



PROSPECTIVE STUDENT INFORMATION

All students must be immunized. We do not accept Religious Exemption.

Date: _____

Father Last Name	Father Name	Father Employment
Father Work Phone	Father Cell Phone	Father Email
Mother Last Name	Mother Name	Mother Employment
Mother Work Phone	Mother Cell Phone	Mother Email
Address	City	State / Zip
Home Phone		

Children	Grade	School Year	Birthday
_____	_____	_____	_____
_____	_____	_____	_____

Presently Enrolled At School: _____
 City: _____

Reason for Considering St. John's Lutheran School _____

Current Church Membership _____

Interest in Joining St. John's Lutheran Church ____ Yes ____ No

How did you hear about St. John's Lutheran School _____

Office Use:

Contact Log

Date	Tour	Special Notations

St. John's Lutheran Preschool Application Checklist

Each item must be completed and submitted to the school office before the application will be considered complete. **No student will be allowed to start school until all forms are in students file. All students must be immunized. We do not except Religious Exemption.**

- Completed Application
- Registration Fee* Curriculum Fee*
- Completed Auto-Draft Form
- Tuition & Fees Form
- Extended Care Program
- Dr. Signed Medical Report Form
- Copy of Updated Immunization Record
- Photocopy of Birth Certificate
- Signed Permission/Release Form
- Signed Discipline Policy Form
- Signed Toileting Policy Form
- Signed Sick Policy Form
- Signed Preschool Handbook Form
- Signed EMP Policy Form
- Signed Shaken Baby Syndrome Policy Form
- Parental Pledge
- Parental Code of Conduct



PRESCHOOL/TRANSITIONAL KINDERGARTEN TUITION & FEES

2022-2023

St. John's Preschool and Transitional programs are 10 months programs which follow our school calendar. *

Non-Refundable Fees

Registration Fee: \$250 per student (due at acceptance to hold spot)

Curriculum Fee: \$150.00 (due before July 31st)

Tuition: Yearly tuition may be paid in 10 monthly installments as listed below*; (Note we may arrange various installment plans, e.g., twice per year)

School Day (8:00am – 3pm): \$5600 (\$560 for 10 payments)

Half Day Monday – Friday (8:00am – 12:00pm): \$3900 (\$390 for 10 payments)

Extended Care Fees for Half Day and School Day Students: \$7.00 per hour or any part of an hour.

Full Day and School Day hot lunches (optional): \$4.50 per lunch per student; and are to be pre-paid. Parents are responsible for supplying a student with a nutritious lunch daily while in school.

Tuition Payments:

Tuition Payments are processed by auto draft and are due on the 6/7 of each month beginning August 1st. All payments for hot lunch, extended care, are billed after the 5th of each month. Late Fees are 10% of account balance and will be applied and due immediately.

All account balances must remain current to maintain enrollment, for re-enrollment and/or to sign up for any camps. Accounts that become 30 days past due may result in your child(ren) being suspended from St. John's Lutheran School.

Enrollment after first day of school: Registration, Curriculum and first month of tuition are due at time of registration.

Banking Fees: will be applied to your account for checks returned or auto drafts denied due to insufficient funds.

Withdrawal from school: To terminate enrollment, parents must fill out the Intent to Withdraw Form. In the event of student withdrawal after registration, all accounts must be paid up to and including the month in which the student is withdrawn. If the full year was paid in advance, only the equivalent remaining tuition installments are refundable. There are no refunds of any kind after March 1st of the current school year.

I HAVE READ, UNDERSTAND AND AGREE TO BE RESPONSIBLE FOR PAYING REGISTRATION, CURRICULUM FEES, TUITION, AND ANY PENALTIES AS DESCRIBED ABOVE.

Parent or Guardian Signature

Date



2022-2023
Extended Care Program
Preschool and Transitional Kindergarten

The preschool offers a before and after school childcare program for children in preschool and Transitional Kindergarten who attend St. John's.

Mornings: Doors open at 7:30 am. There is no charge for students for morning care.

After School: Students not picked up by 12 pm (Half Day) or 3:00 pm (School Day) can stay and they will be properly supervised until the parent arrives. A charge of \$7.00 per hour will be added to your monthly statement. All charges will be billed in hourly increments.

For the convenience of our parents who are using our School Day option, we offer monthly extended care and "drop-in" extended care. Extended care is available from dismissal time 3:00pm until 6:00pm. Please select from below the program that best fits your childcare needs.

Option for School Day Care Only:

I wish to enroll my child _____ in the Monthly Extended Care Program. I agree to pay a monthly fee of \$250.00 per child. Please give a one month written notice to withdraw.

I wish to enroll my child _____ in Extended Care for "drop-in" (occasional use only) at the rate of \$7.00 per hour per. I will notify my child's teacher if he/she will be staying for extended care.

Parent Signature _____ Date _____

2415 Silas Creek Parkway, Winston-Salem, NC 27103
(336) 725-1651
StJohnsFalcons.org



Complete the entire application below, and please don't forget to your signature.

