

Kankakee Area Career Center PO BOX 570 Bourbonnais, IL 60914 www.kacc-il.org 815-939-4971

KACC PRESCHOOL REGISTRATION AND INFORMATION PACKET 2016-2017 SCHOOL YEAR



Kankakee Area Career Center Child Care Preschool



Registration Form

To Be Completed by KAC	CC
Date Application Received:	
Received by:	_
•	

Age:	Date of Birth (mm/do	d/yyyy)	
	s):		
Address:			
Street			
City		State	Zip Code
Home Phone:			
Cell Phone:	Name	e:	
Cell Phone:	NameName_	e:	
F-Mail Address 1:			
E-Wall Madress 1.			
F-Mail Address 2:			
	nation (DL LL LL		
	nation (Please list all perso		
Household Inforn	nation (Please list all perso	ons residing in house	hold).
Household Inforn	nation (Please list all perso	ons residing in house	hold).

Session Days (Please Circle) Monday Tuesday Wednesday Thursday Friday

**Full-day Registrations will be given preference over half-day.

Kankakee Area Career Center offers career and technical education opportunities without regard to age, color, race, national origin, sex, religion or handicap. Additional information regarding this policy can be obtained by contacting the Center.





Kankakee Area Career Center 4083 N 1000 W Rd Bourbonnais, IL 60914 Phone 815-939-4971 Fax 815-939-7598 www.kacc-il.org

KACC Preschool Emergency Card

Emergency Ipecac Allergies

CHILD'S NAME			BIRTHDATE:	
In Case of Emergency, the Primary	Contacts Will I	Be:		
Name	Relationship	Cell/Home Phone #	Work Number #	
CHILD'S HOME ADDRESS:				
MOTHER'S NAME:		HON	ME PHONE:	
FATHER'S NAME:		HOM	ME PHONE:	
Mother's Workplace: W		Wor	rk Phone:	
Father's Workplace:		Wo	Work Phone:	
CHILD"S DOCTOR:		Pho	ne:	
CLINIC AFFILIATED WITH:				
CHILD'S DENTIST:		Pho	ne:	
Significant Medical Information (Inclu	ude allergies, sp	ecial conditions, behavio	r diagnosis etc.)	
I give my permission to the Kankak judged necessary for the care and p			•	
judged necessary for the care and p	rocction of my	enna wime under the sup	ocivision of the program.	
In case of medical emergency, I und	derstand my chi	-	TAL OF PREFERENCE)	
by the local emergency unit for treat Rescue Squad) deems necessary.	tment, at my ex			

In the event of an accidental ingestion, I understand that the <u>Kankakee Area Career Center Staff</u> will contact the Poison Control Center. I give my permission for the staff to administer Syrup of Ipecac to my child if directed to do so by Poison Control.

I hereby authorize the Kankakee Area Career Center Childcare Instructor to act on my behalf in case of

an emergency. 1. NAME:	(Relationship)
PHONE:	
2. NAME:	(Relationship)
PHONE:	
3. NAME:	(Relationship)
PHONE:	
Parent Signature:	Date:
THE FOLLOWING INDIVIDUAL FROM KACC PRESCHOOL:	L(S) HAS/HAVE MY PERMISSION TO PICK UP MY CHILD
	SE YOU CAN NOT BE REACHED (Please check with these people arprised if we call – and please be sure phone numbers are current.)
1. NAME:	(Relationship)
ADDRESS:	
PHONE:	
2. NAME:	(Relationship)
ADDRESS:	
PHONE:	
Parent Signature:	



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Using a Photograph or Videotape of a Student

Distribute to parent(s)/guardian(s) at the time they register a child for school and/or annually, at the beginning of the school year.

Pictures of Unnamed Students: Students may occasionally appear in photographs and videotapes taken by school staff members, other students, or other individuals authorized by the Building Principal. The school may use these pictures, without identifying the student, in various publications, including the school newspaper and school website. No consent or notice is needed or will be given before the school uses pictures of unnamed students taken while they are at school or a school related activity.

