



Kirkwood Presbyterian Center for Early Learning

Required Additional Documentation **(Parents Keep This Page)**

Documents required to start school

Birth Certificate

Florida State Physical Examination - Form 3040

Florida Certificate of Immunization - Form 680

VPK Voucher (4's)

Immunization and Health Requirements

Florida statutes require that we have up-to-date health and immunization records signed by a licensed physician showing current information of each child registered. Your physician will supply the Florida Department of Health medical forms.

Physical Health Examinations-

Required for students entering school for the first time.

Must be done within 12 months prior to entering school.

Immunization - Florida statute 232.032 subsection 2, requires that all students provide the school with evidence that they have been immunized. It is important that specific dates be listed for each immunization. The following must be completed by all students:

- DPT (Diphtheria, tetanus, and pertussis vaccine)
- Polio vaccine
- MMR (Measles, Mumps, and Rubella Vaccine)
- Hepatitis B vaccine (3 shots given over a 6-month period and must be completed before the student may start school). Please start this series now if it is needed for the next school year.
- Varicella vaccine (chicken pox) is required for all students unless the child has documentation of the chicken pox disease.
- *Haemophilus influenzae type b (Hib) vaccine* (is required for all children 59 months and younger).

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Kirkwood Presbyterian Center for Early Learning

Application for Admission 2025-2026

(We must have an individual application for each student applying for admission)

Child's Legal Name _____
First Middle Last (Preferred Name)

Home Address _____
Street City State Zip Code

Birthdate _____ Male _____ Female _____ U. S Citizen Y ___ N ___

List the names and grades of any siblings who are/will be attending KPCEL.

1. _____ 2. _____

Language spoken at home: _____

School History (if applicable)

Last School Attended _____ Phone _____

Address _____ City _____ State _____ Zip Code _____

Reason for withdrawal _____

Why do you want your child to attend KPCEL? _____

Custodial Parent Information

Mother's Name _____
First Middle Last Preferred Name

Home Address _____
Street City State Zip Code

Email address _____

Preferred Phone number _____ C ___ H ___ W ___

Preferred method of contact (other than emergency) Call _____ Email _____ Text _____

Do you have a home church? Y ___ N ___ Are you interested in Volunteering? Y ___ N ___

Father's Name _____
First Middle Last Preferred Name

Home Address _____
Street City State Zip Code

Spouses name (if other than the student's mother) _____

Email address _____

Preferred Phone number _____ C ___ H ___ W ___

Preferred method of contact (other than emergency) Call _____ Email _____ Text _____

Do you have a home church? Y ___ N ___ Are you interested in Volunteering? Y ___ N ___

With whom does the student live if other than both parents? _____

Who has legal custody of the student? _____

(Legal court documentation valid in Florida must be submitted with this paperwork if either parent is not allowed to have contact with the child or if contact is restricted.)

How did you hear about our school? _____

Classes and Hours

YOUNGER / OLDER TWOS	THREES	VPK
<p>Children who are two by September 1: this class meets two or four days per week. These classes meet 9:00 am until 12:30 pm You may choose 2 or 4 days:</p> <p>2 days: Tuesday/Thursday or Monday/Wed (circle one)</p> <p><input type="checkbox"/></p> <p>\$325.00/monthly</p> <p>4 days a week</p> <p><input type="checkbox"/></p> <p>\$455.00/monthly</p> <p>Add Friday</p> <p><input type="checkbox"/></p> <p>\$110/extra monthlv</p>	<p>Children who are three by September 1: this class meets two or four days per week. These classes meet 9:00 am until 12:30 pm You may choose 2 or 4 days:</p> <p>2 days: Tuesday/Thursday or Monday/Wed (circle one)</p> <p><input type="checkbox"/></p> <p>\$320/monthly</p> <p>4 days a week</p> <p><input type="checkbox"/></p> <p>\$450/monthly</p> <p>Add Friday</p> <p><input type="checkbox"/></p> <p>\$110/extra monthly</p>	<p>Children must be four by September 1: these classes meet 4 days week from 8:45 am until 12:45 pm, 2 classes available</p> <p>4 days: 8:45 am – 12:45 pm Monday-Thursday</p> <p><input type="checkbox"/></p> <p>5 days: 8:45-12:45 pm Monday-Friday</p> <p><input type="checkbox"/></p> <p>\$150/monthly</p> <hr/> <p>Drop In Fridays (2's and 3's only)- Based on numbers</p> <p>\$30.00</p>

