

2020-2021 PARENTAL AGREEMENT

1. Sisu agrees to provide early childhood education, early intervention and infant stimulation Monday through Friday during the school year between the hours of 8:30AM and 2:00PM. Individual schedule options and specific individual services will be outlined in the enrollment process and agreed upon based on the needs of the child and family and the availability of program slots and professional services. Center hours are from 6:30AM – 5:30PM for children services. This parent agreement will cover the summer services as well if offered.

Program Options:	Early Arrival:	6:30AM-8:30AM
	Early Education and Intervention Program:	8:30AM-2:00PM
	GA Pre-K:	8:30AM-3:15PM
	Extended Day	2:00PM-5:30PM

2. There is a 5-minute grace period after your child's program ends. After that time ends, there will be a flat fee charge for the following time periods in which staff supervises your child while waiting for you to pick them up.
 - 6 – 15 minutes late \$25.00 fee
 - 16 – 30 minutes late \$50.00 fee
 - 31 minutes or more \$75.00 fee

Late fees will be automatically billed to your tuition account. Excessive late pick up from the extended day program (3) for part time students, (6) for full time, may result in a reduction in days and/or withdrawal from the extended day program.

Late arrivals are disruptive to the instructional routine. Additionally, planning for activities and proper staff ratios for extended day are based on morning attendance counts. **Students must arrive by 9:30AM.** Prior notification of late arrival, along with a documented reason (doctor appointment, court, etc...) are required for your child to attend if arriving after 9:30AM. Community partners placing children on our site may be contacted to conference with families on the parent's ability to comply with the center hours of operation for classroom instruction. I acknowledge that it is my responsibility to comply with the center's attendance, tardy and late pickup notices/fees.

3. Sisu agrees to obtain written authorization from me, as legal guardian of the child (ren) before my child participates in routine transportation, field trips, special activities away from the facility and water related activities.
4. Sisu agrees to keep me informed of any incidents; including illnesses, injuries, adverse reactions to medications, etc. which include my child.
5. I agree that if my child is deemed unable to attend school based on the exclusionary policies in the Handbook that I will pick my child up from school within **one hour** of being notified of illness or injury. I understand that if I unable to be reached or unable to arrive in one hour that an emergency contact will be notified to pick my child up from school.
6. Before any medication is dispensed to my child, I will provide a written authorization which includes: date, name of medication, prescription number (if any), dosage, date and time of day medication is to be given. Medication will be in the original container with my child's name marked on it.
7. My child will not be allowed to enter or leave the facility without being escorted by the parent(s); person authorized by parent(s) or Sisu personnel. I understand that Sisu does not permit any children under the age of 12 to be left in a car, van, truck or bus unattended by an adult while on the Sisu campus. Children may not be left alone in the parking lot or in front of the building. Agency staff will support parents with multi-child issues at drop off and pick-up, if requested.
8. I acknowledge that it is my responsibility to keep my child's records current to reflect any significant changes as they occur; e.g. telephone number, work location, emergency contacts, child's physician, child's health status, infant feeding plans, immunization records, allergic conditions and physical, mental or emotional conditions that affect my child's participation. I understand my child's program enrollment may be suspended until current information is provided.
9. I agree to send food for my child if the snack(s) and meal, if applicable to program selected, are not compatible with my child's feeding plan as described in a doctor's note.
10. I understand that if enrolled in the Early Arrival program (6:30AM-8:30AM) my child will receive a breakfast meal if arriving prior to 8:15AM.

11. I understand that if my child is enrolled in the Birth to Three program I will provide my child's lunch in accordance with a feeding plan and/or Bright from the Start nutrition requirements.
12. I understand that if my child is enrolled in the Preschool program, I have the choice for my child to receive a "school lunch" or I may pack them a home lunch that meets the nutritional guidelines. I understand that if my child has a food allergy, sensitivity, and/or feeding risk, I may send my child's lunch in accordance with a specific physician's order but still meet the nutritional guidelines unless there are extreme circumstances. Per Sisu's catering agreement, "school lunches" must be ordered by 9:30AM. I understand that if my child arrives after 9:30AM I am responsible for providing a packed lunch from home for my child unless prior contact has been made notifying Sisu of late arrival. **All packed lunches from home are required to meet nutrition guidelines per licensing agency.**
13. Sisu's emergency transport procedures indicate that children will be taken by ambulance to Northeast Georgia Medical Center. I agree with this transport policy. I will provide physician phone numbers on required enrollment forms.
14. Sisu agrees to provide enrollment and intake procedures that include opportunities for parents to express their child's strengths, weaknesses and individual needs as well as parents' goals for their child. Special considerations for care will be discussed during intake and throughout the child's enrollment in the program, including screening for Admissions/Eligibility & Placement in the early intervention treatment program. I understand that my child's first day of school may occur after a placement diagnostics process.
15. The custodial parent(s) shall, at any time the child is in attendance, be permitted access to child care areas of the center and shall make his or her presence known to center staff. Parents who visit regularly or for extended periods of time will be asked to complete the center volunteer process, including a background check, signed confidentiality statements, etc.
16. Sisu agrees to provide a description of tuition fees upon request by parents and during intake enrollment. I agree to pay charges for my child's program in accordance with those policies. I understand tuition will be billed weekly for services to be provided unless an agreed upon payment arrangement has been made with Finance Department. I agree that no tuition refunds will be given if I withdraw my child before the end of a month.
17. If my child receives therapy, I agree to the policies and procedures identified in the handbook and therapy intake agreement.
18. Sisu will take attendance daily to support the center's emergency and evacuation procedures.
19. Parents and individuals authorized to drop-off and pick-up students must sign-in and out daily using an electronic system or on an official Sisu form. Parents are responsible for providing sign-out procedures to authorized pick-up persons, emergency contacts and authorized temporary pick-up persons.
20. I understand the center must comply with the Bright from the Start (OSR) rule for licensed centers related to infant sleep safety requirements. All infants, defined as children under the age of 12 months must be placed to sleep on the infant's back unless there is a written physician's statement on file that authorizes another sleep position.

Initial each line and sign below.

_____ ***I agree to adhere to all center policies and procedures outlined in the Parental Agreement and Sisu Parent Handbook.***

_____ ***I acknowledge that I have reviewed and understand Sisu's Notice of Privacy Practices.***

PARENT SIGNATURE

I, as custodial parent/guardian of the child indicated below enrolling in the Sisu program, have read, understand and will abide by the PARENTAL AGREEMENTS, CENTER POLICIES outlined in Parent Handbook and NOTICE OF PRIVACY PRACTICES throughout the duration of said child's enrollment in the program.

NAME OF ENROLLED CHILD: _____ PARENT SIGNATURE: _____

INTAKE TEAM MEMBER SIGNATURE: _____ DATE: _____