Smart Start Academy's Student Application

Enrollment Information

First Day of Enrollment _____ Today's Date_____

I understand that I will be responsible for the full monthly tuition regardless of desired start date

Infant 0-18 Months: Full Day _____ **Extended Only** Days/Week _____

Toddler 19 – 35 Month: Half _____ Full 2:30pm _____ Ext_____ Days/Week _____

Pre-K 36 months & Up: Half _____ Full 2:30pm_____ Ext_____ Days/Week _____

Social Enrichment: 2:30-7pm Days/Week _____

After School Pick Up for SE Program
ONLY:_____

Print School Address & Phone Number *(Subject to Director/Manager's approval)*

Referral Rewards Program
Referred By: _____ **Current SSA Student's Name:** _____

Student Information

Child's Name _____

Home Address_____

City _____ State _____ Zip _____

Home Phone _____ Male _____ Female _____

Birthday _____ Present Age _____

Parent/Guardian 1 _____

Home Address _____

City _____ State _____ Zip _____

Home Phone _____ Cell Phone _____

Email _____

Employer _____

Work Phone_____

Work Address _____

Hours of Employment _____

Parent/Guardian 1Social Media Account (Instagram) _____

Follow us for the latest updates on school closures, movies and smoothies, and much more!

Parent/Guardian 2 _____

Home Address _____

City _____ State _____ Zip _____

Home Phone _____Cell Phone _____

Email _____

Employer _____

Work Phone _____

Work Address _____

Hours of Employment _____

Parent/Guardian 2 Social Media Account (Instagram) _____

Follow us for the latest updates on school closures, movies and smoothies, and much more!

Main email for tuition payments and notifications:

_____

This email will be used in managing the tuition app.

Medical Information

Pediatrician's Name _____ Phone _____

Address _____

Dentist's Name _____ Phone _____

Address _____

My child has the following allergies:

_____

_____

My child has the following special needs *(ex. vegetarian, sensitive skin, unfamiliar with stairs, etc):*

_____

_____

Signature:

Parent/Guardian 1 _____

Parent/Guardian 2 _____

Initial Enrollment Submission Instructions

1. Parents are to complete and submit a Student Application Form with an **annual non-refundable** application fee of $150.00 (Cash or Certified Check).
2. Parents will be informed of immediate placement according to their desired start date and program or be placed on a "Waitlist" if desired space is unavailable.

3. Parents must submit a **non-refundable**/**nontransferable** $1,000.00 security placement fee to secure child's space in the Classroom and/or Waitlist. SSA will apply the security placement fee to the last academic month of the school year (June), ***given SSA is notified by May 1st as to withdrawal intentions***. If notice of withdrawal is not received by May 1st, SSA will roll over security placement fee into the following Academic Year (Sept-June) _____ ***(initials)***
4. If a family is unable to complete the full academic year, SSA will apply the security placement fee to the last month of child's attendance, given SSA is notified in writing **2 Full Months** prior to withdrawal. The 1st of each month is considered a full month. *(July and August months are not considered part of the academic school year and cannot be used towards the "2 Full Months of notice").If proper notification is not received, Security Placement fee is forfeited.* _____***(initials)***
5. If a family is unable to start within 30 days of their original start date, for any reasons listed, the $1,000.00 Security Placement fee is forfeited. _____ ***(initials)***

6. Any family enrolled in a program under $1000.00 will receive a refund check of the remaining balance within 30 days after the student's official last month of attendance (*aka Withdrawal Date*). _____ ***(initials)***

7. **SSA Referral Rewards:** Families who refer future students will receive $50 off their child's tuition every month/per referral. Earned reward is applied upon referred families' full tuition payment submission and will end once referred families have their security placement applied and/or fail to make tuition payment for any reason. _____***(initials)***

By my signature, I attest to the following:

- That the above information is correct.
- That in the event of a medical emergency I authorize Smart Start Academy and their representatives to seek emergency medical care for my child as deemed necessary by the emergency. _____ ***(initials)***
- That I read and understand the policies set forth in the Parent Handbook. (please refer to our website **smart-startacademy.com)** _____***(initials)***
- I understand that if my family is unable to commence enrollment within 30 days of our desired start date, for any reasons listed, I forfeit my security placement fee and application fee and will not seek legal remedy to retrieve fees. _____***(initials)***
- That I have received a copy of our annual School Closings Calendar and understand that I will be responsible for the full monthly tuition regardless of desired start date, holidays, absences due to illness/personal preference, unexpected closures due to, but not limited to inclement weather, pandemic, natural/unnatural disasters and/or any occurrence similar in nature causing the center to close and not provide child care services for a limited or extended period of time. _____***(initials)***

- If I decide to exercise early withdrawal without proper written notification, I agree to forfeit my security placement fee, all prepaid tuition (academic year and summer sessions) and will not seek legal remedy to retrieve fees._____ ***(initials)***

Print Name _____

Parent Signature _____ Date: _____

If a Non Custodial parent is NOT ALLOWED or NOT included among those persons authorized to pick up the child, please explain and attach a copy of the Court Order.