MY CHILD WILL PARTICIPATE IN EXTENDED CARE

EARLY ARRIVAL 8:00	3:00 PICKUP	VPK Extended Learning
<p><input type="checkbox"/></p> <p>\$90 2's/3's (2 day \$45) \$70 VPK</p>	<p><input type="checkbox"/></p> <p>\$190 2's/3's \$95 2 days</p>	<p><input type="checkbox"/></p> <p>\$215</p>

Please note, VPK Fridays will only be available for students who choose the 5 day VPK option. Friday's will be an additional day of learning and part of the regular VPK program. This will not be a mixed class of students as previously offered. Two's and three's will be in a separate class.

Registration Fee

Due at the time you turn in your application

<p>\$265.00 2 days a week</p> <p><input type="checkbox"/></p>	<p>\$295.00 4 days a week</p> <p><input type="checkbox"/></p>	<p>\$320 5 days a week</p> <p><input type="checkbox"/></p>	<p>\$50 VPK Ext Learning</p> <p><input type="checkbox"/></p>
-------------------------------------------------------------------	-------------------------------------------------------------------	----------------------------------------------------------------	------------------------------------------------------------------

As a private institution, the school reserves the right to deny admission to any student who fails to meet its admission requirements.

In addition, the school reserves the right to establish and maintain/enforce standards, requirements, and codes of conduct for students and parents, up to and including suspension and expulsion.



Kirkwood Presbyterian Center for Early Learning

Emergency and Pick up Information

Please list at least two adults (friends, relatives or neighbors) in addition to guardians listed on this application who is authorized to pick up your child from school. Also, please mark those contacts that should be used in case of emergency if a parent is unavailable.

1. _____
Name Relationship to child

Phone _____ Emergency contact Y _____ N _____

2. _____
Name Relationship to child

Phone _____ Emergency contact Y _____ N _____

3. _____
Name Relationship to child

Phone _____ Emergency contact Y _____ N _____

Allergies

Medical Information

Please list all of the student's physical limitations, medications and/or allergies:

Child's Physician _____ Phone (____) _____

Hospital Preference _____

Parent/Guardian Printed Name Parent/Guardian Signature Date

Parent/Guardian Printed Name Parent/Guardian Signature Date



Kirkwood Presbyterian Center for Early Learning

Agreements and Waivers

Please read carefully before signing.

Privacy Statement

_____ I understand that all information collected within this application is solely for use at KPCEL and that KPCEL does not share or release this information in any form without the sole written release of the parent or guardian or the student once graduated.

Open House Agreement

_____ I understand that it is required that at least one parent attend the Open House at the beginning of each school year.

Statement of Cooperation

_____ In making application for my child, it is my desire to have him or her complete the 2024-25 school year. I also give permission for my child to take part in all school activities at school-sponsored trips away from the school campus and absolve the school from liability to me or my child because of any injury at school or during a school activity. I agree that lawsuits between Believers are prohibited by Scripture and agree to submit to binding arbitration on any matter that cannot be otherwise resolved.

Medical Treatment Release

_____ In case of accident or serious injury, I request that the school contact me. If the school is unable to reach me, I hereby authorize the school to call the physician named in the student medical information on this application and to follow his/her instructions. If it is impossible to contact the physician, the school may make whatever arrangements necessary, and I will not hold the school financially responsible for my child's care.

Financial Agreement

_____ I understand that the registration fee is required for my child's enrollment in KPCEL and is non-refundable. I agree to pay the tuition rate listed in the school's financial sheet, and I understand that tuition is charged and can be paid in full* or through monthly installments. I understand that if the monthly payments are not made by the 5th of the month a late fee of \$25.00 will be added and my child cannot return until it is paid. I understand that if the tuition is not paid by the 10th of the month my child's enrollment may be terminated until the tuition is made current. A fee of \$25.00 will be collected for any returned checks. A two week written notice must be made in order to not be charged for the next month. If you decide to leave mid-month without a two week notice, there are no refunds given for the remainder of the month.

