

## Admission Information

Use this form to collect all required information about a child enrolling in day care.

**Directions:** The day care provider gives this form to the child's parent or guardian. The parent or guardian completes the form in its entirety and returns it to the day care provider before the child's first day of enrollment. The day care provider keeps the form on file at the child care facility.

General Information			
Operation's Name:		Director's Name:	
Child's Full Name:		Child's Date of Birth:	Child Lives With? <input type="radio"/> Both parents <input type="radio"/> Mom <input type="radio"/> Dad <input type="radio"/> Guardian
Child's Home Address:		Date of Admission:	Date of Withdrawal:
Name of Parent or Guardian Completing Form:		Address of Parent or Guardian <i>(if different from the child's)</i> :	
List phone numbers below where parents or guardian may be reached while child is in care.			
Parent 1 Phone No.:	Parent 2 Phone No.:	Guardian's Phone No.:	Custody Documents on File? <input type="radio"/> Yes <input type="radio"/> No
<b>In case of an emergency, call:</b>			
Name of Emergency Contact:		Relationship:	Area Code and Phone No.:
Address:			
I authorize the child care operation <b>to release</b> my child to leave the child care operation <b>ONLY</b> with the following persons. Please list name and phone number for each. Children will only be released to a parent or guardian or to a person designated by the parent or guardian after verification of ID.			
Name:		Area Code and Phone No.:	
Name:		Area Code and Phone No.:	
Name:		Area Code and Phone No.:	

Consent Information
<b>1. Transportation:</b>
I give consent for my child to be transported and supervised by the operation's employees (Check all that apply). <input type="checkbox"/> for emergency care <input type="checkbox"/> on field trips <input type="checkbox"/> to and from home <input type="checkbox"/> to and from school
<b>2. Field Trips:</b>
<input type="radio"/> I give consent for my child to participate in field trips. <input type="radio"/> I do not give consent for my child to participate in field trips.
Comments:

**3. Water Activities:**

I give consent for my child to participate in the following water activities (Check all that apply).

water table play     sprinkler play     splashing or wading pools     swimming pools     aquatic playgrounds

Is your child able to swim without assistance? <input type="radio"/> Yes <input type="radio"/> No	Does your child have any physical, health, behavioral or other condition that would put them at risk while swimming? <input type="radio"/> Yes <input type="radio"/> No
Do you want your child to wear a life jacket while in or near a swimming pool? <input type="radio"/> Yes <input type="radio"/> No	

**4. Receipt of Written Operational Policies:**

I acknowledge receipt of the facility's operational policies, including those for (Check all that apply).

<input type="checkbox"/> Discipline and guidance	<input type="checkbox"/> Procedures for release of children
<input type="checkbox"/> Suspension and expulsion	<input type="checkbox"/> Illness and exclusion criteria
<input type="checkbox"/> Emergency plans	<input type="checkbox"/> Procedures for dispensing medications
<input type="checkbox"/> Procedures for conducting health checks	<input type="checkbox"/> Immunization requirements for children
<input type="checkbox"/> Safe sleep	<input type="checkbox"/> Meals and food service practices
<input type="checkbox"/> Procedures for parents to discuss concerns with the director	<input type="checkbox"/> Procedures to visit the center without securing prior approval
<input type="checkbox"/> Promotion of indoor and outdoor physical activity including criteria for extreme weather conditions	<input type="checkbox"/> Procedures for supporting inclusive services
<input type="checkbox"/> Procedures for parents to participate in operation activities	<input type="checkbox"/> Procedures for parents to contact Child Care Regulation (CCR), DFPS, Child Abuse Hotline, and CCR website

**5. Meals:**

I understand that the following meals will be served to my child while in care (Check all that apply):

None     Breakfast     Morning snack     Lunch     Afternoon snack     Supper     Evening snack

**6. Days and Times in Care:**

My child is normally in care on the following days and times:

Day of the Week	A.M.	P.M.
Monday		
Tuesday		
Wednesday		
Thursday		
Friday		
Saturday		
Sunday		

**7. Receipt of Parent's Rights:**

I acknowledge I have received a written copy of my rights as a parent or guardian of a child enrolled at this facility.

\_\_\_\_\_

Signature — Parent or Legal Guardian Date Signed





### Vaccine Information

The following vaccines require multiple doses over time. Please provide the date your child received each dose.