SSA reserves the right to move/postpone/change hours to families agreed upon start date in the event it is unable to provide child care services due to government restrictions, pandemic, DCF and/or CDC guidelines, unnatural/natural disasters and any other reasons that would NOT allow SSA to provide childcare safely.

Smart Start Academy

Authorized Pickup Form

Child

Headshot

2 x 2

Child's Name_____

Parent IDs

Name: **Telephone #:**

Address:

Parent IDs

Name: **Telephone #:**

Address:

Name: **Telephone #:**

Address:

Name: **Telephone #:**

Address:

502 Palisade Ave, Jersey City NJ 07307
Telephone (201) 461-1515 * Website: Smart-StartAcademy.com

Safety Shoes Acknowledgment Form

I understand that for the safety of my child, _____, he/she is not allowed to wear sandals or open shoes to school. A child must wear sneakers or rubber sole shoes that fit at all times.

Date: _____ **Signed:** _____

Allergy Disclosure Form

If my child has any known allergy to any food or medicine, I give permission to S.S.A. to disclose such information and place warning signs in visible areas of the school in order to prevent anyone from feeding my child that particular food or medicine.

Date: _____ **Signed:** _____

Smart Start Academy

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Picture/Video Permission Form

I give permission to Smart Start Academy to take pictures and/or videos of my child, _____, while in school or while engaging in school activities. I am aware that these photos/videos may be used for S.S.A.'s website(s), Instagram, Facebook Page and blog.

Date: _____ **Signed: _____**

Walking Field Trips Permission Form

I give permission to my child, _____, to attend walking field trips within the community to local parks and local business that will enhance the student's curriculum as well as daily nature walks that will take him/her out of the school building. A minimum of two adults will supervise the children during all outdoor activities.

Please note that when participating in any type of bus trip or field trip that is not within the community SSA will provide parents an additional consent form prior to the scheduled event.

Date: _____ **Signed: _____**

Smart Sitter Policy

Smart Sitters – Employees of Smart Start Academy who provide outside home care for students enrolled at one of our child care centers upon parent's requests.

Smart Sitter Service: As a courtesy to our families, Smart Start Academy provides a convenient home childcare program, called Smart Sitter Services. Upon a family's request for additional child care after operating hours and/or on weekends and holidays, our administrative staff will attempt to recruit a fully screened staff member available to provide the additional care.

Parents must notify Smart Start Academy directly in order to make the arrangements for home child care. Smart Start Academy will provide a Smart Sitter Slip to be completed and signed by parent. Once parent completes the Smart Sitter Slip; they must submit same along with payment for the service. A signed copy is given to the Smart Sitter and a signed copy is filed at the particular center.

Employee Code of Conduct: Employees of Smart Start Academy cannot engage in activity that may create a conflict between our organization and our clients/customers. Therefore, if a family would like to participate in our Smart Sitter Service, said family must notify Smart Start Academy directly and we will attempt to make the arrangements forthwith.

Failure to notify Smart Start Academy before engaging in Smart Sitter Services with any of our employees may result in the termination of said employee.

By signing my name below, I certify that I have read the above information. Any questions concerning these policies have been discussed. My signature also certifies my understanding of and agreement with the above policies.

Print Name: _____ Date: _____

Signature: _____

Print Name: _____ Date: _____

Signature: _____

Liability Disclaimer & Notices: PLEASE READ CAREFULLY

Release: In consideration of the benefits of participation in the activities conducted and offered at Smart Start Academy, I, _____, individually and as parent and/or guardian of _____, the minor child identified above hereby acknowledge the following notices and grant to The Learning Lounge, LLC, The Learning Lounge II, LLC, SSA Group, LLC, & CKJ Group, LLC, DBA Smart Start Academy the following release from liability:
I acknowledge and fully understand that my child will be engaging in physical activities that may involve some risk of injury and hereby release, hold harmless and discharge the above referenced preschool, teachers, directors, owners and affiliates from any and all liability, claims, demands, actions and causes of action whatsoever, including reasonable attorney fees, arising out of or related to any loss, damage or injury (whether direct, indirect, consequential or otherwise), including death, that my/our minor child and/or I/we might sustain or that any of my/our minor child's and/or my/our property might sustain while participating in all Smart Start Academy Programs to include but not limited to, Child Care Services, Pick up/Drop off Services and/or Smart Sitter Services offered by Smart Start Academy.

Assumption of Risk: Knowing, understanding, and fully appreciating all possible risks to include but not limited to, furniture, building hazards, steps, cracked sidewalks, potholes, dangerous weather conditions, and vehicle accidents, I/we hereby expressly, voluntarily and willingly assume all risks and dangers associated with my/our minor child's and/or my/our participation in our programs to include daily attendance, participation in all activities, walking and/or being transported by vehicle from one location to the designated location and/or vice versa. I/we understand and acknowledge that these Activities could result in injury and I/we agree that participation in all Transported (walking or vehicle) Activities shall be at my/our minor child's and/or my/our sole risk.