Parent/Guardian Printed Name	Parent/Guardian Signature	Date

Parent/Guardian Printed Name	Parent/Guardian Signature	Date

*10% discount is applied if tuition is paid in full for the school year.



Kirkwood Presbyterian Center for Early Learning
Preschool Policies 2025-26 School Year

I hereby certify that I am the legal Parent/guardian of _____

Acceptance of Preschool Policies - I have read the policies of Kirkwood Presbyterian Center Early Learning regarding the mission, philosophy, discipline practices, and hereby accept them accordingly.

I have received a copy of the Parent Handbook. I understand there will be a late fee of \$25 if payment is received after the 5th of the month as well as a \$25 fee for insufficient funds through Brightwheel/check deposit

Authorization to transport - in the event of an emergency that requires the school to vacate the premises and time does not permit to call the parent/guardian, I hereby authorize the staff of Kirkwood Presbyterian Center for Early Learning to transport my child to a safe environment until I can be reached.

I am the custodial parent and I am responsible for the total tuition and extended care payments.

I give my permission for the following: please initial all after you have read them:

Termination Policy - in the event that Kirkwood Presbyterian Center for Early Learning has to close for unforeseen circumstances, we will transfer appropriate records in a timely manner.

Directory Information - I give my permission for my name, address and phone numbers to be included in the school directory which may be distributed to Kirkwood preschool families.

Photo Release - I give the school and church permission to use my child's photograph in classrooms and other places in the school, as well as in, print publications, videos, portfolios, online publications, presentations, promotions, websites, and social media. I also understand that no royalty, fee or other compensation shall become payable to me by reason of such use.

Authorization for Emergency Medical Care - in order to meet all legal requirements, I hereby authorize the Director of the school, or the person in charge in the event of her absence, to give my consent for any and all necessary emergency medical treatment for my child while said child is in said individual's custody. In the event of serious illness or accident, and I cannot be immediately contacted, I give my permission to have my child moved by ambulance or other conveyance to a doctor's office, clinic, or hospital for immediate attention.

Parent/Guardian Printed Name Parent/Guardian Signature Date

Parent/Guardian Printed Name Parent/Guardian Signature Date

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Before and After Care Application

*Registration fee of \$50.00 must accompany this application for VPK extended only

Contact Information

Child's Legal Name	
Parent Name	
Contact phone number	
Parent Name	
Contact Phone Number	

<u>Mornings Drop off</u>	<u>P.M. Cost</u>	<u>A.M. Cost</u>
8:00 <input type="checkbox"/>	<u>Times are 12:30 p.m. – 3:00</u>	<u>Times are 8:00 a.m-8:45/9:00</u>
<u>Afternoon Pick up</u>	VPK- \$215 <input type="checkbox"/>	8:00- \$90 <input type="checkbox"/>
3:00 <input type="checkbox"/>	2's/3's - 4 day: \$190 <input type="checkbox"/>	2 days- \$45 <input type="checkbox"/>
Friday A.M 8:00 - \$25 <input type="checkbox"/>	2 day: \$95 <input type="checkbox"/>	

Name of person picking up child (must be on the approved list)	Phone Number

_____ I agree that my child will be picked up by 3:00 p.m. or I will incur a late fee of \$1.00 per minute each minute I am late, payable at the time of the occurrence. Too many late fees will result in my child being suspended or expelled from the afterschool care program. Please call 904-779-7198 to let us know if you know you are going to be late.

Drop in rate (not already in before or aftercare) is \$8.00 per hour.

Parent/Guardian Printed Name	Parent/Guardian Signature	Date
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Parent/Guardian Printed Name	Parent/Guardian Signature	Date
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Emergency Information

Child's Given Name _____

DOB: _____

Mom's Name _____

Mom's Phone # _____ Email _____

Dad's Name _____

Dad's Phone # _____ Email _____

Emergency Contact Name _____

EC's Phone # _____

Email Address: _____

Please list at least two (2) people who might pick up your child in case we are not able to contact the above. We will not release your child to anyone who is not on this list.