Vaccine	Vaccine Schedule	Dates Child Received Vaccine
Hepatitis B	Birth (first dose)	
	1–2 months (second dose)	
	6–18 months (third dose)	
Rotavirus	2 months (first dose)	
	4 months (second dose)	
	6 months (third dose)	
Diphtheria, Tetanus, Pertussis	2 months (first dose)	
	4 months (second dose)	
	6 months (third dose)	
	15–18 months (fourth dose)	
	4–6 years (fifth dose)	
Haemophilus Influenza Type B	2 months (first dose)	
	4 months (second dose)	
	6 months (third dose)	
	12–15 months (fourth dose)	
Pneumococcal	2 months (first dose)	
	4 months (second dose)	
	6 months (third dose)	
	12–15 months (fourth dose)	
Inactivated Poliovirus	2 months (first dose)	
	4 months (second dose)	
	6–18 months (third dose)	
	4–6 years (fourth dose)	
Influenza	Yearly, starting at 6 months. Two doses given at least four weeks apart are recommended for children who are getting the vaccine for the first time and for some other children in this age group.	
Measles, Mumps, Rubella	12–15 months (first dose)	
	4–6 years (second dose)	
Varicella	12–15 months (first dose)	
	4–6 years (second dose)	
Hepatitis A	12–23 months (first dose)	
	The second dose should be given 6 to 18 months after the first dose.	

**Varicella (Chickenpox)**

Varicella (chickenpox) vaccine is not required if your child has had chickenpox disease. If your child has had chickenpox, please complete the statement: My child had varicella disease (chickenpox) on or about [date] and does not need varicella vaccine.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date Signed

**Additional Information Regarding Immunizations**

For additional information regarding immunizations, visit the Texas Department of State Health Services website at [www.dshs.state.tx.us/immunize/public.shtm](http://www.dshs.state.tx.us/immunize/public.shtm).

**TB Test (If required)**

Positive    Negative   Date: \_\_\_\_\_

**Gang Free Zone**

Under the Texas Penal Code, any area within 1,000 feet of a child care center is a gang-free zone, where criminal offenses related to organized criminal activity are subject to harsher penalties.

**Privacy Statement**

HHSC values your privacy. For more information, read our privacy policy online at: <https://hhs.texas.gov/policies-practices-privacy#security>

**Signatures**

\_\_\_\_\_  
Child's Parent or Legal Guardian

\_\_\_\_\_  
Date Signed

\_\_\_\_\_  
Center Designee

\_\_\_\_\_  
Date Signed

**Physician or Public Health Personnel Verification**

Signature or stamp of a physician or public health personnel verifying immunization information above:

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date Signed



# Application for Admission

Child's Name: Nickname: D.O.B: \_\_\_\_\_  
 Age as of Sept 1, 2023: \_\_\_\_\_ Gender: \_\_\_\_\_  
 Parent's/Legal Guardian: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Work Phone: \_\_\_\_\_ Email: \_\_\_\_\_  
 Parent's/Legal Guardian: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Work Phone: \_\_\_\_\_ Email: \_\_\_\_\_

## Educational Programs

Program	Ages	Coverage	Monthly Tuition	Check Applicable
<b>Novus</b>	6 weeks - 17 months	Full-time 6:00 AM-6:30 PM	\$1,199.00	
		Part-time 8:30 AM-12:30 PM	\$693.00	
<b>Medio Toddler</b>	18 months - 23 months	Full-time 6:00 AM-6:30 PM	\$1147.00	
		Part-time 8:30 AM-12:30 PM	\$673.00	
<b>Medio Two's</b>	24 months - 36 months	Full-time 6:00 AM-6:30 PM	\$1,104.00	
		Part-time 8:30 AM-12:30 PM	\$653.00	
<b>Praescindo Program</b>	3 years - 4 years	Full-time 6:00 AM-6:30 PM	\$998.00	
		Part-time 8:30 AM-12:30 PM	\$593.00	
<b>Montessori Program</b>	3 years - 6 years	Full-time 6:00 AM-6:30 PM	\$1198.00	
		Part-time 8:30 AM-12:30 PM	\$793.00	
<b>Schola Program</b>	Kinder - 4th grade	After School 3:00 PM-6:30 PM	\$500.00	
			\$550.00	
<b>Summer Schola Program</b>	Kinder - 4th grade	Full-time 6:00 AM-6:30 PM	\$953.00	



# Enrollment Agreement

I agree to the following:

1. The school will open at 6:00 a.m. and will close at 6:30 p.m. daily, Monday-Friday. A fee will be charged for any child not picked up before the school's regular closing time. This charge shall be \$20.00 per child for the first 15 minutes and an additional \$5.00 per child per 5-minute period thereafter.
2. I am responsible for communicating all contact information updates as well as maintaining an open line of communication during all hours that my child/children are in care.
3. The school's non-refundable annual registration of \$175.00 and supply fee of \$225.00 shall be paid upon enrollment and every August thereafter.
4. Monthly tuition is due on the first of each month, it will be considered late after the 7th, and a late fee of \$50 will be added to the due tuition.
5. Monthly tuition fees are non-refundable, and no credit is issued regardless of scheduled school closings and holidays, children's illness, vacation, inclement weather days, and/or "Acts of God". The School will make reasonable efforts to open in inclement weather; however, the School may choose to close at discretion of the school's owners/leadership. Parent's should call the school regarding closures and/or delayed openings.  
**\*Please see school calendar for scheduled closures.**
6. A fee of \$50 will be charged for checks returned by the school's bank.
7. I am responsible for receiving, reading, and abiding all information in Covenant Glen Academy Community Norms and Expectations.

