

# CREATIVE BEGINNINGS



Preschool Parent Handbook  
2024

Revised Dec 31<sup>st</sup> 2023

# Creative Beginnings Preschool

## 2024-2025

Welcome to Creative Beginnings Preschool. We are delighted that you and your family have chosen our school for your child's education. Please read through the Parent Handbook and return all the necessary forms prior to the first day of school.

108 Valley Dr. Units A & B  
Elburn, IL 60119  
(630) 365-9555  
ElburnCreativeBeginnings.com

Kristy Williams  
Owner/Director  
Cell phone number: (630) 802-3751  
ElburnCreativeBeginnings@gmail.com

### HOURS OF OPERATION

9:00am-3:00pm- Monday through Friday

### CURRENT PROGRAMS

#### **Preschool**

Wed/Fr Morning (\$175 per month)

9:00am-11:30am

3 years of age

Wed/Fr Morning (\$175 per month)

9:15am-11:45am

3 years of age

Mon/Tu/Th Morning (\$216 per month)

9:00am-11:30am

3 years of age

#### **Multi-Age**

Mon/Tu/Th Morning (\$211 per month)

9:15am-11:45am

3, 4, and 5 years of age

#### **Pre-Kindergarten**

Mon/Tu/Wed/Th Afternoon (\$270 per month)

12:15pm-2:45pm

4 and 5 years of age

Mon/Tu/Wed/Th Afternoon (\$270 per month)

12:30pm-3:00pm

4 and 5 years of age

Literacy Club (\$77 per month)

12:30pm-3:00pm

4 and 5 years of age

#### **Friday Night Enrichment Program**

Friday (Must sign up prior to participate)

5:00pm-7:55pm

3,4 and 5 Years of age

# CREATIVE BEGINNINGS MISSION STATEMENT

As preschool is often the first time in a classroom for many children, we believe it is essential to provide a positive and enjoyable experience as the building block to a successful education. We strive to make every activity both fun and educational so that the students may get the most from their time socially and academically, fully preparing each child for the next level of education.

## ABOUT THE DIRECTOR/OWNER

Ms. Kristy - I began my career by focusing on my own education, earning a degree in Human Services and Early Childhood Education as well as studying American Sign Language. Along with over twenty years of experience, I have continued attending classes, seminars, and conventions in order to stay current with the ever-growing field and provide the best experience for my students. I have taught in a variety of classrooms including three-year-olds, four-year-olds and Pre-Kindergarten as well as Early Childhood Music, Sign Language, and Fitness, and I am confident that these experiences have prepared me to better assess and assist the development of my students.

## CLASS DESCRIPTIONS

**Preschool Program** - The three-year-old class will focus on the building blocks of early education. In class, we will work on important social skills that will help each child to make and keep friends. This class will also include activities designed to promote basic letter recognition, number recognition and other age-appropriate academics. All children must be fully potty trained before their first day. Exceptions for potty training may be made with approval from the Director.

**Multi-Age Program**- The multi-age class is geared for children ages three to five. The class curriculum will have projects that challenge students academically as well as socially. Children will be encouraged to grow their cognitive, language, and motor skills in the most creative and educational ways. Three year old students must be entering their second year of school or have permission by the director to enroll in the Multi-Age program.

**Pre-K Program** - The Pre-K class is designed to encourage individual growth in each curriculum domain. Adding an extra focus on letter recognition, cognitive skills and writing skills as well as working to further advance the children's social skills, we help each child to be prepared for kindergarten and beyond. Pre-K children must be four years of age by September 1<sup>st</sup>.

**Literacy Club** - Literacy Club is an extension of our Pre-K program. The additional class time will focus on the literacy and cognitive skills needed for kindergarten readiness. Each day will have a letter based theme and will follow jolly phonics lessons. Because the class size is limited, the program offers low teacher to student ratios that allow for more personalized time to practice all the skills needed for to transition into kindergarten.

\*Each class will include an introduction to Jolly Phonics, basic yoga, Spanish, and sign language.

# DAILY SCHEDULE

## 9:00am South Class

**9:00** Wash hand and morning table activities- Children explore at tables until fellow classmates have completed the hand washing process.

**9:15** Welcome Circle - An introduction to the day's theme and activities, job chart.

**9:35** Classroom Interest Centers - Cognitive, science, handwriting practice, art, and social activities, as well as small-group/one-on-one skill practice with teachers.

**10:30** Clean-up - Work together to clean up the classroom and transition into the following activity.

**10:40** Snack - Wash hands and practice social skills needed in a family-style served snack.

**11:00** Second Circle - Book, calendar, weather, songs, and review of the day's activities.

**11:15** Large Motor - Practice of large motor skills

**11:30** Pick-up - Parent review and child release to parent(s) and/or guardian.

## 9:15am North Class

**9:15** Wash hand and morning table activities- Children explore at tables until fellow classmates have completed the hand washing process.

**9:30** Welcome Circle - An introduction to the day's theme and activities, job chart.

**9:50** Classroom Interest Centers - Cognitive, science, handwriting practice, art, and social activities, as well as small-group/one-on-one skill practice with teachers.