(Include phone)

Name _____

Phone Number _____

Name _____

Phone Number _____

Name _____

Phone Number _____

Kirkwood Presbyterian Center for Early Learning

8701 Argyle Forest Blvd., Jacksonville, FL 32244

904-779-7198

Student Name: _____

DISCIPLINE AGREEMENT

It is our pleasure to provide your child with a safe, caring, loving and supervised environment while at our preschool. To insure this positive environment, we must partner with parents to train the child to have respect for themselves and others. This is accomplished by teaching them respect for God and His Word, fellow humans and property of others. Acceptable behavior is encouraged by giving positive verbal and tangible rewards (i.e. stickers, candy). This is done to reinforce the child's self-esteem and to serve as an example to other students. Parents can best partner with the school by reminding children about classroom rules and procedures at home.

During group listening activities, children who do not cooperate will be placed by the teacher's side and will be instructed to proper acceptable behavior. If this fails to encourage the child to obey, a "think-about-it time" period away from the group will be used. This period of being in "think about it time", allows the child to think about his/her behavior and then make the decision to behave in a way that will permit him/her to rejoin the group.

Corporal punishment is not administered at Kirkwood Presbyterian Center for Early Learning, if behavior becomes unacceptable to this degree, the parent will be called to come to the school and work with the staff to resolve the matter.

Behaviors that will not be accepted are:

- | | | | |
|----------|----------------------------|----------------|-----------------|
| Biting | Kicking | Fighting | Disobedience |
| Hitting | Sticking out tongue | Stealing | "Sassing" staff |
| Spitting | Improper language | Throwing toys | |
| Lying | Writing on school property | Throwing mulch | |

These are the guidelines used for unacceptable behavior:

- 1st Time: Up to a 5 minute "think about it time"
- 2nd Time: Parent will be notified of the problem via daily behavior chart.
- 3rd Time: Parent will be notified via "discipline notice" form.

In situations where behavior is extreme or habitual, teachers have the latitude to skip the first two steps in this process and notify parents via the discipline notice form.

The primary form of communication with parents will be the daily take home folder. This folder is used to communicate behavior and to provide information on classroom events. Parents are expected to review the folder on a daily basis and then sign the behavior chart and any other items requiring parent signature.

The daily folder, with parent signature is to be returned to the school with the child each morning.

I have read the Discipline Agreement and agree to cooperate with the discipline policies set forth at Kirkwood Presbyterian Center for Early Learning. I also agree to review items in the daily take home folder and to sign and return the folder to the teacher daily. I realize the daily folder may include forms that require a parent signature and will do my best to sign and return such forms promptly.

(Please Print) Parent/Guardian Name _____

Parent/Guardian Signature _____ Date _____

(Please Print) Parent/Guardian Name _____

Parent/Guardian Signature _____ Date _____

Student Name: _____

ATTENDANCE POLICY - VPK

ABSENCES

School attendance is the direct responsibility of the parents. All students are expected to attend school regularly and to be on time for classes to benefit from instructional program and to develop habits of punctuality, self-discipline, and responsibility.

Attendance is required from (8:45 a.m. - 12:45 p.m. 4-day a week program) for all students in the Voluntary Prekindergarten Program. Acceptable attendance is defined as not missing more than twenty (20) days in the 135-day school year. Parents of students with excessive absences will be required to meet with the Pre-School Director. Absences in excess of thirty (30) days will result in students being dismissed from the program.

1. **Absence Defined:** Any student arriving at school after 9:45 a. m. will be counted as absent (Unless prior arrangements have been made with your child's teacher).
2. **Excused Absence:** A note from the parent (or doctor) will be required to explain why the student was absent from school. The note must always state the reason for the absence. The note should also include the date of the absence(s), student's first and last name, teacher's name and the parent's signature.
3. **Unexcused Absence:** If a note is not received upon the student's return to school, the student's absence will be counted as un-excused.
4. **Pre-arranged Absence:** For a family trip in which the student will miss more than three (3) days of school, the Pre-School Director should be notified at least one (1) week in advance in writing. Approval will be given according to the number of days that the student has missed.

TARDIES

Promptness and punctuality are essential for a quality education. Therefore, Kirkwood Presbyterian Center for Early Learning has established the following policies to encourage students to be at school, in class and prepared for class when it is time to begin class. Parents of students with excessive tardiness will be required to meet with the Pre-School Director. Excessive tardiness will result in students being dismissed from the program.