The undersigned parent(s) understand the terms of this agreement and agree to be bound by them.

Parent Name

Printed Parent Signature

Date

Parent Name

Printed Parent Signature

Date



## Operational Discipline and Guidance Policy

This form provides the required information per 26 Texas Administrative Code (TAC) minimum standards §744.501(7), §746.501(a)(7), and §747.501(5).

**Directions:** Parents will review this policy upon enrolling their child. Employees, household members, and volunteers will review this policy at orientation. A copy of the policy is provided in the operational policies.

### Discipline and Guidance Policy

**Discipline must be:**

- 1) Individualized and consistent for each child;
- 2) Appropriate to the child's level of understanding; and
- 3) Directed toward teaching the child acceptable behavior and self-control.

**A caregiver may only use positive methods of discipline and guidance that encourage self-esteem, self-control, and self-direction, which include at least the following:**

- 1) Using praise and encouragement of good behavior instead of focusing only upon unacceptable behavior;
- 2) Reminding a child of behavior expectations daily by using clear, positive statements;
- 3) Redirecting behavior using positive statements; and
- 4) Using brief supervised separation or time out from the group, when appropriate for the child's age and development, which is limited to no more than one minute per year of the child's age.

**There must be no harsh, cruel, or unusual treatment of any child. The following types of discipline and guidance are prohibited:**

- 1) Corporal punishment or threats of corporal punishment;
- 2) Punishment associated with food, naps, or toilet training;
- 3) Pinching, shaking, or biting a child;
- 4) Hitting a child with a hand or instrument;
- 5) Putting anything in or on a child's mouth;
- 6) Humiliating, ridiculing, rejecting, or yelling at a child;
- 7) Subjecting a child to harsh, abusive, or profane language;
- 8) Placing a child in a locked or dark room, bathroom, or closet with the door closed or open; and
- 9) Requiring a child to remain silent or inactive for inappropriately long periods of time for the child's age.

### Additional Discipline and Guidance Measures

*(Only Applies to Before or After School Program (BAP)/School Age Program (SAP) that Operates under 26 TAC Chapter 744)*

**A program must take the following steps if it uses disciplinary measures for teaching a skill, talent, ability, expertise, or proficiency:**

- Ensure that the measures are considered commonly accepted teaching or training techniques;
- Describe the training and disciplinary measures in writing to parents and employees and include the following information:
  - (A) The disciplinary measures that may be used, such as physical exercise or sparring used in martial arts programs;
  - (B) What behaviors would warrant the use of these measures; and
  - (C) The maximum amount of time the measures would be imposed;
- Inform parents that they have the right to ask for additional information; and
- Ensure that the disciplinary measures used are not considered abuse, neglect, or exploitation as specified in Texas Family Code §261.001 and TAC Chapter 745, Subchapter K, Division 5, of this title (relating to Abuse and Neglect).

### Signature

This policy is effective on the following date: \_\_\_\_\_

Signed by: \_\_\_\_\_

Role:  Parent  Caregiver/Employee  Household Member (CH. 747 only)

### Minimum Standards Related to Discipline

- Title 26, Chapter 746 Subchapter L: [http://texreg.sos.state.tx.us/public/readtac\\$ext.ViewTAC?tac\\_view=5&ti=26&pt=1&ch=746&sch=L&rl=Y](http://texreg.sos.state.tx.us/public/readtac$ext.ViewTAC?tac_view=5&ti=26&pt=1&ch=746&sch=L&rl=Y)
- Title 26, Chapter 747 Subchapter L: [http://texreg.sos.state.tx.us/public/readtac\\$ext.ViewTAC?tac\\_view=5&ti=26&pt=1&ch=747&sch=L&rl=Y](http://texreg.sos.state.tx.us/public/readtac$ext.ViewTAC?tac_view=5&ti=26&pt=1&ch=747&sch=L&rl=Y)
- Title 26, Chapter 744 Subchapter G: [http://texreg.sos.state.tx.us/public/readtac\\$ext.ViewTAC?tac\\_view=5&ti=26&pt=1&ch=744&sch=G&rl=Y](http://texreg.sos.state.tx.us/public/readtac$ext.ViewTAC?tac_view=5&ti=26&pt=1&ch=744&sch=G&rl=Y)