Pictures of Named Students: Many times, however, the school will want to identify a student in a school picture. School officials want to acknowledge those students who participate in a school activity or deserve special recognition.

In order for the school to publish a picture with a student identified by name, one of the student's parents or guardians must sign a consent form. Please complete and sign this form to allow the school publish and otherwise use photographs and videotapes, with your child or ward identified, while he or she is enrolled in this school.

I grant consent to Kankakee Area Career Center to identify a picture of my child or ward, by full name and/or the school he or she attends, in any school sponsored material, publication, videotape, or website. This consent must be renewed annually while enrolled in the Kankakee Area Career Center. I may revoke this consent at any time by notifying the Building Principal.

Signed Parent/Guardian's Name	Printed Parent/Guardian's Name
Date	Child or Ward's Name

Pictures of Students taken by Non-School Agencies: While the school limits access to school buildings by outside photographers, it has no control over news media or other entities that may publish a picture of a named or unnamed student. School staff members will not, however, identify a student for an outside photographer.



KACC PRESCHOOL 2016-2017 School Year SESSION RATES

Schedule	Monthly Rate Full-Day Preschool 8:30am – 2:30pm
5 days per week	\$200
4 days per week	\$168
3 days per week	\$130

	Morning Session Rates
Schedule	8:30 am – 12:00 Noon
5 days per	
week	\$170
4 days per	
week	\$138
3 days per	
week	\$100

Preschool Fees are due and payable on the 5^{th} day of each month, beginning September 5, 2016

Monthly fees will be prorated for both Winter and Spring Breaks.



K.A.C.C. Preschool

4083 N 1000 W Rd Bourbonnais, IL 60914 815-939-4971 www.kacc-il.org





2016-2017

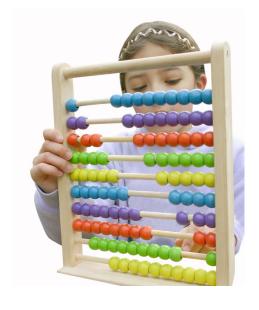
Jennifer Leighter-Yeates leighter-yeates@kacc4083.net Child Development Instructor



Bosa K. Goodale, Principal

Matthew Kelley, Assistant Principal

Don Fay, Director



Welcome to the

Kankakee Area Career Center's

Preschool

Thanks to all the parents who allow the Kankakee Area Career Center (KACC) Preschool to work with your children. It is because of you we are able to fulfill our curriculum and goals within our Child Development/Preschool program.

Our Preschool is open Mondays through Fridays, with three separate sessions available. Parents choose which session they prefer at the time of registration. The session times are

- 8:30 a.m.—12:00 p.m.
- All Day Session (8:30 a.m. to 2:30 p.m.)

KACC currently serves juniors and seniors from 16 area high schools in Kankakee County and parts of Iroquois and Will Counties. The Child Development/Preschool classroom consists of students from almost all KACC area schools, some being in their first year and some in the second year of the Child Development/Preschool program.

These KACC students, under the direct supervision of our Clinical Lab Supervisor, are responsible for the basic teaching of the children in our Preschool lab. The instructor is always available to assist in various activities and help out when necessary. The Preschool Clinical Lab Supervisor works side-by-side with the high school students as they interact with the preschoolers in the Preschool lab.

Philosophy: Our goal in the preschool is to ensure your children and our students experience a wonderful learning/teaching opportunity. The students, their instructor and lab supervisor work very hard to prepare the activity plans, the lab/preschool environment and themselves for each and every day. They want to ensure the children attending our lab/preschool have a caring, nurturing and positive learning experience.

We at KACC firmly believe the early stages of development for any child provides the basic foundation for future educational success. The students and their instructor sincerely want to meet the needs of the whole child including all *domains of development*: social-emotional, physical, cognitive and language development.

