



Michigan Tech Preschool, Inc.
Daniell Heights Community Center
2000 Woodmar Dr.
Houghton, MI 49931
(906) 487-2720



February 5, 2019

Dear Preschool Parents/Guardians,

Thank you for your interest in Michigan Tech Preschool, Inc. We are excited to start planning for the 2019-2020 school year and our 61st class! We offer an interactive, play-based curriculum and highly qualified, experienced teachers who do an outstanding job of preparing the children for kindergarten.

Open registration for the 2019-2020 school year begins at 9 a.m. April 2nd for current and previous preschool families, and at 9 a.m. April 9th for new preschool families. A submitted application and \$50 deposit will hold your child's place on a first come, first served basis. To be fair to everyone, I cannot accept any deposits before April 2nd at 9 a.m.

Enclosed are the following forms:

- Enrollment Application
- Policy Manual
- Parent Responsibilities Statement
- Health Appraisal Form

Please complete the **Enrollment Application** and bring or send it with a \$50 non-refundable deposit (payable to Michigan Tech Preschool, Inc.) to the preschool on the correct enrollment date.

Please review the **Policy Manual and the Parent Responsibilities Statement** and initial the enrollment application indicating that you have read and understand our policies and parent responsibilities.

Also enclosed is the Health Appraisal Form that must be signed by a physician. A current physical (HeadStart physicals are accepted) with an up-to-date immunization record will be required on the day of registration (Sept. 2019 – date TBA). Please note that a completed Health Appraisal form is **required every two years**. If your child has not seen his/her physician recently, you may want to schedule a school physical appointment soon since these appointments fill quickly as the beginning of the school year approaches.

The spring parent meeting is scheduled for April 24th at 6 P.M at the preschool. We encourage all new and returning families to attend this meeting. We will vote on new board members and on any policy changes at that time.

Michigan Tech Preschool is proud to offer a multi-cultural, family-oriented learning environment where many children and adults form long-lasting friendships. We look forward to working together in the coming school year! If you have any questions, please feel free to call or email.

Thank you,
Cristen LaBar

Cristen LaBar
Michigan Tech preschool, Inc. Registrar
Clabar@albion.edu or (248)342-1447

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 Houghton, MI 49931



For office use Only:
 Date _____ Time _____ Check# _____ Cash _____

Student Information

Name (First, Last)	
Nick Name	
Date of Birth	
Street Address & City	
Primary Phone number	

Class Schedule - Select preferred age appropriate class

Michigan Tech Preschool reserves the right to cancel sessions or reassign students based on enrollment.

- M/W/F 8:30-11:30 (4 & 5 year olds)
- M/W/F 12:30-3:30 (4 & 5 year olds)
- M/W/F 12:30-3:30 & Tu/Th 12:30 - 3:00 (4&5 year olds mixed with 3's on Tu/Th)
- Tu/Th 9:00 -11:30 (3 & 4 year olds)
- Tu/Th 12:30 - 3:00 (3& 4 year olds)

Parent 1 (Primary Contact)

Name (First, Last)	
Phone	
Email	
Employer	
Work Phone	

Tuition 2019-2020

- General Public
- 3 days a week (\$ 152.5/month or \$ 610/semester)
- 2 days a week (\$ 106.50/month or \$ 426/semester)
- 5 days a week (\$259/month or \$ 1036/ semester)

Parent 2

Name (First, Last)	
Phone	
Email	
Employer	
Work Phone	

How did you hear about us?

- Radio Word of mouth
- Newspaper Preschool event
- Facebook Other event
- Website Alumni Family

Children must be toilet trained (please read school policy) and be 3 years old by December 1 for the 3-4 year olds class or 4 years old by December 1 for the 4-5 year olds class.

Our Policy

Please initial the following to confirm that you have read and understood the POLICY MANUAL and the PARENT RESPONSIBILITIES document (enclosed seperately).