I acknowledge and have been advised that it is my responsibility to consult with me or my child's physician with respect to any past or present injury, illness, health problems or any other condition or medication that may affect me or my child's participation. I assume the foregoing risks and accept full personal responsibility for any personal injuries sustained by my child which might incur as a result of participating in this program and discharge and hold harmless Smart Start Academy, their owners, directors, members, employees and agents from any claim, cause of action or liability for damages arising from any personal injury to my child or other persons or property caused by myself or my child's participation in all Smart Start Academy's offered Programs and/or Smart Sitter Services. I Parent/Guardian_____ hereby waive any and all rights to hold Smart Start Academy personally, individually, jointly or severally liable for any and all claims against Smart Start Academy, its officers, agents, employees, and volunteers, for injury, accident, illness, or death occurring during or by reason of this program participation.

Insurance for Drop off/Pick up services: Smart Start Academy will obtain adequate auto insurance on the commercial vehicle transporting all participates. I/We agree, in the event my child is involved in an auto accident while participating in this pick up program, any and all claims will be settled within the auto policy limit. I/We assume the foregoing risks and accept full personal responsibility for any personal injuries sustained by my child which might incur as a result of participating in this program and will assume any additional medical expenses, property damage and all associated expenses that are not covered by the auto insurance policy. I/We discharge and hold harmless Smart Start Academy, their owners, directors, members, employees and agents from any claim, cause of action or liability for damages arising from any personal injury to my child or other persons or property caused by myself or my child's participation in the Smart Start Academy's Programs. Smart Start Academy or any of its entities may not be pursued for any additional resources or monies at any time.

Medical Authorization:
In the event of an accident, injury and/or medical emergency, Program Supervisors are hereby authorized to consent to and obtain whatever emergency medical treatment, surgery or dental care is considered necessary from and in the best judgment of the attending physician, medical care facility, hospital, paramedic unit or other health care provider deemed appropriate by Supervisors in the circumstances. In the event it is impossible to receive instructions for Student's care, full authorization is given to any licensed physician and/or surgeon for the provisions of medical treatment, including the administration of drugs or medication, and the performance of surgical treatment for the relief of pain and/or the preservation of life and/or health and well being. Student and Parent/Guardian understand that this authorization is given in advance of any specific diagnosis or treatment being required and that such authorization is given to provide Supervisors and Smart Start Academy with the power to secure reasonable medical care under emergency circumstances. Medical costs incurred shall be the responsibility of Student and Parent/Guardian.

Student and Parent/Guardian agree to pay for such medical care whether or not the costs are insured by Student or Parent/Guardian's health insurance. Student and Parent/Guardian understand that an attempt will be made to contact Parent/Guardian by telephone if possible, before such care is administered.

Acknowledgement of Understanding: I have read this Consent, Waiver, and Release Agreement and understand the terms used in it and their legal significance. This Consent, Waiver, and Release Agreement is freely and voluntarily given with the understanding that right to legal recourse against the Smart Start Academy is knowingly given up in return for allowing my/our minor child's and/or my/our participation in Preschool Activities. I/we agree that this Consent, Waiver, and Release Agreement shall remain in effect and apply each time my/our minor child and/or I/we participate in any Preschool Activities. By signature below, I/we acknowledge and accept all terms and conditions of this Consent, Waiver, and Release Agreement. If I/we am/are resigning this Consent, Waiver, and Release Agreement on behalf of a minor, I/we certify that all representations are true and that I/we am/are the minor's legal guardian(s)or custodial parent(s)with full authority to bind the minor and myself/ourselves to the terms and conditions of this Consent, Waiver, and Release Agreement.

Student's Name _____ Date of Birth: ____/____/_____

Print Name: _____ Date: _____

Signature: _____

Print Name: _____ Date: _____

Signature: _____

Student's Insurance Information

(Please attach a copy of your insurance card to this form. Children must have medical insurance In order to participate in activities offered by Smart Start Academy)

Parent Name _____
Student Name _____

Insurance Company: _____
Group I.D. Number: _____
Policy Number: _____
Child is covered until: _____ /_____ /_____
Policy Holder's Name: _____
Parent/Guardian Signature _____Date_____

Director Signature_____Date_____

Make Copy of Current Insurance Card Below:

POLICY ON THE MANAGEMENT OF COMMUNICABLE DISEASES

If a child exhibits any of the following symptoms, the child should not attend the center. If such symptoms occur at the center, the child will be removed from the group, and parents will be called to take the child home.

Severe pain or discomfort
Acute diarrhea
Episodes of acute vomiting
Elevated oral temperature of 101.5 degrees Fahrenheit
Lethargy
Severe coughing
Yellow eyes or jaundice skin
Red eyes with discharge
Infected, untreated skin patches
Difficult or rapid breathing
Skin rashes in conjunction with fever or behavior changes
Skin lesions that are weeping or bleeding
Mouth sores with drooling
Stiff neck

Once the child is symptom-free, or has a health care provider's note stating that the child no longer poses a serious health risk to himself or others, the child may return to the center unless contraindicated by local health department or Department of Health.

EXCLUDABLE COMMUNICABLE DISEASES

A child or staff member who contracts an excludable communicable disease may not return to the center without a health care provider's note stating that the child presents no risk to himself or others. These diseases include respiratory, gastrointestinal, and contact illnesses such as Impetigo, Lice, Scabies and Shingles.

Note: If a child has chicken pox, a health care provider's note is not required for readmitting the child to the center. A note from the parent is required stating either that at least six days has elapsed since the onset of the rash, or that all sores have dried and crusted.

If child is exposed to any excludable disease at the center, parents will be notified in writing.

COMMUNICABLE DISEASE REPORTING GUIDELINES

Some excludable communicable diseases must be reported to the health department by the center. The Department of Health's Reporting Requirement for Communicable Diseases and Work-Related Conditions Quick Reference Guide, a complete list of reportable excludable communicable diseases, can be found at gttp://www.nj.gove/health/cd/documents/reportable disease_magnet.pdf.

Parent Signature: _____ Date: _____

502 Palisade Ave, Jersey City NJ 07307
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EXPULSION POLICY

NAME OF CENTER: Smart Start Academy Preschool

NAME OF CHILD: _____

SIGNATURE OF PARENT: _____

Unfortunately, there are sometimes reasons we have to expel a child from our program, either on a short term or permanent basis. We want you to know we will do everything possible to work with the family of the child(ren) in order to prevent this policy from being enforced. The following are reasons we may have to expel or suspend a child from this center.

IMMEDIATE CAUSES FOR EXPULSION

The child is at risk of causing serious injury to other children or himself/herself.
Parent threatens physical or intimidating actions toward staff members.
Parent exhibits verbal abuse to staff in front of enrolled children.

PARENTAL ACTIONS FOR CHILD'S EXPULSION

Failure to pay/habitual lateness in payments
Failure to complete required forms including the child's immunization records
Habitual tardiness when picking up your child
Verbal abuse to staff
Other

CHILD'S ACTION FOR EXPULSION

Failure of child to adjust after a reasonable amount of time
Uncontrollable tantrums/angry outbursts
Ongoing physical or verbal abuse to staff or other children
Excessive biting
Other

Expulsion Policy Cont. (2)

SCHEDULE OF EXPULSION

If after the remedial actions above have not worked, the child's parent/guardian will be advised verbally and in writing about the child's or parent's behavior warranting an expulsion. An expulsion action is meant to be a period of time so that the parent/guardian may work on the child's behavior or to come to an agreement with the center.

The parent/guardian will be informed regarding the length of the expulsion period. The parent/guardian will be informed about the expected behavioral changes required in order for child or parent to return to the center.

The parent/guardian will be given a specific expulsion date that allows the parent sufficient time to seek alternate child care. Failure of the child/parent to satisfy the terms of the plan may result in permanent expulsion from the center.

A CHILD WILL NOT BE EXPELLED

If a child's parent(s):

- Made a complaint to the Office of Licensing regarding a center's alleged violations of the licensing requirements.
- Reported abuse or neglect occurring at the center.
- Questioned the center regarding policies and procedures.
- Without giving the parent sufficient time to make other child care arrangements.

PROACTIVE ACTIONS THAT CAN BE TAKEN IN ORDER TO PREVENT EXPULSION

Staff will try to redirect child from negative behavior.

Staff will reassess classroom environment, appropriate of activities, supervision.

Staff will always use positive methods and language while disciplining children.

Staff will praise appropriate behaviors.

Staff will consistently apply consequences for rules.

Child will be given verbal warnings.

Child will be given time to regain control. Child's disruptive behavior will be documented and maintained in confidentiality.

Parent/guardian will be notified verbally.

Expulsion Policy Cont. (3)

Parent/guardian will be given written copies of the disruptive behaviors that might lead to expulsion.

The director, classroom staff and parent/guardian will have a conference to discuss how to promote positive behaviors.

The parent will be given literature or other resources regarding methods of improving behavior.

Recommendation of evaluation by professional consultation on premises.

Recommendation of evaluation by local school district child study team.

Failure to take the appropriate actions in order to prevent expulsion will result in the loss of your family's prepaid tuition and security deposit.

Parent Signature:_____ Dated:

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GUIDELINES FOR POSITIVE DISCIPLINE

Positive discipline is a process of teaching children how to behave appropriately. Positive discipline respects the rights of the individual child, the group and the adult. Methods of positive discipline shall be consistent with the age and developmental needs of the child, and lead to the ability to develop and maintain self-control.

Positive discipline is different from punishment. Punishment tells children what they should not do; positive discipline tells children what they should do. Punishment teaches fear; positive discipline teaches self-esteem.

You can use positive discipline by planning ahead:

Anticipate and eliminate potential problems.
Have a few consistent, clear rules that are explained to children and understood by adults.
Plan for ample elements of fun and humor.
Include some group decision-making.
Provide time and space for each child to be alone.
Make it possible for each child to feel he/she has had some positive impact on the group.
Provide the structure and support children need to resolve their differences.
Share ownership and responsibility with the children. Talk about our room, our toys.