**10:45** Clean-up - Work together to clean up the classroom and transition into the following activity.

**10:55** Snack - Wash hands and practice social skills needed in a family-style served snack.

**11:15** Second Circle - Book, calendar, weather, songs, and review of the day's activities.

**11:25** Large Motor - Practice of large motor skills

**11:45** Pick-up - Parent review and child release to parent(s) and/or guardian.

## 12:15pm South Class

**12:15** Wash hand and morning table activities- Children explore at tables until fellow classmates have completed the hand washing process.

**12:30** Welcome Circle - An introduction to the day's theme and activities, job chart.

**12:50** Classroom Interest Centers - Cognitive, science, handwriting practice, art, and social activities, as well as small-group/one-on-one skill practice with teachers.

**1:45** Clean-up - Work together to clean up the classroom and transition into the following activity.

**1:55** Snack - Wash hands and practice social skills needed in a family-style served snack.

**2:15** Second Circle - Book, calendar, weather, songs, and review of the day's activities.

**2:25** Large Motor - Practice of large motor skills

**2:45** Pick-up - Parent review and child release to parent(s) and/or guardian.

## 12:30pm North Classes

**12:30** Wash hand and morning table activities- Children explore at tables until fellow classmates have completed the hand washing process.

**12:45** Welcome Circle - An introduction to the day's theme and activities, job chart.

**1:05** Classroom Interest Centers - Cognitive, science, handwriting practice, art, and social activities, as well as small-group/one-on-one skill practice with teachers.

**2:00** Clean-up - Work together to clean up the classroom and transition into the following activity.

**2:10** Snack - Wash hands and practice social skills needed in a family-style served snack.

**2:30** Second Circle - Book, calendar, weather, songs, and review of the day's activities.

**2:40** Large Motor - Practice of large motor skills

**3:00** Pick-up - Parent review and child release to parent(s) and/or guardian.

# CREATIVE BEGINNINGS POLICIES & PROCEDURES

## HOLIDAY/VACATION SCHEDULE

The first day of classes will be first Sept 3<sup>rd</sup> 2024 The last day of classes will be May 14<sup>th</sup> 2025 (Wed/Fr Classes only) and May 15<sup>th</sup> 2025 for all other classes.

A copy of the school's calendar is available in the Downloads section of the preschool's website.

Creative Beginnings will follow the Kaneland School Dist. 302 Holiday Calendar.

We close for the following holidays and teacher institute days:

Labor Day, Columbus Day, Thanksgiving Break, Winter Break, Martin Luther King, Jr. Day, Presidents' Day, March 7<sup>th</sup> County wide institute day, Spring Break and Easter Break.

## SUPPLY LIST

In order to keep tuition costs down, we ask each child to donate these items or provide a gift card that will be used throughout the school year: (The list will be updated and sent out before the school year to ensure we only ask for the supplies that are necessary for that school year).

### School Supplies For All

- 1 boxes of **5 oz.** Dixie cups
- 1 pack of round coffee filters (to use for bowls for snack)
- 1 pack of stickers of your child's choice
- 2 glue sticks
- 1 container of Clorox wipes
- 1 three-ring binder **½ inch thick** (new students only) **Must be ½ inch please or we will not have room to store them though out the year**

### Optional

We could always use extras of the following items, but they are optional:

- 1 box of Crayola washable markers (any size and color)
- 1 ream of printer paper
- 1 roll of blue painter's tape (Scotch Blue Original .94 in preferred)
- 1 package of thin (fine point), low-odor, colored dry erase markers
- An extra box of **5 oz.** Dixie cups
- Ziplock bags (any size, grip n' seal)
- Batteries (any size)
- Thinking putty (any size)

OR

For your convenience, in place of purchasing the supplies, please feel free to purchase a \$25 gift card to one of the following locations: Walmart, Target, Aldi or Amazon. We will use the gift card later in the year to resupply as we start to run low.

## **FIRST DAY!**

Please note that all the following items must be turned in on or before your child's first day:

- All enrollment forms, including the medical form and a copy of your child's birth certificate.
- First month's tuition, payable by check to Creative Beginnings
- Please bring the following items to class each day:
  - A child-sized backpack. The backpack must be large enough to fit standard 8 ½ by 11" paper, please.
  - A change of clothing inside the front pocket of the backpack.

## **COMMUNICATION**

- Parents will receive, through email, a monthly newsletter outlining the curriculum for the following month.
- A handout will be available through Tadpoles with weekly information that the parents can use at home.
- Parents can find information about upcoming events through the website at [elburncreativebeginnings.com](http://elburncreativebeginnings.com) and through Facebook [www.facebook.com/elburncreativebeginnings/](http://www.facebook.com/elburncreativebeginnings/)
- Each parent will receive a Tadpoles communication email at the end of each school day.
- Parent/Teacher Conferences will be offered as followed:
  - Pre-K age students in November and March
  - Underclassmen in February
- Once the enrollment process is complete, parents are welcome to join our private parent-run Facebook communication page at <https://www.facebook.com/groups/359185941183768/>
- Directors and Director Delegates are available 15 minutes before and after class to accept paperwork and answer questions.

## **TADPOLES**

Tadpoles is an app that enables early childhood educators to manage their classrooms and communicate their students' progress to parents and guardians. The free Tadpoles Parent app enables parents and guardians to view their child's lesson plans and photos at any time. Parents are highly encouraged to check their daily reports each day as it is the main way teacher communicate with families.

Your Tadpoles email will include the following:

- A way to communicate with teachers. Parents can send a note at the beginning of the day or mark a student absent
- A copy of the day's lesson plans
- At least one picture of the child daily
- Any notes and/or reminders for the parents
- Extra practice materials that families can use at home

## PERSONAL ITEMS BROUGHT TO SCHOOL

- All personal items must stay behind in the family's car. Teachers and staff are not held responsible for any lost items brought into the classroom.
- No toys shall enter the classroom unless requested by the teacher. (this includes inside their backpack)
- All clothing items (including jackets, hats, sweatshirts and boots) must be labeled with the child's name.
- We do not encourage water bottles because we have extra cups available in the classroom, but if your child would like to bring one we ask you to please ensure that water bottles brought to school are labeled with the child's name clearly marked and that they contain only water.
- Children are discouraged from wearing smart watches as they cause a distraction in class.

## BIRTHDAYS

- We encourage children to celebrate birthdays with their classmates in class. Do too both allergies we are discouraging birthday snacks. Instead, children are welcome to bring in a special gift that is donated to the classroom to share with their classmates. Some examples are a favorite book, a special toy or an item that the birthday child thinks the other students would enjoy sharing. If you would like other ideas, please see the school's wish list at

[https://www.amazon.com/hz/wishlist/ls/3DVU2L3XA1HM1?ref=wl\\_share](https://www.amazon.com/hz/wishlist/ls/3DVU2L3XA1HM1?ref=wl_share)



## FOOD POLICY

- Each child will have the opportunity to eat one snack served with juice daily.
- All snacks must be pre-packaged items and may not be homemade.
- All items must be in original packaging and include a complete ingredient label.
- Creative Beginnings is a **peanut and tree nut sensitive school**. Please do your best to only bring food and snacks that do not contain peanuts and/or tree nuts as they will not be served.

## EMERGENCY MEDICAL CARE POLICY

In case of a medical emergency requiring medical assistance, Emergency Services will be called immediately. The school will also inform the parents immediately. If the parents cannot be reached, the school will contact the emergency number that is provided. The child will be transported by ambulance to the nearest hospital.

## HEALTH CARE, EMERGENCY MEDICAL CARE, AND ACCIDENT PROCEDURES

Parents/Guardians need to sign a release form stating that they give permission for Creative Beginnings staff to seek medical treatment for their child. This is required before the child begins the program.

Parents need to provide a signed release form with their cell phone, work number, and two other emergency contacts. In an emergency, we will attempt to notify the parents first and then call the next authorized contact. Parents will receive notification of any illness, accident, or injury after treatment.

If a child is exempt from medical care based upon religious beliefs, the parents/guardians must provide a written statement along with phone numbers, names of contacts, and the service of a certified practitioner. If none of the above can be reached and the staff feels it is a life-threatening situation, the local emergency staff will be called to assist the child.

- Creative Beginnings Preschool is insured as a program but does not offer individual insurance for the students.

## **HEALTH CHECKS AND ATTENDANCE POLICY**

School is important to children of all ages. Regular attendance at school, even preschool, is important to help your child grow and mature. Please make every attempt to be sure that your child is able to attend every day and is on time for the start of the class. However, when a child is sick, it is best for everyone, including the child, to stay home when the child does not feel well. At Creative Beginnings, we do our best to promote a healthy environment for your child.

It is the policy of the school that the staff shall conduct a daily, pre-admission screening to determine if the child has obvious symptoms of illness. If a child becomes ill at school, a parent/guardian will be called to take the child home. The child will be isolated from the other students in class until a parent/guardian is available.

A child with any communicable disease should be kept at home. Examples of communicable diseases include but are not limited to the following: temperature of 100 degrees axillary, vomiting or diarrhea (2 or more episodes in a 24-hour period), influenza, chicken pox, lice, pink eye, measles, mumps, pinworm, ringworm, impetigo (contagious skin sores), scabies, or any unidentified rash.

We also require that all confirmed communicable diseases are reported to Creative Beginnings. If any confirmed cases of communicable diseases are reported, a sign will be posted for all parents/guardians with the symptoms to watch for.

**All students must be symptom-free for 48 hours before returning to the school.**

Please note, if your child will not be attending class for the day, we ask that you please notify the staff through Tadpoles or by calling the school at (630) 365-9955 or emailing prior to the start of the school day.

## **MEDICATION POLICY**

- All medications must be labeled with the child's first and last name.
- All required preventive medicine must be submitted to and kept at school facilities. (Epi pens, Benadryl and seizure medications.
- Medicines are located in a central location and kept out of children's reach.
- Medications are never dispensed without prior parental written permission.
- Expired medications will not be dispensed.
- Only emergency-type medication will be accepted and will be administered as per doctor's instructions.
- No teacher will be able to accept medications. All medication must be handed directly to the Director with the required forms (The emergency action plan must be filled out by the doctor along with a permission slip.)
- No medications are permitted to be stored in the classroom/backpacks.

## **HEARING AND VISION SCREENING**

DCFS requires each student to participate in a hearing and vision screening yearly. An additional fee of \$20 will be due the month of the testing.

## **RESTROOM USAGE**

- Bathrooms are located in each of the classrooms.