# Multimedia Release

*Please complete a separate form for each child in a family.*

I give my consent for Covenant Glen Academy to photograph or video my child and/or me or use photograph(s) or videos of my child or me that were taken in the childcare setting. I understand that the photographs, digital images, or video segments may be used in print or electronic media and that the photographs may be displayed on websites owned or sponsored by Covenant Glen Academy. I give Covenant Glen Academy permission to publish, exhibit and distribute these materials. Possible uses include educational, training activities, illustration, publicity, advertisement, and marketing. I understand that Covenant Glen Academy owns the rights to the multimedia material in which I, or my child may appear. Covenant Glen Academy will assure that it conveys positive images of children and reflect early childhood recommended practice.

Child's Name	Choose One (Circle)		
	Full Use	In-House Only*	No Photos

\*In-House Only includes photos used in the classrooms and hallways and photos taken for and through daily reporting tools, such as KidReports.

## Agreement Not to Post Photos of Other Children

I agree that I will not post nor use any photographs or videos that I take at Covenant Glen Academy (or at an event sponsored by Covenant Glen Academy) that include children other than my own child(ren) in print, electronic or social media or any other form. My agreement extends to photos or videos taken by any member of my family or any visitors that I bring to Covenant Glen Academy or sponsored events.

Name of Child (Printed)		
Name of Parent (Printed)	Signature	Date



# The Covenant Glen Academy School Compact

At Covenant Glen Academy, we believe that collaborating and working with our parents and community is necessary to meet our students' needs.

## **SCHOOL RESPONSIBILITIES:**

1. Provide a safe and nurturing environment that fosters student success.
2. Communicate through Procure and a variety of ways to share school news.
3. Inform students and parents of behavior expectations by sending home school wide expectations.
4. Offer purposeful meetings and activities for parents and students at flexible times.
5. Provide engaging experiences to our students and their families.
6. Monitor student academic growth and collaborate with the parent.
7. Teach students the importance of showing respect, integrity, and commitment to be the leader he/she is meant to be.

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Teacher's Signature

## **PARENT AND FAMILY RESPONSIBILITIES:**

1. Make sure that your child attends school regularly, on time, and is ready to learn.
2. Communicate with the school through Procure.
3. Encourage students to follow all our campus wide expectations.
4. Participate in school activities such as Meet the Teacher, Open House, Trunk or Treat and various activities.
5. Help children with homework when assigned.
6. Monitor student academic growth and collaborate with his/her teacher.
7. Help my child to see the importance of showing respect, integrity, and commitment to be the leader he/she is meant to be.

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Parent's Signature

## Parent's Rights

This form provides the required information per Chapter 42 of the Human Resource Code (HRC) Section 42.04271.

**Directions:** Parents will review these rights upon enrolling their child.

### Rights of Parent or Guardian

**A parent or guardian of a child at a child care facility has the right to:**

- (1) enter and examine the child care facility during the facility's hours of operation without advanced notice;
- (2) review the child care facility's publicly accessible records;
- (3) receive inspection reports for the child care facility and information about how to access the facility's online compliance history;
- (4) obtain a copy of the child care facility's policies and procedures;
- (5) review, at the request of the parent or guardian, the facility's:
  - (A) staff training records; and
  - (B) any in-house staff training curriculum used by the facility;
- (6) review the child care facility's written records concerning the parent's or guardian's child;
- (7) inspect any video recordings of an alleged incident of abuse or neglect involving the parent's or guardian's child, provided that:
  - (A) video recordings of the alleged incident are available;
  - (B) the parent or guardian of the child does not retain any part of the video recording depicting a child that is not their own; and
  - (C) the parent or guardian of any other child captured in the video recording receives written notice from the facility before allowing a parent to inspect a recording;
- (8) have the child care facility comply with a court order preventing another parent or guardian from visiting or removing the parent's or guardian's child;
- (9) be provided the contact information for the child care facility's local Child Care Regulation office;
- (10) file a complaint against the child care facility by contacting the local Child Care Regulation office; and
- (11) be free from any retaliatory action by the child care facility for exercising any of the parent's or guardian's rights.

I acknowledge I have received a written copy of my rights as a parent or guardian of a child enrolled at this facility.

\_\_\_\_\_  
Signed By: Parent or Guardian

\_\_\_\_\_  
Date

### Resources

Facility Information and Online Compliance History:

<http://txchildcaresearch.org>

Child Care Regulation Contact Information:

<https://www.hhs.texas.gov/services/safety/child-care/contact-child-care-regulation>