You can use positive discipline by intervening when necessary:
Re-direct to a new activity to change the focus of a child's behavior.
Provide individualized attention to help the child deal with a particular situation.
Use time-out by removing a child for a few minutes from the area or activity so that he/she may gain self control. (One minute for each year of the child's age is a good rule of thumb.)
Divert the child and remove from the area of conflict.
Provide alternative and acceptable ways to release feelings.
Point out natural or logical consequences of children's behavior.
Offer a choice only if there are two acceptable options.
Criticize the behavior, not the child. Don't say "Bad boy". Instead you may say "That is not allowed here."

Guidelines Positive Disc. Cont. (2)

You can use positive discipline by showing love and encouragement:

- Catch the child being good. Respond to and reinforce positive behavior; acknowledge or praise to let the child know you approve of what she/he is doing.
- Provide positive reinforcement through rewards for good behavior.
- Use encouragement rather than competition, comparison or criticism.
- Overlook small annoyance, and deliberately ignore provocations.
- Give hugs and caring to every child every day.
- Appreciate the child's point of view.
- Be loving.

Positive discipline is NOT:

- Disciplining a child for failing to eat or sleep or for soiling themselves.
- Hitting, shaking or any other form of corporal punishment
- Using abusive language, ridicule, harsh, humiliating or frightening treatment or any other form of emotional punishment of children
- Engaging in or inflicting any form of child abuse and/or neglect
- Withholding food, emotional responses, stimulation, or opportunities for rest or sleep
- Requiring a child to remain silent or inactive for an inappropriately long period of time

Positive discipline takes time, patience, repetition and the willingness to change the way you deal with children. But it's worth it because it works.

Parent Signature:_____ Dated:

Smart Start Academy School & Summer Calendar 2022-2023			
January 17, 2022	MLK Day (School Closed)	**November 24-25, 2022**	Thanksgiving Day Recess
February 21, 2022	President's Day (School Closed)	**December 23, 2022**	Christmas Break (School Closed)
March 24-25, 2022	Professional Development (School Closed)	**December 26-30th**	Back Up Care Only Advanced Sign Up Required/Additional Charge Applies
April 15, 2022	Good Friday (School Closed)	**January 2, 2023**	New Year's Observed (School Closed)
May 27 & 30, 2022	Prof Devel/Memorial Day Recess	**January 16, 2023**	MLK Day (School Closed)
June 28, 2022	Graduation Day@ 2pm 12:30 Dismissal for all undergrads	**February 20, 2023**	President's Day (School Closed)
June 29-July 1, 2022	Back Up Care Only Advanced Sign Up Required/Additional Charge Applies	**March 23-24, 2023**	Professional Development (School Closed)
July 4, 2022	Independence Day (School Closed)	**April 4, 2023**	Good Friday (School Closed)
August 29-Sept 1st 2022	Back Up Care Only Advanced Sign Up Required/Additional Charge Applies	**May 26 & 29, 2023**	Memorial Day Recess (School Closed)
September 2, 2022	School Year Prep (School Closed)	**June 27, 2023**	Graduation Day @ 2pm All Undergrads 12:30 pm Dismissal
September 5, 2022	Labor Day (School Closed)	**June 28-June 30, 2023**	Back Up Care Only Advanced Sign Up Required/Additional Charge Applies
September 6, 2022	1st Day of 2022-2023 School Year	**July 3 & 4, 2023**	Independence Day Recess (School Closed)
October 10, , 2022	Columbus Day (School Closed)	**August 28-31, 2023**	Back Up Care Only Advanced Sign Up Required/Additional Charge Applies
November 11, 2022	Veteran's Day/Prof Devel (School Closed)	**September 1-4, 2023**	School Year Prep (School Closed)
November 23, 2022	Half Day 12:30pm Dismissal	**September 5, 2023**	First Day of 2023-2024

Please note: Our schools are closed in between our academic school year and commencement of our summer camp. We are also closed for ***1 week*** at the end of our summer camp until the commencement of the academic school year. **Smart Sitter Services** are available upon **advance** request. Speak with your center Director to reserve in home childcare services provided by one of our qualified staff members. *(Additional fees apply)*

Families are responsible for the full monthly tuition regardless of desired start date, holidays, absences due to illness/personal preference, unexpected closures or change in hours/extra amenities provided by SSA due to, but not limited to inclement weather, pandemic, natural/unnatural disasters and/or any occurrence similar in nature causing the center to close and not provide child care services for a limited or extended period of time . *Tuition dates are subject to change S.S.A. reserves the right to make changes to the academic school and summer camp calendar in the event of an unexpected occurrence, including but not limited to inclement weather.*

The information above has been explained to me by the center Director. I, _____, am fully aware and agree to the above.

Parent Signature: _____ Date:

Attention Families

I would like to thank you for allowing us to become part of your family at this time. Over the past 6 years Smart Start Academy has become the leading childcare provider in your neighborhood. We would like to continue to offer your family exceptional childcare and early childhood education for the years to come. As a courtesy we would like to send a reminder on the following important company policies.

- **UNIFORMS:** are to be worn at all times prior to drop off and as always for your convenience we do have additional uniforms for sale at our schools.

  School year (September-June) we ask that ONLY the polo short/long sleeve be worn.