- Students are welcome and encouraged to use the restrooms at any time throughout the day.
- Pre-K aged children must have successfully completed the toilet training process.
- All students should have an extra change of clothing in the front pocket of their backpack in case of an accident.
- Pre-school age students may wear a pull-up to class. Teachers will work with students on potty training during class, and students will be encouraged to transition to underwear as soon as possible. There is an additional \$5 per month fee for students that are in pull-ups.
  - Students must provide their own pull-ups. Please keep extra pull-ups labeled with your child's name in your child's backpack along with extra clothing.
  - The school will provide wipes unless otherwise noted.

## **RELIGIOUS INSTRUCTION**

- No religious instruction is offered at Creative Beginnings Preschool.

## **FIELD TRIPS**

- All field trips will be planned in advance.
- Outings will be well supervised, and parents may be asked to take an active part in field trips.
- If a field trip is planned outside walking distance from the school, parents/guardians will be asked to drop off and pick up their child from the field trip location.

## **APPROPRIATE DRESS FOR YOUR CHILD**

- Children shall arrive to school in simple clothing that is free of complicated fastenings.
- Shoes must have closed toes and give children the ability to run without tripping or slipping. Children wearing wet snow boots must change into dry shoes before entering the classroom.
- All children are encouraged to participate in the daily activities. Some of these activities may be messy art and/or science projects. Please provide clothing that is easily washable. We do our best to keep children's clothing clean, but occasionally, paint will get on the clothing and children will get messy.
- There will be space in the classroom for personal items such as coats, jackets and preschool sized backpacks. All clothing items (including jackets, hats, sweatshirts and boots) must be labeled with the child's name.
- Girls are highly encouraged to wear shorts under their dresses.

## **PERSONAL INFORMATION POLICY**

- It is the policy of Creative Beginnings Early Education not to release to the public any information about any student that is enrolled without written consent from the parent or guardian. All records will be kept confidential.
- Authorized Department licensing representatives, Department of Child Protection Investigators, or Department representatives who have the department Director's written authorization shall have access to the preschool's records and reports. All persons with access to records shall respect their confidential nature.

## **USE OF PHOTOGRAPHS FOR PUBLICITY PURPOSES**

- Parents may sign the release form to give Creative Beginnings permission to use photos for the newspaper, preschool website and/or Facebook.
- Unless a signed consent form is on file, your child's photograph will not appear for publicity purposes at the direction of Creative Beginnings Early Education.

## **HIGH SCHOOL AND COLLEGE STUDENT RESEARCH POLICY**

- Creative Beginnings does allow high school and college-aged students to attend class to observe the children through the process of play. Observing students in the classroom is often a requirement for students in the field of Early Childhood Education.
- All information about the students will be kept confidential.

## **INCLEMENT WEATHER POLICY**

- Creative Beginnings follows the Kaneland Community School District 302 for inclement weather days.
- Inclement weather information will be shared through a Tadpoles text, an email and the Facebook page.
- Three days are built into the school calendar each year. After three days missed, the school will add make-up days to the end of the school year.

## **ABUSE PREVENTION POLICY**

- All teachers at Creative Beginnings are mandated reporters.
- Evidence of child abuse must be reported to authorities as required by the Abused and Neglected Child Reporting Act (Illinois Revised Statute 1991 Chapter 23, Pars. 2051-et.)
- Verbal and/or physical abuse of the children will not be tolerated.

## **SCHOOL HARASSMENT POLICY**

Acts of harassment or intimidation will not be tolerated. This includes but is not limited to harassment and/or intimidation based on sex, race, religion, or national orientation. Those who use such behavior(s) towards employees or students will be subject to disciplinary action.

## **STUDENT SAFETY**

- Teachers will abide by all DCFS policies and regulations.
- Teachers must wear gloves at all times when in contact with bodily fluids.
- Teachers and students will participate in monthly fire and tornado drills.
- Children will never be left alone and will always be within sight and sound.
- Correct ratios will be maintained in the classroom at all times.
  - Preschool ratio: 1:10
  - School age ratio is 1:20
- Staff is not to be held liable for an injury unless it is due to direct neglect or harm to the child.

## **GUIDANCE AND DISCIPLINE POLICY and PROCEDURES**

- All rules will be kept simple and easy for children to follow
- All rules will be consistent for every child in the program.
- If a situation occurs, the child will be redirected to an appropriate activity.
- If, after redirection, the situation occurs again, the student and teacher will have a one-on-one conversation about the child's actions and how we will work to improve them.
- If the situation continues, the parents will be informed and an individual meeting may be scheduled.

The staff is prohibited from using any of the following as a form of guidance/discipline:

- Hitting, shaking, pinching, spanking or any other forms of corporal punishment.
- Depriving the student of snack or toilet use.
- Mental or emotional cruelty.

## **BEHAVIOR SUPPORT PLAN**

- Behavior plan for ongoing situations will include the following:
  - Teachers will inform parents of behaviors observed at school.
  - Teachers will meet with parents to create an individual support behavior plan that will include behavior observations and areas that need to be addressed, items teachers are responsible to work on in class, items parents are responsible to work on at home.