1. **Tardy Defined:** A student will be considered tardy to school if he is not in the classroom by (8:50).
2. **Excused Tardy:** A note from the parent will be required to explain why the student is tardy to school. The note must always state the reason for the tardy and include the parent's signature.
3. **Un-excused Tardy:** If a note is not received upon the student's late arrival to school, the student will receive an un-excused tardy slip in the daily folder.
4. **Excessive tardy:** More than 4 tardys in a 30-day period will constitute an absence.

I have read the Attendance Policy and agree to cooperate with this policy as set forth at Kirkwood Presbyterian Center for Early Learning.

Print Parent/Guardian Name _____

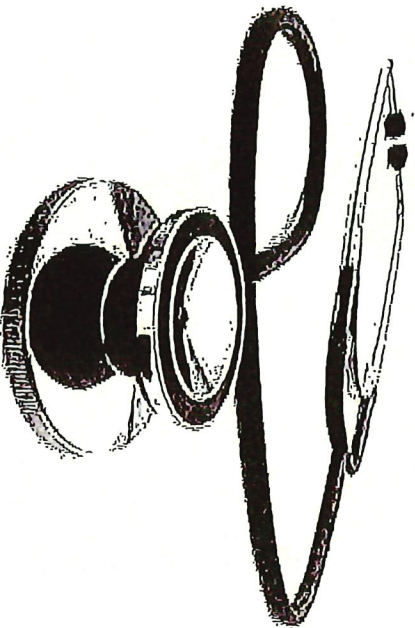
Parent/Guardian Signature _____ Date _____

Print Parent/Guardian Name _____

Parent/Guardian Signature _____ Date _____

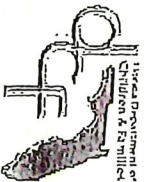
What is the influenza (flu) virus?

Influenza ("the flu") is caused by a virus which infects the nose, throat, and lungs. According to the US Center for Disease Control and Prevention (CDC), the flu is more dangerous than the common cold for children. Unlike the common cold, the flu can cause severe illness and life threatening complications in many people. Children under 5 who have the flu commonly need medical care. Severe flu complications are most common in children younger than 2 years old. Flu season can begin as early as October and last as late as May.



How can I tell if my child has a cold, or the flu?