  Summer Camp T-shirts are not allowed

  Summer Camp (July-August) we ask that only the lightweight t-shirts be worn at all times.

- **SCHOOL BAGS**: Are an essential part of S.S.A in making sure all your child's belongings are kept together and return daily to the correct child. Also these bags must be used daily; even if they are empty they must be brought to school daily. These are the only bags that need to be used between the staff and the parents. (Book Bags and shopping bags are not allowed at all!)
- **PERSONAL ITEMS & HOME TOYS:** At SSA, we provide our older students (13-60 months) their own sip cup, plate, utensils and cot sheet. We ask that all personal cups, utensils and toys NOT be brought to school.
- **STROLLERS**: At this time we are limited in space with the amount of strollers we can accommodate in any of our four facilities. We ask parents to be courteous and allow the stroller area to be primarily for infants and toddlers.

Ages 0-12months can continue to bring in their travel sized stroller, however restrictions do apply on certain models such as *Uppa Baby Vista, Nuna, City Selects and strollers with a Bassinets or similar style.*

Ages 12months-24 months are required to bring in a standard simple umbrella stroller. (*example: Maclaren Mark 2 Stroller or Baby Cargo 200 series*)

Ages 24-months and up at this time due to space constraints we ask that only a true simple compact travel umbrella stroller be brought to school if necessary. (See example on left)

Please note that SSA is not responsible for any personal belongings that are left inside of your stroller

Initial:_____

- **MORNING DROP OFF TIMES**- To keep the integrity and the quality of the program at S.S.A we remind parents that school uniformed students must be in school no later than 9am.(*school bell)*

  Non school uniform students – infants must be in school no later than 10:00am.

- Please as always be courteous to the staff that has planned a fun-filled educational day!

_____ _____

Signature Date

Technology Policy

Smart Start Academy uses the following social media/networking and/or other websites:

✔Smart-StartAcademy.com ✔ Facebook ✔Instagram ✔Twitter
✔DailyConnect/SSAontheGO

Guidelines for conduct on Smart Start Academy social networking and/or other websites:

_____ *(Initial)* *Posting of photographs or videos of children, other than your own, is prohibited* on your personal social media accounts. This includes but is not limited to photographs or videos of children obtained through hand held devices, computers, video monitoring systems, child care monitoring apps and any other electronic device or transmission

_____ *(Initial)* Posting of private or sensitive company, staff or prior staff, and/or enrolled or previously enrolled children/families information is prohibited.

_____ *(Initial)* Maintain professional boundaries in the use of electronic media. Social Networking/Media parent/staff relationships are limited to center sites and approved devices only.

_____ *(Initial)* Vulgar or abusive language, disparaging remarks and/or references of a disparaging manner, personal attacks of any kind or offensive terms targeting individuals or groups is prohibited.

Parent action permitted when posting photos of their children ONLY on their social media.

✔Tagging ✔ Share ✔Post

Parent action permitted when on any SSA social media *(please see above regarding language usage)*

✔ Comment

_____
Sign and date

Technology policy continued…

Methods used to communicate with staff and parents:

Email	Permitted	Prohibited	**Designated Staff: Administration ONLY**
Text Messaging	Permitted	Prohibited	**Designated Staff: Smart Sitters ONLY**
DailyConnect/ SSAontheGO	**Permitted**	Prohibited	Designated Staff:
Website	Permitted	**Prohibited**	Designated Staff:
Instagram	Permitted	**Prohibited**	Designated Staff:
Facebook	Permitted	**Prohibited**	Designated Staff:
Twitter	Permitted	**Prohibited**	Designated Staff:

(Initial here)

Devices used by centers staff to communicate with parents:

Center Phone	Permitted	Prohibited	**Designated Staff: Administration ONLY**
Center Tablet	**Permitted**	Prohibited	Designated Staff:
Center Computer	Permitted	Prohibited	**Designated Staff: Administration ONLY**
Personal Cell Phone	Permitted	**Prohibited**	Designated Staff:
Personal Tablet	Permitted	**Prohibited**	Designated Staff:
Personal Computer	Permitted	**Prohibited**	Designated Staff:

(Initial here)

Information that Smart Start Academy may communicate electronically to parents:

✔Illness/Accidents/Injuries* ✔Requests for records/supplies ✔Childs Daily Updates
✔Community Information ✔Emergency Closures ✔Photographs ✔Unusual Incidents

A phone call, a DailyConnect message/SSAontheGO message are all SSA methods of communication when reporting illness, accidents and injuries. Please see Policy on Parental Notifications.

(Initial here)

By signing below you understand the full terms of Smart Start Academy's technology and media policy

Sign and date

Policy on Methods of Parental Notification

Hello SSA Families,

As stated on the Technology Policy, Smart Start Academy is pleased to offer an interactive option that allows our families to feel connected to their children while apart. In addition to telephone & email notifications, when necessary, Our Daily Connect App/SSAontheGO app allows for parents and teachers to interact throughout the day and share information regarding

✔Illness/Accidents/Injuries* ✔Requests for records/supplies ✔Childs Daily Updates ✔Community Information
✔Emergency Closures ✔Photographs ✔Unusual Incidents

Please note that Smart Start Academy uses phone calls, DailyConnect messages and SSAontheGo messages as a form of notification when reporting parents of a child's head injury/bump to their head, bite that breaks skin, fall from height greater than their own or injures that require medical attention. All other injuries than those specified shall be reported by end of day.