- I understand that in order to enroll my child in the preschool, s/he must be toilet trained and age 3 by December 1 _____
- Early drop-off and late pick-up of children cuts into teacher preparation time. I understand that I am required to drop-off and pick up children on time. _____
- I understand that snacks during preschool are provided by parents and that each family is encouraged to sign up to provide snacks. _____
- To avoid any allergic reactions, all snacks must be free of peanuts, peanut oil and may not be processed in a facility that uses peanut or tree nuts. _____
- I understand that a \$25 late fee will be assessed for the first late tuition payment and \$50 for subsequent late payments. _____
- I understand that families are required to fundraise \$100 each semester and will participate in fundraising or our family will purchase a fundraiser buyout. _____



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POLICY MANUAL (2/2019)

1. Introduction

Preschool provides a bridge between a preschooler's home and his/her future school experience. Michigan Tech Preschool, Inc. gives children the opportunity to socialize with other children their age and to learn new skills, and it provides them with a wide range of experiences to help develop their personalities in a positive way.

Michigan Tech Preschool, Inc. is a cooperative preschool that relies upon its member parents' support for its continued success. An important key to a good preschool is interested parents/guardians who care about what happens in school and are willing to share their ideas, talents, and time to make the school better.

2. Eligibility

Toilet-trained children between the ages of 3 and 5 years, on or before December 1, are eligible to attend. Children who are toilet trained and younger than 3 before December 1 may be admitted at the discretion of the teacher. Toilet-trained means that the child wears cloth underwear and voluntarily uses the restroom without prompting.

3. Admission Policy

Michigan Tech Preschool, Inc. does not discriminate on the basis of race, color, religion, gender, or national and ethnic origin in admission or policies.

4. Fundraising

Because Michigan Tech Preschool, Inc. is a non-profit organization; our only sources of revenue are tuition and fundraising. Families may either buy out (\$100 / semester) of the fundraising requirement or are **required** to participate in fundraiser events. For complete fundraising requirements, please see the "Michigan Tech Preschool Parent Responsibilities" document.

5. Tuition

A \$50 nonrefundable deposit is required at the time of application. The deposit will be applied to the LAST payment of the school year's tuition. Tuition covers the costs of rent, utilities, supplies, salaries, and cleaning of the facilities.

Tuition is determined yearly by the board of

directors. Please see the Enrollment Form for the current year's rates. Payment plans are available.

Discounts

- All Daniel Heights residents are eligible for a 50% tuition discount.
- If two or more children are enrolled from the same family, the oldest child will be charged full tuition and any additional children will be charged 70% tuition.

If a family qualifies for more than one discount, you are allowed to choose only one discount to be applied to your tuition for the school year. You must inform the tuition coordinator of your preference.

Additional Charges

Tuition Statements include due dates and amounts based on your selected payment plan. If payment is received more than a grace period of 7 days after the due date, a late fee will be assessed according to the following schedule per semester.

-\$25 for first late payment

-\$50 for subsequent late payments

-\$20.00 for checks returned for non-sufficient funds.

The Board reserves the right to discontinue monthly payment plans for the second semester if tuition payments are repeatedly late beyond the grace period.

6. Trial Period

A two-week trial period is available for every child to help determine readiness for preschool. If your child elects not to stay beyond the trial period, a percentage of tuition will be refunded.

7. Withdrawal Policy

In the event a parent or guardian must withdraw a child from the preschool mid-semester, a refund of tuition will be considered only if six or more weeks remain in a 15-week semester. The amount of the refund shall be no more than 33% of the full semester tuition. There will be no refunds if less than six weeks remain in the semester.

8. Discipline

The staff uses positive methods of behavior

management, which encourage self-control, self-direction, self-esteem, and cooperation. These methods include: redirection of child to another activity; reminder of rules; lessons focusing on sharing, manners and emotions; and if necessary, time out in a thinking chair for no more than 5 minutes.

9. Dismissal

As determined by the teacher, parents will be notified of serious behavior problems (behavior detrimental to the safety of others). If such problems cannot be resolved to the satisfaction of the teacher within a reasonable time period, Michigan Tech Preschool, Inc. has the right to dismiss the child.

10. Health Rules

If your child is ill, please do not send him/her to school on that day. Besides spreading illness to others, a sick child does not enjoy being at school. If your child becomes sick during the school day, you will be notified and asked to take your child home. If your child contracts a communicable disease (e.g. chickenpox, influenza, pertussis), please notify the preschool so that a notice can be posted to the parents or guardians of other preschool children.

If your child has a fever (≥ 100.4 F) please do not send him or her to school until they are fever free and off analgesic medications (e.g. Tylenol, Ibuprofen) for 24 hours.

If a child is **NOT** immunized and exposed to a contagious disease, he or she must not attend school until after the incubation period for the disease is over.

11. Snacks

Snacks for children are provided on a voluntary basis by parents/guardians. Snack time in the preschool program is considered an educational experience for the children. It provides an opportunity to teach nutrition and simple manners. It is also a time during the day when the children are all together for quiet conversation. Snacks will be nutritious. For birthdays and special holidays, parents are encouraged to provide *nutritious snacks*. Because of licensing laws, home baked goods are not allowed. **To avoid any allergic reactions, all snacks must be free of peanuts, peanut oil and may not be processed in a facility that uses peanuts or tree nuts.** (Please review snack policy for more details)

12. Snow Days

The preschool will close for inclement weather on any day that the Copper Country Intermediate

School District decides that Houghton Keweenaw County Schools are closed. If the public school has a late start, the preschool **will** commence at 9:30am. If there is an early dismissal of the public schools in the morning, there **will be no** preschool afternoon class. If there is an early dismissal in the afternoon of the public schools, after the preschool session has begun, the preschool **will** remain open, but we encourage parents to pick up their children.

13. Field Trips

Field trips will either be on foot or the children will be transported by school bus. Parent volunteers are always appreciated.

14. Class Sessions

Classes run for two semesters. At full enrollment, two sessions are held each day. While every effort is made to accommodate requested schedules, Michigan Tech Preschool reserves the right to cancel sessions or reassign students based on estimated enrollment.

Tentative schedules for 2019-2020

3/4 year old

T/TH 9:00 – 11:30 A.M. ~OR~ 12:30 - 3:00 P.M.

4/5 year old

M/W/F 8:30 – 11:30 A.M. ~OR~ 12:30 – 3:30 P.M.

Additional hours for 4/5 year old

T/TH 12:30 – 3:00 P.M.

The doors of the preschool will be open for student drop-off at the beginning of each session. Children must be dropped off and picked up on time (**NOT** early or late). Time between classes is necessary for teacher's lunches and preparation for the next class. We ask that all parents respect this important time and be punctual.

15. Parking

During drop-off and pick-up times, parents are asked to park in the designated areas, "Visitor Parking" or in the few short-term spaces available near the playground entrance. Michigan Tech University Housing will tow cars parked in spots designated as "Staff Parking" or in the street in front of the playground.



Michigan Tech Preschool Parent Responsibilities

Michigan Tech Preschool, Inc. is a parent cooperative preschool. By definition, a cooperative preschool is organized by a group of families who hire a trained teacher(s) to provide their children with a quality preschool experience. The preschool is administered by a volunteer board of directors and maintained by all the parents on a non-profit basis. Parents assist the teachers in a variety of ways with each school requiring different levels of participation in the school.

Michigan Tech Preschool, Inc. asks that, when possible, families participate in their child's preschool experience by:

- 1) Providing snacks on a routine basis for a social snack time according to the snack policy which will be provided with registration documents in the fall
- 2) Coming to the classroom 15-30 minutes prior to pick-up time to help clean up the classroom and dress children for outside play
- 3) Helping with playground maintenance upon request

Michigan Tech Preschool depends on fundraising from parents, please see **Fundraising Requirements** on the following page.

Michigan Tech Preschool offers and encourages other opportunities to get involved in the Preschool. Parents Can:

- 1) Volunteer in the classroom
- 2) Share their talents with the teachers/directors and children
- 3) Offer to be a substitute teacher when needed
- 4) Participate in the management of the Preschool by serving on the board
- 5) Attend Parent Meetings to vote on any required actions
- 6) Share your opinions with teachers/directors and board members
- 7) Volunteer with a variety of projects throughout the year – such as cleaning or organizing
- 8) Assist with field trips

Michigan Tech Preschool offers a wonderful environment for learning, playing, and growing because of our caring teachers and our parents. If you can think of other ways to become involved in the preschool, please speak to a teacher or board member. Thank you for your participation in your child's education and Michigan Tech Preschool.

Families can raise money for the preschool by buying scholastic book or artsonia projects and make purchases with amazon smiles. At this time these purchases do not go toward your fundraising requirements but the funds are appreciated.