## **TRANSITION PLAN**

- For the safety of the student, classmates and teachers, if it is determined that progress was not made in a timely fashion or our program cannot meet the individual needs of the child, Director will refer family to outside help with another program that better equipped to meets the child's needs and will then be transitioned out of Creative Beginnings.

## **TRANSPORTATION**

No transportation is offered from Creative Beginnings. All transportation to and from classes is the parent's responsibility.

## **CHEMICALS and SUPPLIES**

All chemicals and potentially dangerous products will be stored out of reach of the children or in a locked cabinet.

## **DROP-OFF PROCEDURES**

- Upon arrival, a parent or guardian must sign the child in and accompany him/her to the classroom.
- Personal items such as coats and backpacks will be stored in the child's cubby at the beginning of class.
- We discourage children from bringing toys to school (including inside their backpacks) unless otherwise specified by the teacher for a special occasion. All toys must be left in the car or with an adult.
- Children will not be permitted to enter the classroom until the designated start time. Students shall be prepared to start on time as the first activity will start promptly at the beginning of class.
- Parents need to release children to the teacher outside the classroom. Long drop-offs are hard on young students. Please be ready to say a quick goodbye when the teacher opens the door for the beginning of class.
- Please note-- for the safety of the children, the classroom door will only be open for the first 10 minutes of class or until all the students arrive. If a student is more that 10 minutes late, he/she must ring the doorbell located at the school entrance to enter as it will be locked after the beginning of class.

## **PICK UP PROCEDURES**

- Parents are asked to wait outside the classroom until the conclusion of class.
- Parents must sign children out on the clipboard located outside the classroom before the child will be released.
- Children will only be released to those parents or guardians authorized in writing.
- Individuals listed under the "Authorization For Pick Up" consent form must show a valid picture ID before the teacher will release the child.
- A temporary pick-up authorization may be used for "one time pick ups" The form must be filled out by the parent prior to the release of the child.

- Creative Beginnings assumes that both parents have a right to pick up your child, unless you give the school a court order stating otherwise.
- Authorized pick up person up must be at least 18 years old.

### LATE PICK UP

- Parents/guardians shall make every effort to pick up students promptly at the conclusion of class.  
Parents must notify their teacher by calling the school if they will be more than 5 minutes late.
- Parents will be responsible for paying a fee of \$10 if they are more than 10 minutes late and \$1 for every minute thereafter.
- After 15 minutes late, with no contact from the parents, the school will try to contact the family by phone. They will continue calling every 15 minutes until contact has been made. For the safety of the children, it is of the utmost importance to always have the most up-to-date contact information on file. Please remember to promptly update information when receiving a new phone number or if you have moved to a new address.
- The staff at school will care for the child for an hour. If parents and/or other emergency contacts (listed on the enrolment forms) are not reached after an hour's time, the school will call the appropriate authorities as per DCFS regulations. The staff is responsible for caring for the child until the parent(s) or guardian(s) arrive or until outside authorities can assume responsibility for the child.
- The staff shall not hold the child responsible for the situation, and discussion of this issue will be held only with the parent or guardian, and never with the child.

### FEES and TUITION

	Preschool 2 Day	Preschool 2 Day	Preschool 3 Day	Multi-Age 3 Day	Pre- Kindergarten 4 Day	Pre- Kindergarten 4 Day	Literacy Club 1 Day
Class Time	Wed/Fr 9:00-11:30	Wed/Fr 9:15-11:45	Mon/Tu/Th 9:00- 11:30	Mon/Tu/Th 9:15-11:45am	Mon/Tu/Wed/Th 12:15-2:45pm	Mon/Tu/Wed/Th 12:15-2:45pm	Friday 12:30-3:00pm
Ages	3	3	3	3-5	4-5	4-5	4-5
Regular	\$175	\$175	\$216	\$211	\$270	\$270	\$77
Sibling Discount	\$149	\$149	\$184	\$179	\$228	\$228	\$65

- A yearly enrollment fee of \$80 will be used to provide materials for your child throughout the school year.
- Your students spot in class will not be saved until the registration fee has been paid.
- Tuition is due on the 1<sup>st</sup> of the month and can be paid by the following:
  - Through our school's Tadpoles app.
  - A check to Creative Beginnings
- There is an additional 3% transaction fee that needs to be added on to all electronic payments (Tadpoles)
- A drop box for tuition paid by check is located in the lobby of the school
- There will be a late fee of \$10 if the tuition is not paid by the 7<sup>th</sup> of the month.
- Administration reserves the right to disenroll a student after 3 weeks of non-payment.
- A fee of \$25 will be charged for a bounced check.
- No refunds will be given for non-attendance, school closure, sick and/or vacation days.

- Creative Beginnings offers a 15% discount for siblings.

## **ENROLLMENT POLICY**

- Enrollment will be secured by submission of an approved registration packet and enrollment fee.
- All children must have a current physical (with results dated within the last 6 months) including lead screening and a TB test done by the Mantoux method. Forms must include immunizations as required by the state of Illinois and must be submitted **before** attending the first day of school. Physicals do expire and will need to be updated at the beginning of each school year.
- Pre-K aged children must have successfully completed the toilet training process. Exceptions may be made from director of the program for younger preschool age students.
- Enrollment shall be open to any child, provided the school can meet the needs of the child.
- First month's tuition shall be paid before the child's first day.
- Enrollment in the school shall be granted without discrimination in regard to sex, race, or religious belief.

## **UPDATING FORMS**

- It is important to update forms when:
  - Receiving a new phone number
  - Moving to a new address
- The medical form from a wellness check up must be updated each year.

## **WITHDRAWAL POLICY**

Children will be withdrawn from the program for the following reasons:

- Voluntary withdrawal by the parents. A 30 day notice must be provided to the school.
- Necessary birth certificate is not provided within 30 days of the child's first day.
- Non-payment of tuition.
- If it is in the best interest of the child and/or the other participants in the school due to behavior challenges. Every effort will be taken to keep children in the preschool program. Withdrawing a child will not occur until a meeting with the parents and staff is held to formulate a plan of action to help the child adjust and be successful. \*Refer to guidance and discipline policy to see more.
- Any child who, after attempts have been made to meet the child's individual needs, demonstrates inability to benefit from the type of care offered by the facility, or whose presence is detrimental to the group, shall be discharged from the facility.
- No refund will be issued for a student's withdrawal from parents request

Please contact The Director Kristy Williams if you have any questions regarding Creative Beginnings Policies.

(630) 365-9555

[elburncreativebeginnings@gmail.com](mailto:elburncreativebeginnings@gmail.com)

## FORM/RELEASE CHECKLIST

The following forms are required to be returned along with the enrollment fee to complete the registration process. Please be sure all information is written legibly in case of an emergency.

- Registration Application for Creative Beginnings
- Emergency Contact List
- Medical Release Form
- Family and Social History
- Authorization for Pick Up
- Guidance and Discipline Receipt
- Parent Handbook Receipt
- Late Pick Up Policy
- Trips, Excursions, and Public Park Facilities
- Emergency Medical Care and/or First Aid
- Integrated Pest Management Program
- Consent For Student Research
- Photo/Video Release Consent Form
- DCFS License Summary Receipt
- \$80 enrollment fee

The following is required before your child's first day:

- First month's tuition.
- DCFS Medical Form from your doctor's office. This form is required to be updated each school year and must be dated within 6 months of starting the program.
- DCFS requires each student to participate in a hearing and vision screening yearly. An additional fee of \$20 will be due the month of the testing.
- Current Immunization Records
- Certified Birth Certificate (Please bring in the original for us to copy)

2024

# PRESCHOOL REGISTRATION APPLICATION FOR CREATIVE BEGINNINGS

Child's legal name: \_\_\_\_\_

Child's written name to be used at school: \_\_\_\_\_

Birth Date: \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_

Mother's name: \_\_\_\_\_

Mother's cell phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Mother's Email address: \_\_\_\_\_

Mother's work: \_\_\_\_\_ Job Description: \_\_\_\_\_

Father's name: \_\_\_\_\_

Father's cell phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Father's Email address: \_\_\_\_\_

Father's work: \_\_\_\_\_ Job Description: \_\_\_\_\_

Mailing address: \_\_\_\_\_  
\_\_\_\_\_

Home phone number: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Choose the class in which your child will be enrolled:

	Preschool 2 Day	We are flexible on the 2 day program time	Preschool 2 Day	Preschool 3 Day	Multi-Age 3 Day	Pre-K 4 Day	We are flexible on the Pre-K program time	Pre-K 4 Day	Literacy Club
Class Time	Wed/Fr 9:00- 11:30am		Wed/Fr 9:15- 11:45am	Mon/Tu/Th 9:00- 11:30am	Mon/Tu/Th 9:15- 11:45am	Mon/Tu/Wed/Th 12:15- 2:45pm		Mon/Tu/Wed/Th 12:30- 3:00pm	Friday 12:30- 3:00pm
Ages	3		3	3	3-5	4-5		4-5	4-5
Regular	\$175		\$175	\$216	\$211	\$270		\$270	75
Desired Class									

A non-refundable, non-transferable enrollment fee of \$80 must be paid with the return of this application. Checks can be paid to the following:

Creative Beginnings

108 Valley Dr. Unit A Elburn, IL 60119

\_\_\_\_\_ (For Office Use Only) \_\_\_\_\_

Deposit received: \_\_\_\_\_ Check number: \_\_\_\_\_

Start date: \_\_\_\_\_ Withdrawal/graduation date: \_\_\_\_\_

Notes: \_\_\_\_\_

# EMERGENCY CONTACT LIST

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

Mother's Name: \_\_\_\_\_

Mother's Address: \_\_\_\_\_

Name of Mother's Work: \_\_\_\_\_

Mother's Cell Phone (\_\_\_\_)\_\_\_\_\_-\_\_\_\_ Mother's Work Number (\_\_\_\_)\_\_\_\_\_-\_\_\_\_\_

Father's Name: \_\_\_\_\_

Father's Address: \_\_\_\_\_

Name of Father's Work: \_\_\_\_\_

Father's Cell Phone (\_\_\_\_)\_\_\_\_\_-\_\_\_\_ Father's Work Number (\_\_\_\_)\_\_\_\_\_-\_\_\_\_\_

Preferred number to call first: \_\_\_\_\_

Preferred number to call second: \_\_\_\_\_

## Additional Emergency Contacts

(Please include at least 2 additional emergency contacts)