_____
(Initial here)

While our teachers exercise their best efforts to input the necessary information in a "real time" fashion, at times it may become very challenging for the teachers to both tend to their students and immediately update their feeding /activity and other information into the app.

The staff guidelines for the use of electronic devices are as follows:

Use of the DailyConnect/SSAontheGO is permitted only during the following time frames:

Upon Arrivals
10:30 – Breakfast, Circle Time
1 pm – Morning Lesson, Lunch, Diapering/Toilet & Nap
5:30 – Afternoon Activity, Dinner & Diapering/Toilet
Upon Dismissals

Although the use of devices is permitted, if making updates during the above timeframe prevent the staff from adequately supervising the children, updates will come at a later time.

_____
(Initial here)

Families may continue to message the teachers through daily connect at any time. Our teachers will respond to these messages during a time that does not affect the supervision of their students.

We thank you in advance for your cooperation in this matter.

_____ _____

Signature Date

Smart Start Academy's Technology Policy

At Smart Start Academy, the use of electronic devices is utilized in moderation to enhance the lessons and daily activities planned by our teachers as part of our S.T.E.A.M. program (**S**cience, **T**echnology, **E**ngineering, Language **A**rts and **M**athematics). This may include but is not limited to Ipad visuals, video clips, and audio. The use of the above stated devices is for educational and instructional purposes only.

The length of time for a child over the age of 2 to be exposed to visual electronics shall **never** exceed *30 minutes per day*. Children under the age of 2 will not be exposed to TV/Computer/Video Clips and/or Ipads. For all other age groups, the time limit **per activity** shall not exceed *5 minutes*.

_____ Date:

Parent Signature

Policy on the Release of Children

Each child may be released only to the child's parent(s) or person(s) authorized by the parent(s) to take the child from the center and assume responsibility for the child in an emergency if the parent(s) cannot be reached.

If a non-custodial parent has been denied access, or granted limited access, to a child by a court order, the center shall secure documentation to that effect, maintain a copy on file, and comply with the terms of the court order.

If the parent(s) or person(s) authorized by the parent(s) fails to pick up a child at the time of the center's daily closing, the center shall ensure that:

1. The child is supervised at all times;
2. Staff members attempt to contact the parent(s) or person(s) authorized by the parent(s); and
3. An hour or more after closing time, and provided that other arrangements for releasing the child to his/her parent(s) or person(s) authorized by the parent(s), have failed and the staff member(s) cannot continue to supervise the child at the center, the staff member shall call the 24 hour State Central Registry Hotline 1-877-NJ-Abuse (1877-652-2873) to seek assistance in caring for the child until the parent(s) or person(s) authorized by the child's parent(s) is able to pick up child.

If the parent(s) or person(s) authorized by the parent(s) appears to be physically and/or emotionally impaired to the extent that, in the judgment of the director and/or staff member, the child would be placed at risk of harm if released to such an individual, the center shall ensure that:

1. The child may not be released to such an impaired individual;
2. Staff members attempt to contact the child's other parent or an alternative person(s) authorized by the parent(s); and
3. If the center is unable to make alternative arrangements, a staff member shall call the 24 hour State Central Registry Hotline 1-877-NJ-ABUSE (1877-652-2873) to seek assistance in caring for the child.

For school-age child care programs, no child shall be released from the program unsupervised except upon written instruction from the child's parent(s).