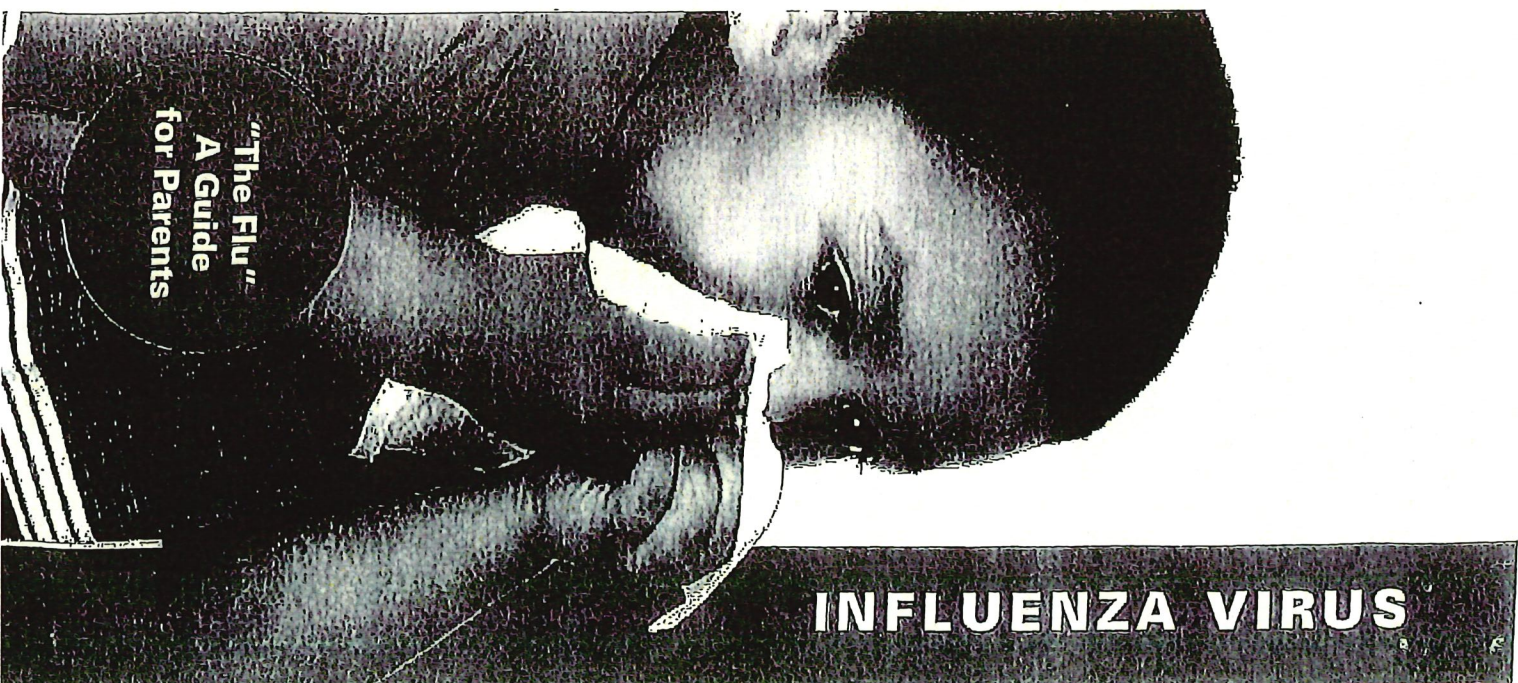
Most people with the flu feel tired and have fever, headache, dry cough, sore throat, runny or stuffy nose, and sore muscles. Some people, especially children, may also have stomach problems and diarrhea. Because the flu and colds have similar symptoms, it can be difficult to tell the difference between them based on symptoms alone. In general, the flu is worse than the common cold, and symptoms such as fever, body aches, extreme tiredness, and dry cough are more common and intense. People with colds are more likely to have a runny or stuffy nose. Colds generally do not result in serious health problems, such as pneumonia, bacterial infections, or hospitalizations.



For additional information, please visit www.myflorida.com/childcare or contact your local licensing office below:

CE/PI 175-70, June 2009

This brochure was created by the Department of Children and Families in consultation with the Department of Health.



INFLUENZA VIRUS

**"The Flu"
A Guide
for Parents**

During the 2009 legislative session, a new law was passed that requires child care facilities, family day care homes and large family child care homes provide parents with information detailing the causes, symptoms, and transmission of the influenza virus (the flu) every year during August and September.

My signature below verifies receipt of the brochure on *Influenza Virus, The Flu, A Guide to Parents*:

Name: _____
 Child's Name: _____
 Date Received: _____
 Signature: _____

Please complete and return this portion of the brochure to your child care provider, in order for them to maintain it in their records.



What should I do if my child gets sick?

Consult your doctor and make sure your child gets plenty of rest and drinks a lot of fluids. Never give aspirin or medicine that has aspirin in it to children or teenagers who may have the flu.

CALL OR TAKE YOUR CHILD TO A DOCTOR RIGHT AWAY IF YOUR CHILD:

- Has a high fever or fever that lasts a long time
- Has trouble breathing or breathes fast
- Has skin that looks blue
- Is not drinking enough
- Seems confused, will not wake up, does not want to be held, or has seizures (uncontrolled shaking)
- Gets better but then worse again
- Has other conditions (like heart or lung disease, diabetes) that get worse



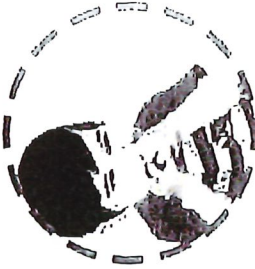
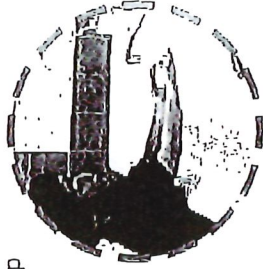
How can I protect my child from the flu?

A flu vaccine is the best way to protect against the flu. Because the flu virus changes year to year, annual vaccination against the flu is recommended. The CDC recommends that all children from the ages of 6 months up to their 19th birthday receive a flu vaccine every fall or winter (children receiving a vaccine for the first time require two doses). You also can protect your child by receiving a flu vaccine yourself.

What can I do to prevent the spread of germs?

The main way that the flu spreads is in respiratory droplets from coughing and sneezing. This can happen when droplets from a cough or sneeze of an infected person are propelled through the air and infect someone nearby. Though much less frequent, the flu may also spread through indirect contact with contaminated hands and articles soiled with nose and throat secretions. To prevent the spread of germs:

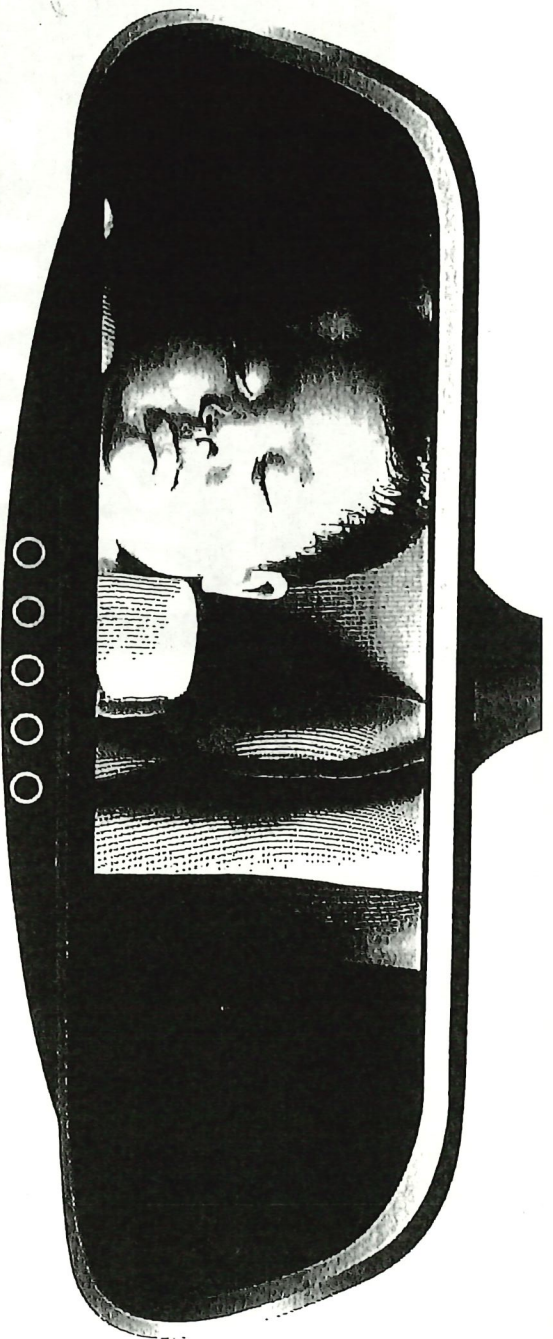
- Wash hands often with soap and water.
- Cover mouth/nose during coughs and sneezes. If you don't have a tissue, cough or sneeze into your upper sleeve, not your hands.
- Limit contact with people who show signs of illness.
- Keep hands away from the face. Germs are often spread when a person touches something that is contaminated with germs and then touches his or her eyes, nose, or mouth.



When should my child stay home from child care?

A person may be contagious and able to spread the virus from 1 day before showing symptoms to up to 5 days after getting sick. The time frame could be longer in children and in people who don't fight disease well (people with weakened immune systems). When sick, your child should stay at home to rest and to avoid giving the flu to other children and should not return to child care or other group setting until his or her temperature has been normal and has been sign and symptom free for a period of 24 hours.

For additional helpful information about the dangers of the flu and how to protect your child, visit: <http://www.cdc.gov/flu/> or <http://www.immunizeflorida.org/>



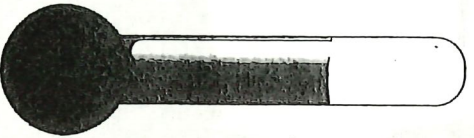
FACTS ABOUT

HEATSTROKE:

It only takes a car **10 minutes** to heat up **20** degrees and become deadly.