1) Name \_\_\_\_\_

Relationship To Child \_\_\_\_\_ Phone Number (\_\_\_\_)\_\_\_\_\_-\_\_\_\_\_

2) Name \_\_\_\_\_

Relationship To Child \_\_\_\_\_ Phone Number (\_\_\_\_)\_\_\_\_\_-\_\_\_\_\_

3) Name \_\_\_\_\_

Relationship To Child \_\_\_\_\_ Phone Number (\_\_\_\_)\_\_\_\_\_-\_\_\_\_\_

4) Name \_\_\_\_\_

Relationship To Child \_\_\_\_\_ Phone Number (\_\_\_\_)\_\_\_\_\_-\_\_\_\_\_



# CREATIVE BEGINNINGS MEDICAL RELEASE FORM

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

Birth Date: \_\_\_\_\_ Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Insurance Co.: \_\_\_\_\_ Policy # \_\_\_\_\_

Group #: \_\_\_\_\_

Pediatrician's Name \_\_\_\_\_

Address \_\_\_\_\_

Phone Number (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Preferred Hospital \_\_\_\_\_

Please list your child's allergies, reactions, severity and treatment (please be specific)

1) \_\_\_\_\_ Reaction/Severity: \_\_\_\_\_

Treatment: \_\_\_\_\_

2) \_\_\_\_\_ Reaction/Severity: \_\_\_\_\_

Treatment: \_\_\_\_\_

3) \_\_\_\_\_ Reaction/Severity: \_\_\_\_\_

Treatment: \_\_\_\_\_

Additional Medical Concerns: \_\_\_\_\_

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

To Whom It May Concern: The undersigned does hereby give permission for the above-named child to attend and participate in activities sponsored by the Creative Beginnings Preschool. I understand that in the event medical treatment is required for the above named child, every effort will be made to contact me. However, if I cannot be reached, I authorize an adult in whose care the minor has been entrusted to consent to any x-ray, examination, anesthetic, medical, surgical or dental diagnosis or treatment, and hospital care to be rendered to the minor under the general supervision and on the advice of any physician or dentist licensed under the provisions of the Medical Practice Act or the medical staff of a licensed hospital, whether such diagnosis or treatment is rendered at the office of said physician or at said hospital. The undersigned shall be liable and agrees to pay all costs and expenses incurred in connection with such medical and dental services rendered to the aforementioned child pursuant to this authorization.

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

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian Name Printed: \_\_\_\_\_

# FAMILY AND SOCIAL HISTORY

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

In order to help the teachers learn a little bit about your child, please take a moment to complete the Family and Social History form. Thank you.

Child's nickname: \_\_\_\_\_

Parent's preferred spoken name: Guardian (1) \_\_\_\_\_ Guardian (2) \_\_\_\_\_

Parents' marital status (circle): Married Partner Single Divorced Remarried Widowed

Who does your child live with? Mom Dad Both Grandparents Other \_\_\_\_\_

Is there a custodial/ legal arrangement that the staff needs to be aware of? Yes No

If yes, please provide legal documentation for our records.

Primary language spoken at home: \_\_\_\_\_ Secondary language: \_\_\_\_\_

Is your child independently toilet trained? \_\_\_\_\_

Child's favorite toy(s) and interest(s): \_\_\_\_\_

Has your child ever attended another preschool or play group? \_\_\_\_\_ Where? \_\_\_\_\_

What elementary school will your child attend for kindergarten? \_\_\_\_\_

Does your child have a special or restricted diet? \_\_\_\_\_

Please list siblings and their birthdate(s):

1) \_\_\_\_\_ Birthdate: \_\_\_\_\_

2) \_\_\_\_\_ Birthdate: \_\_\_\_\_

3) \_\_\_\_\_ Birthdate: \_\_\_\_\_

4) \_\_\_\_\_ Birthdate: \_\_\_\_\_

5) \_\_\_\_\_ Birthdate: \_\_\_\_\_

Are there any holidays in which you do not want your child to participate?

\_\_\_\_\_

Do you have any concerns about your child's speech, language, hearing, vision or development?  
Please briefly describe your concern.

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

Any other questions, concerns, or comments?

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

# AUTHORIZATION FOR PICK UP

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

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

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

I understand that only those individuals listed on this page are authorized to pick up my child. Under no circumstances will my child be released by Creative Beginnings to any other individuals. Parents/Guardians must be listed.

Name	Address	Relationship	Cell Phone

## DAYCARE TRANSPORTATION SCHEDULE

- \_\_\_\_\_ We don't have a daycare provider and I will be picking up and dropping off on most days.
- \_\_\_\_\_ Our daycare varies in schedule.
- \_\_\_\_\_ Our daycare provider commonly transports our child. Here is their schedule.

	Person Dropping Off	Person Picking Up
Monday		
Tuesday		
Wednesday		
Thursday		
Friday		

Signature of Parent/Guardian: \_\_\_\_\_ Date \_\_\_\_\_

# **GUIDANCE AND DISCIPLINE POLICY and PROCEDURES**

- All rules will be kept simple and easy for children to follow
- All rules will be consistent for every child in the program.
- If a situation occurs, the child will be redirected to an appropriate activity.
- If, after redirection, the situation occurs again, the student and teacher will have a one-on-one conversation about the child's actions and how we will work to improve them.
- If the situation continues, the parents will be informed and an individual meeting may be scheduled.