Fundraising Requirements

Michigan Tech Preschool, Inc. is a non-profit, cooperative preschool that depends on fundraising to keep tuition low. Parents have 4 choices in regards to fundraising:

1. Volunteer 8 hours per semester at fundraising events, earn \$100 per semester in fundraising sales or a combination of the two.
OR
2. Serve as a board member, Econo Foods Receipts Coordinator or on the Fundraising Committee (1-year commitments) – deposit is waived for both semesters.
OR
3. Serve as a fundraiser chair for a specific event – deposit is waived per semester served.
OR
4. Opt out of fundraising and pay \$100 per semester.

The “Econo Foods: We Care” program will provide 1% cash-back to the preschool for all collected receipts. We will offer the opportunity for families to sign up for shifts at Econo Foods to collect receipts from customers as they exit. **Additionally, please save your own Econo Foods receipts and collect receipts from family and friends.** There is a collection envelope on the bulletin board as you enter the preschool. This is an easy and convenient way to help the school raise funds. It has raised about \$1000 for the preschool annually.

Details of fundraising events are subject to change, but information will be emailed via the list serve or sent home with your child as events are scheduled. Some examples of sales opportunities in the past have been Dutchmill Bulb Sales and Saykyll’s Chocolates.

We encourage parents to help as much as possible to benefit your child and the preschool. If you have any fundraising ideas, please share them with the board. We depend on parent support for the success of our school!

HEALTH APPRAISAL

Dear Parent or Guardian: The following information is requested so that the school can work with the parent to meet the physical, intellectual and emotional needs of the child. Fill out the information requested in Section I. Section III may be certified by the transcription of information from the certificate of immunization. The remaining sections are to be completed by a doctor, nurse and dentist. **(BE SURE TO BRING YOUR CHILD'S IMMUNIZATION RECORDS TO THE EXAMINATION.)**

PERSONAL

CHILD'S NAME (Last, First, Middle)	DATE OF BIRTH (mm/dd/yy) / /
ADDRESS (Number & Street) (City) (ZIP Code) MI	TODAY'S DATE (mm/dd/yy) / /
PARENT/GUARDIAN (Last, First, Middle)	HOME TELEPHONE NUMBER ()
ADDRESS (Number & Street) (City) (ZIP Code) MI	WORK TELEPHONE NUMBER ()

SECTION I - HEALTH HISTORY

Yes	No	Resolved	# Is your child having any of the problems listed below?	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1 Allergies or Reactions (for example, food, medication or other)	Birth History: Are there any current or past diagnosis(es) <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please describe: If yes, list medications: Was the health history reviewed by a health professional? <input type="checkbox"/> Yes <input type="checkbox"/> No Examiner's Initials: _____
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	2 Hay Fever, Asthma, or Wheezing	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	3 Eczema or Frequent Skin Rashes	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	4 Convulsions/Seizures	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	5 Heart Trouble	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	6 Diabetes	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	7 Frequent Colds, Sore Throats, Earaches (4 or more per year)	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	8 Trouble with Passing Urine or Bowel Movements	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	9 Shortness of Breath	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	10 Speech Problems	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	11 Menstrual Problems	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	12 Dental Problems: Date of Last Exam / /	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Other (please describe): _____	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Does your child take any medication(s) regularly?	
			Reason for Medication	
			_____ / /	
			Parent/Guardian Signature _____ Date _____	

SECTION II - PHYSICAL EXAMINATION, INSPECTION, TESTS AND MEASUREMENTS

Required for Child Care and Head Start / Early Head Start

Tests and Measurements

No	Yes	Was child tested for:	Test results:	Normal	Referred	Under Care	No	Yes	Was child tested for:	Test results:	Normal	Referred	Under Care
<input type="checkbox"/>	<input type="checkbox"/>	VISION Date: ___/___/___	Visual Acuity Muscle Imbalance Other: _____				<input type="checkbox"/>	<input type="checkbox"/>	HEIGHT & WEIGHT Other: _____	Height Weight Other: _____			
<input type="checkbox"/>	<input type="checkbox"/>	HEARING Date: ___/___/___	Audiometer Other: _____				<input type="checkbox"/>	<input type="checkbox"/>	HEMOGLOBIN / HEMATOCRIT BLOOD PRESSURE	Reading: _____			
<input type="checkbox"/>	<input type="checkbox"/>	URINALYSIS Date: ___/___/___	Sugar Albumin Microscopic				<input type="checkbox"/>	<input type="checkbox"/>	TUBERCULIN Date: ___/___/___	Type: _____ Neg.: <input type="checkbox"/> Pos.: <input type="checkbox"/> _____ mm			
<input type="checkbox"/>	<input type="checkbox"/>	BLOOD LEAD LEVEL Date: ___/___/___	Level _____ ug/dl				NOTE: Blood lead level required for all children enrolled in Medicaid must be tested at one and two years of age, or once between three and six years of age if not previously tested. All children under age six living in high-risk areas should be tested at the same intervals as listed above.						