Observation Room: Please be aware the one-way mirror in the observation room is a very explicit feature. The observation room is shared by the students and parents of the preschoolers. Parents may use the observation room the first and last ten(10) minutes of the session in which your preschooler is enrolled.

Arrival/Departure:

The drop off/pick up area for the preschool is located at the northeast rear corner of the KACC building. Please park between the signs in the back which are marked "KACC Pre School."

All parents are responsible to sign our form daily, indicating both their child's arrival and departure. Students involved in assisting with the arrival/departure will be wearing scrubs and a name badge. The sign in and sign out sheets will be located in a binder on the table located just outside the preschool door.

In the winter when there is snow and ice in the back of the building, it is advisable for everyone to enter the main entrance of KACC at the front of the building.

If at any time, the person picking up a child does not seem familiar, they will be asked for their driver's license or picture ID.

If an alternate person is to be responsible for pick up/drop off of a child, arrangements must be made with preschool lab instructor and written on daily sign-in/out sheet.

<u>IMPORTANT!</u> Always hold your child's hand to and from your vehicle. Please remember not to let your child run around in the back area while visiting with other parents in the drop off/pick up zone.

Parent Letter: Parents will be provided a monthly parent update letter. This letter is a very important communication tool used to keep you informed of what will be taking place during the upcoming month.

Student Encouragement: Whenever a parent wants to make special mention of a KACC Child Development student who has worked with their child in the preschool, please inform the Preschool Lab Supervisor.

Compliments sometimes fall short in our changing world so we like it when someone is *caught...doing something good!*

<u>Concerns</u>: Parents are also encouraged to let the Clinical Lab Supervisor know if they ever have a question or concern involving the Preschool, their child, or a KACC student. The Preschool Lab Supervisor will be responsible for addressing any concerns.

<u>School Closings</u>: Typically, the Preschool is open Monday through Friday, on any day the Kankakee Area Career Center is in session. Should there be a need to close the preschool due to inclement weather, (ice, snow or extreme cold), public service announcements will be made on local radio stations, including WONU @ 89.9 FM and WKAN @ 1320 AM and a notice placed on the front page of our website, www.kacc-il.org. The Preschool Lab Supervisor will also post scheduled closing above the sign in/out binder.

Lunch: Parents who choose to send their child(ren) for a full-day session must provide their child(ren)'s lunch. Lunches must be a cold box lunch promoting the child to be self-sufficient. Children are allowed to put their lunch in the classroom refrigerator, as needed. Be sure to make the Preschool Lab Supervisor aware of any food allergies you child has so this can be addressed at the beginning of the school year.

<u>Health</u>: If a child within the lab/preschool is found showing symptoms of becoming ill, i.e.: flushed cheeks, diarrhea, vomiting, runny nose, stomach ache, fever, etc. the parent will be contacted to bring the child home. If the parent is unable to be contacted, the emergency contact person listed on file will be notified to come and pick up the child.

If a child is sent home due to an illness, they must be illness-free for 24 hours before returning to the preschool in hopes of keeping a virus from spreading.

Children who have an infectious disease must have a release form from their physician before returning to the KACC preschool.

If at any time the children at the preschool are exposed to any infectious disease, i.e.; Chickenpox, head lice, etc., parents will be notified as quickly as possible. In addition to individual written notices being sent home with each child, and, if necessary, telephone calls will be made. In the case of head lice, the school will be properly cleaned to ensure the children/students are not infected.

Payment Policy: Payment will be due on the 8th day of each month, beginning September 8, 2015. Payments may be made in either cash, personal checks or money orders. No credit cards are accepted. If any payments becomes more than ten (10) days late, the child will not be allowed to attend preschool until the payment is brought current.

Preschool will run between September 8, 2015 and May 8, 2016

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Please sign the sheet below and turn into the Preschool Lab
Supervisor.
To Whom It May Concern:
I have thoroughly read and understand the handbook of the
Kankakee Area Career Center Preschool lab. Please sign on the line
below and return on the first day of Preschool. Thank you.
Date:
Signature: