

Payment is accepted by cash, check, and credit card (a five percent service fee apply to credit card payments). Checks payable to CCP can be dropped into one of the tuition boxes or mailed to CCP 3415 Union Road, Gastonia, NC 28056. Families may choose to use their bank's online bill pay feature to make payments to CCP. This service offers an automatic payment schedule and mails tuition checks directly to CCP.

DELINQUENT TUITION AND FEES

Accounts that are not paid by the tenth of each month incur a \$20 late fee. If the bill becomes forty-five (45) days delinquent, the child may not attend class until payments are made. Please contact the Director before tuition becomes delinquent due to financial hardship to determine a payment plan to keep the family in good standing and avoid disrupting the child's school attendance.

Families with delinquent accounts will not be permitted to register for the subsequent school year.

HEALTH CERTIFICATE

The Health Certificate is due before the first day of school. Children must have current health certificate that is signed/dated by the child's Health Care Provider regardless of the child's next scheduled well check.

Families who enroll after August 15 may provide a current health certificate within thirty (30) days after the first day of school attendance.

BEGINNING OF THE SCHOOL YEAR

- Classroom teachers call each enrolled family in mid-August to schedule an appointment for a Family Classroom Visit.
- The Parent Orientation is held the first Tuesday after Labor Day @ 5:30. This event is for adults only.
- Phase-in days begin on the Wednesday after Labor Day.

WITHDRAWAL FROM PROGRAM

Withdrawal from the program requires a three-week notification. Full tuition is due through the withdrawal (three-week notification) period.

IMPORTANT SCHOOL INFORMATION

- The Family Handbook is online at covenantcommunitypreschool.com, and a hardcopy is available by request,
- Students must wear tennis shoes with rubber sole, closed heel and toe.
- Toilet independent means the child wears underwear with consistently no accidents, able to verbalize when they need to toilet and do most of the toileting themselves.
- No student bookbags.
- All food provided for children's consumption must be in an unopened factory-sealed package with the food fact label attached. Fruits and vegetables are whole and uncut.
- Five family volunteer hours are required annually.