Even with a **window cracked**, the temperature inside a vehicle can cause heatstroke.

The body temperature of a child increases **3 to 5 times faster** than an adult's body.



⚠️ PREVENTION TIPS:

- Never leave your child alone in a car and call 911 if you see any child locked in a car!
- Make a habit of checking the front and back seat of the car before you walk away.
- Be especially mindful during hectic or busy times, schedule or route changes, and periods of emotional stress or chaos.
- Create reminders by putting something in the back seat that you will need at work, school or home such as a briefcase, purse, cell phone or your left shoe.
- Keep a stuffed animal in the baby's car seat and place it on the front seat as a reminder when the baby is in the back seat.
- Set a calendar reminder on your electronic device to make sure you dropped your child off at child care.
- Make it a routine to always notify your child's child care provider in advance if your child is going to be late or absent; ask them to contact you if your child hasn't arrived as scheduled.

During the 2018 legislative session, a new law was passed that requires child care facilities, family day care homes and large family child care homes to provide parents, during the months of April and September each year, with information regarding the potential for distracted adults to fail to drop off a child at the facility/home and instead leave them in the adult's vehicle upon arrival at the adult's destination.



My signature below verifies receipt of the Distracted Adult brochure

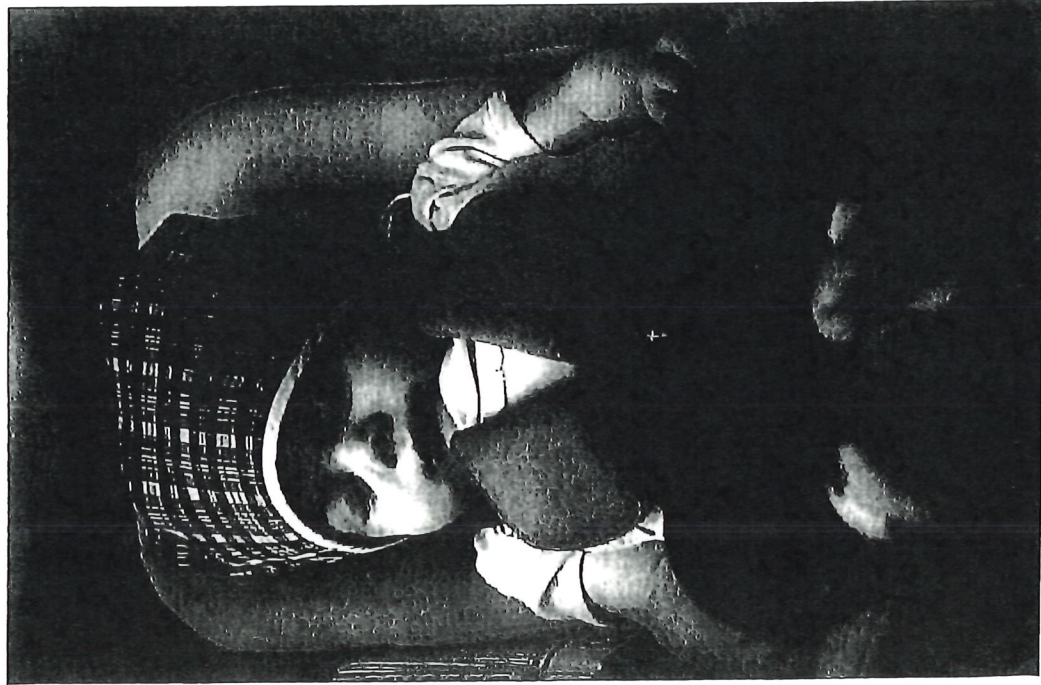
Parent/Guardian:

Child's Name:

Date:

Please complete and return this portion of the brochure to your child care provider, to maintain the receipt in their records.

A change in daily routine, lack of sleep, stress, fatigue, cell phone use, and simple distractions are some things parents experience and can be contributing factors as to why children have been left unknowingly in vehicles...



When life happens... Don't be a
**DISTRACTED
ADULT**



Developed by:

The Office of Child Care Regulation

www.myflfamilies.com/childcare
CF/PI 175-12, May 2018