Examinations and/or Inspections

Essential Findings Deviating from Normal:
Exam Date: ___/___/___

SECTION III - IMMUNIZATIONS

Statements such as "UP-TO-DATE" or "COMPLETE" will not be accepted. Admission to school may be denied on the basis of this information.*

VACCINES (Circle Type)	DATE ADMINISTERED MM/DD/YYYY		VACCINES (Circle Type)	DATE ADMINISTERED MM/DD/YYYY	
Hepatitis B (HepB)	1	3	Hepatitis A (HepA)	1	2
	2			2	3
DTaP/DTP/DT/Td	1	4	Influenza (IIV/LAIV)	1	4
	2	5		2	4
	3	6			
Tdap	1		Meningococcal (MCV4 / MPSV4)	1	2
Haemophilus Influenzae type b (HIB)	1	3	Human Papillomavirus (HPV9/HPV4/HPV2)	1	3
	2	4		2	
Polio (IPV/OPV)	1	3	OTHER Vaccines Specify Date & Type	Type of Vaccine(s)	Date of Vaccine(s)
Pneumococcal Conjugate (PCV7/PCV13)	1	3		1	
	2	4		2	
Rotavirus (RV1/RV5)	1	3	3		
Measles, Mumps, Rubella (MMR)	1	2	Indicate and attach physician diagnosis or laboratory evidence of immunity as applicable		
	2		*NOTE: According to Public Act 368 of 1978, any child enrolling in a Michigan school for the first time must be adequately immunized, vision tested and hearing tested. Exemptions to these requirements are granted for medical, religious and other objections, provided that the waiver forms are properly prepared, signed and delivered to school administrators. Forms for these exemptions are available at your provider office for medical waiver forms and through your local health department for nonmedical waiver forms.		
Varicella (Chickenpox)	1	2			
History of Chickenpox Disease? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, date: _____					
I certify that the immunization dates are true to the best of my knowledge					
_____			_____		____/____/____
Health Professional's Signature			Title		Date

SECTION IV - RECOMMENDATIONS

(Required for Child Care and Head Start/Early Head Start)

No	Yes	
<input type="checkbox"/>	<input type="checkbox"/>	Is there any defect of vision, hearing or other condition for which the school could help by seating or other actions? If yes, please explain:
<input type="checkbox"/>	<input type="checkbox"/>	Should the child's activity be restricted because of any physical defect or illness? If yes, check and explain degree of restriction(s): <input type="checkbox"/> Classroom <input type="checkbox"/> Playground <input type="checkbox"/> Gymnasium <input type="checkbox"/> Swimming Pool <input type="checkbox"/> Competitive Sports <input type="checkbox"/> Other
Other Recommendations		

SECTION V - DENTAL EXAMINATION AND RECOMMENDATIONS (OPTIONAL)

I have examined _____'s teeth. As a result of this examination, my recommendation for treatment is: _____

child's name

_____/_____/_____
Dentist's Signature Date

PHYSICIAN'S SIGNATURE

Examiner's Signature

_____/_____/_____
Date

Examiner's Name (Print or Type)

Degree or License

Number & Street

City

MI _____
ZIP Code

Telephone

Information required for:

Early On - Hearing and Vision Status; Diagnosis; Health Status

Child Care Licensing - Physical Exam, Restrictions, Immunizations

Head Start/Early Head Start - Determination that child is up-to-date on a schedule of age-appropriate preventive and primary health care, including medical, dental, and mental health. The schedule must incorporate the well-child care visit required by EPSDT and the latest immunizations schedule recommended by the Centers for Disease Control and Prevention, State, tribal, and local authorities. An EPSDT well-child exam includes height, weight, and blood tests for anemia at regular intervals based on age.

Developed in Cooperation with the Department of Health and Human Services, Education, Michigan American Association of Pediatrics, Early Childhood Investment Corporation, Child Care Licensing, Head Start, Michigan State Medical Society, Michigan Association of Osteopathic Physicians and Surgeons.