_____ Date:

Parent Signature

Department of Children and Families
Office of Licensing

INFORMATION TO PARENTS

Under provisions of the Manual of Requirements for Child Care Centers (N.J.A.C. 3A:52), every licensed child care center in New Jersey must provide to parents of enrolled children written information on parent visitation rights, State licensing requirements, child abuse/neglect reporting requirements and other child care matters. The center must comply with this requirement by reproducing and distributing to parents and staff this written statement, prepared by the Office of Licensing, Child Care & Youth Residential Licensing, in the Department of Children and Families. In keeping with this requirement, the center must secure every parent and staff member's signature attesting to his/her receipt of the information. Our center is required by the State Child Care Center Licensing law to be licensed by the Office of Licensing (OOL), Child Care & Youth Residential Licensing, in the Department of Children and Families (DCF). A copy of our current license must be posted in a prominent location at our center. Look for it when you're in the center. To be licensed, our center must comply with the Manual of Requirements for Child Care Centers (the official licensing regulations). The regulations cover such areas as: physical environment/life-safety; staff qualifications, supervision, and staff/child ratios; program activities and equipment; health, food and nutrition; rest and sleep requirements; parent/community participation; administrative and record keeping requirements; and others. Our center must have on the premises a copy of the Manual of Requirements for Child Care Centers and make it available to interested parents for review. If you would like to review our copy, just ask any staff member. Parents may view a copy of the Manual of Requirements on the DCF website at http://www.nj.gov/dcf/providers/licensing/laws/CCCmanual.pdf or obtain a copy by sending a check or money order for $5 made payable to the "Treasurer, State of New Jersey", and mailing it to: NJDCF, Office of Licensing, Publication Fees, PO Box 657, Trenton, NJ 08646-0657. We encourage parents to discuss with us any questions or concerns about the policies and program of the center or the meaning, application or alleged violations of the Manual of Requirements for Child Care Centers. We will be happy to arrange a convenient opportunity for you to review and discuss these matters with us. If you suspect our center may be in violation of licensing requirements, you are entitled to report them to the Office of Licensing toll free at 1 (877) 667-9845. Of course, we would appreciate your bringing these concerns to our attention, too. Our center must have a policy concerning the release of children to parents or people authorized by parents to be responsible for the child. Please discuss with us your plans for your child's departure from the center. Our center must have a policy about administering medicine and health care procedures and the management of communicable diseases. Please talk to us about these policies so we can work together to keep our children healthy. Our center must have a policy concerning the expulsion of children from enrollment at the center. Please review this policy so we can work together to keep your child in our center. Parents are entitled to review the center's copy of the OOL's Inspection/Violation Reports on the center, which are available soon after every State licensing inspection of our center. If there is a licensing complaint OOL/Information to Parents/May 2019 Page 2 of 2 investigation, you are also entitled to review the OOL's Complaint Investigation Summary Report, as well as any letters of enforcement or other actions taken against the center during the current licensing period. Let us know if you wish to review them and we will make them available for your review or you can view them online at https://childcareexplorer.njccis.com/portal/. Our center must cooperate with all DCF inspections/investigations. DCF staff may interview both staff members and children. Our center must post its written statement of philosophy on child discipline in a prominent location and make a copy of it available to parents upon request. We encourage you to review it and to discuss with us any questions you may have about it. Our center must post a listing or diagram of those rooms and areas approved by the OOL for the children's use. Please talk to us if you have any questions about the center's space. Our center must offer parents of enrolled children ample opportunity to assist the center in complying with licensing requirements; and to participate in and observe the activities of the center. Parents wishing to participate in the activities or operations of the center should discuss their interest with the center director, who can advise them of what opportunities are available. Parents of enrolled children may visit our center at any time without having to secure prior approval from the director or any staff member. Please feel free to do so when you can. We welcome visits from our parents. Our center must inform parents in advance of every field trip, outing, or special event away from the center, and must obtain prior written consent from parents before taking a child on each such trip. Our center is required to provide reasonable accommodations for children and/or parents with disabilities and to comply with the New Jersey Law Against Discrimination (LAD), P.L. 1945, c. 169 (N.J.S.A. 10:5-1 et seq.), and the Americans with Disabilities Act (ADA),

P.L. 101-336 (42 U.S.C. 12101 et seq.). Anyone who believes the center is not in compliance with these laws may contact the Division on Civil Rights in the New Jersey Department of Law and Public Safety for information about filing an LAD claim at (609) 292-4605 (TTY users may dial 711 to reach the New Jersey Relay Operator and ask for (609) 292-7701), or may contact the United States Department of Justice for information about filing an ADA claim at (800) 514-0301 (voice) or (800) 514-0383 (TTY). Our center is required, at least annually, to review the Consumer Product Safety Commission (CPSC), unsafe children's products list, ensure that items on the list are not at the center, and make the list accessible to staff and parents and/or provide parents with the CPSC website at https://www.cpsc.gov/Recalls. Internet access may be available at your local library. For more information call the CPSC at (800) 638-2772. Anyone who has reasonable cause to believe that an enrolled child has been or is being subjected to any form of hitting, corporal punishment, abusive language, ridicule, harsh, humiliating or frightening treatment, or any other kind of child abuse, neglect, or exploitation by any adult, whether working at the center or not, is required by State law to report the concern immediately to the State Central Registry Hotline, toll free at (877) NJ ABUSE/(877) 652-2873. Such reports may be made anonymously. Parents may secure information about child abuse and neglect by contacting: DCF, Office of Communications and Legislation at (609) 292- 0422 or go to www.state.nj.us/dcf/.

Smart Start Academy

www.Smart-StartAcademy.com

Dear Parent/Guardian:

In keeping with New Jersey's child care center licensing requirements, we are obliged to provide you, as the parent of a child enrolled at our center, with this informational statement.

The statement highlights, among other things: your right to visit and observe our center at any time without having to secure prior permission; the center's obligation to be licensed and to comply with licensing standards; and the obligation of all citizens to report suspected child abuse/neglect/exploitation to the State Central Registry Hotline (877) NJ ABUSE/ 877-652-2873.

Please read this statement carefully and, if you have any questions, feel free to contact your center's Director directly.

Very truly yours,

SSA Management Team

Name of Child: _____

Name of Parent: _____

I have read and received a copy of the Information to Parents statement prepared by the Office of Licensing, Child Care & Youth Residential Licensing, in the Department of Children &Families.

Signature: _____ Date: _____