The staff is prohibited from using any of the following as a form of guidance/discipline:

- Hitting, shaking, pinching, spanking or any other forms of corporal punishment.
- Depriving the student of snack or toilet use.
- Mental or emotional cruelty.

## **BEHAVIOR SUPPORT PLAN**

- Behavior plan for ongoing situations will include the following:
  - Teachers will inform parents of behaviors observed at school.
  - Teachers will meet with parents to create an individual support behavior plan

that will include behavior observations and areas that need to be addressed, items teachers are responsible to work on in class, items parents are responsible to work on at home.

## **TRANSITION PLAN**

- For the safety of the student, classmates and teachers, if it is determined that progress was not made in a timely fashion or our program cannot meet the individual needs of the child, Director will refer family to outside help with another program that better equipped to meets the child's needs and will then be transitioned out of Creative Beginnings.

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## **GUIDANCE and DISCIPLINE, BEHAVIOR PLAN AND TRANSITION PLAN RECEIPT**

I have read and understand the Guidance and Discipline, Behavior and Transition policies and will abide by the policies and procedures written within.

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

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

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

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

# PARENT HANDBOOK RECEIPT

I have read and understand the Parent Handbook and will abide by the policies and procedures written within.

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

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

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

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

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## LATE PICK UP POLICY

I have read and understand the late pick up policy and will abide by the policies and procedures written within.

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

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

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

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

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## TRIPS, EXCURSIONS, & PUBLIC PARK FACILITIES

I authorize Creative Beginnings Early Education staff to take my child on walking trips, special excursions, and to the nearby park facilities. I/We hereby waive and release Creative Beginnings Early Education from all rights and claims for damages or injuries in connection with these trips, special excursions, walks, or trips to the public parks. The staff has my permission to secure medical attention for my child should it be necessary.

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

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

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

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

# EMERGENCY MEDICAL CARE and/or FIRST AID

This authorizes Creative Beginnings Early Education to secure emergency medical care for my child when I/we cannot be reached immediately at the time of the emergency. I/We will be responsible for the emergency medical charges upon the receipt of the billing statement.

I also authorize Creative Beginnings staff to administer first aid treatment for my child when necessary. I understand that I will be notified after my child receives treatment.

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

Parent/Guardian's Name: \_\_\_\_\_ Relationship To Child \_\_\_\_\_

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

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

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# CONSENT FOR STUDENT RESEARCH

Creative Beginnings does allow high school and college-aged students to attend class to observe the children through the process of play. Observing students in the classroom is often a requirement for students in the field of Early Childhood Education.

I give my consent for my child to be observed by high school and/or college students observing for their Early Education classes. I understand that all information about my child will be kept confidential.

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

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

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

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

# INTEGRATED PEST MANAGEMENT PROGRAM

Creative Beginnings follows a program that combines preventative techniques, non-chemical pest control methods and, if necessary, the appropriate use of pesticide with a preference for products least harmful to human health and the environment. I consent to inclusion in the Integrated Pest Management Registry, which will notify me prior to application.

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

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

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

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

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## PHOTO/VIDEO RELEASE CONSENT FORM

I am aware that my child's picture will be taken to use for in-house projects, portfolios and Tadpoles communication. I am also aware that for the safety of our students and teachers, Creative Beginnings uses a in house surveillance system.

\_\_\_\_\_ (please initial)

I release my child's photo for social media for whole class photos (Facebook, Twitter, Instagram)

\_\_\_\_\_ (please initial)

I would like to release my child's photo for small group/individual photos on social media (Facebook, Twitter, Instagram)

Yes / No \_\_\_\_\_ (please initial)

I would like to release my child's picture for use on the preschool's website:  
Elburncreativebeginnings.com

Yes / No \_\_\_\_\_ (please initial)

I would like to release my child's photo to be used in the newspaper for Creative Beginnings

Yes / No \_\_\_\_\_ (please initial)

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

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

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

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

# TADPOLES UPDATES

Creative Beginnings uses Tadpoles to update parents/guardians through email.

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

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

Please list at least one (or more) parent(s)/guardian(s) to receive email updates. Parents can also choose to add additional names, such as day care providers or grandparents. Families are also welcome to use the Tadpoles Parent app available on iOS and Android.

\_\_\_ Mother Name: \_\_\_\_\_ Phone Number: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Email \_\_\_\_\_

\_\_\_ Father Name: \_\_\_\_\_ Phone Number: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Email \_\_\_\_\_

\_\_\_ Other Name: \_\_\_\_\_ Phone Number: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Email \_\_\_\_\_

Relationship to child: \_\_\_\_\_

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## RECEIPT OF DCFS LICENSING STANDARD SUMMARY

CFS 581  
Rev. 12/2000

State of Illinois  
Illinois Department of Children and Family Services

### VERIFICATION OF RECEIPT

I/WE, \_\_\_\_\_  
Please Print Name(s)

parent(s) of \_\_\_\_\_, hereby certify that I/we have  
Name(s) of Child(ren)

received a copy of a summary of licensing standards printed by the Illinois Department of Children and Family Services.

\_\_\_\_\_  
Signature of Parent

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Parent

\_\_\_\_\_  
Date