Attach a VOIDED check to this completed application if using bank draft.

Authorization for Auto Draft

Auto Draft is an automatic bank account or credit card withdrawal system for paying your monthly tuition.

I authorize St. John's Lutheran School and my financial institution to deduct from my bank account the total amount of my monthly bill on the 1st business day of each month starting August 1 and ending on May 1.

Last Name _____ First Name _____ MI _____

Name of Financial Institution _____

Bank Routing # _____

Bank Account # _____

Account to be drafted (Check one) _____ Checking _____ Savings.

Auto Draft Permission for: (Initial Applicable)

_____ Tuition _____ Extended Care Fees _____ Lunch Fees _____ Camp Fees

Attach VOIDED Check:

Signature _____

Date _____

A fee will be applied to your account for non-sufficient drafts. This fee will be based upon the amount the bank charges St. John's.



Dear Prospective Preschool Parents,

I am delighted that you are considering St. John's as your child's preschool! St. John's Preschool has over 40 years of experience providing a safe and nurturing environment for children. Loving, trained, and experienced teachers nurture each child's social, emotional, developmental, academic, and spiritual growth. Children learn everything from Biblical narratives and the basics of the Christian faith to the foundations of early education. Children grow in social development, such as sharing with others and practical self-help skills. During all the learning, children and staff also have loads of fun and value the importance of play!

Play is a central part of the learning environment. Through hands on activities in key developmental-play areas, children explore and learn with the guidance of teachers and assistants. These play activities are designed to offer many choices for the children.

In addition to learning through play, children participate in circle time, where they learn months of the year, days of the week, weather, shapes, colors, numbers, letters, counting, etc. For our Transitional Kindergarten class, we incorporate more structured teacher-led activities (including beginning writing).

While the preschool offers a structured, interactive preschool morning, learning and play can be extended into the afternoon hours for children whose families may want additional structure and learning in their child's day or for children whose families may need full time care.

Please read through the information in this folder, I am available to answer any questions you may have as you make this important decision. You may call or e-mail me anytime. I look forward to partnering with you in your child's early education as well as welcoming you to the St. John's Family.

Serving Christ and His kids,

Sonia Davidson

Preschool Director
soniadavidson@live.com
336-413-6304



Application for Enrollment 2022-2023 Preschool/Transitional Kindergarten

All students must be immunized. We do not except religious exemption.

Child's Name _____ Date of Birth ____ / ____ / ____

Street Address _____ City State Zip _____

Male/Female ____ Race/Ethnic Group: _____ Is child adopted? ____ Home Phone _____

Child lives with: ____ Both Parents Mother Father ____ Other

Father's Name _____ Mother's Name _____

Employer _____ Employer _____

Work Phone # _____ Work Phone # _____

Cell Phone # _____ Cell Phone # _____

Email _____ E-mail _____

Church Membership _____ Church Membership _____

Parents' Marital Status: ____ Married ____ Widowed ____ Single ____ Separated ____ Divorced ____ Remarried

My child will be enrolling for (check one):

Preschool 3's and 4's: _____ Half Day (M-F 8:00-noon) _____ School Day (8:00-3:00)

Transitional Kindergarten: _____ Half Day (M-F 8:00-noon) _____ School Day (8:00-3:00)

If child is enrolling in Half Day program, will child occasionally stay for nap? Yes / No

Child's shirt size: _____ youth extra small _____ youth small _____ youth medium

Name of person who will be financially responsible to pay all fees and tuition charges _____

List any fears, unique behaviors, etc. your child may have: _____

What discipline methods do you use at home that would be helpful for us to know (e.g. time out, rewards, certain phrases or words, etc.) _____

I have received and read a copy of the state of North Carolina Child Care Laws: YES NO



Emergency Care and Desired Action Information

Does the child have any known allergies? Yes No If yes, please explain _____

Does the child have physical handicaps Yes No If yes, please explain _____

List any maintenance medications: _____

Preferred Hospital _____

In case of serious injury/accident or accident requiring immediate medical attention, student will be taken to nearest hospital.

Health Insurance

Carrier _____

Policy # _____ Group # _____

Name of Child's Physician _____ Office Phone # _____

Whom may we release your child to in case of illness, emergency or someone besides yourself picking up your child? (For your child's protection photo ID is required): When a parent is called because the child has become sick at school, the child must be picked up within an hour. Also, the child cannot return the next day and/or after fever has broken for 24 hours.

Name _____

Relationship _____ Home # _____ Work # _____ Cell # _____

Name _____

Relationship _____ Home # _____ Work # _____ Cell # _____

Name _____

Relationship _____ Home # _____ Work # _____ Cell # _____

I give permission to St. John's Lutheran Preschool/School and its staff to administer First Aid and/or CPR if needed. I understand that all preschool staff members are First Aid and CPR certified. I also give permission to St. John's Lutheran Preschool/School and its staff to obtain medical treatment in the event of an emergency. I agree that St. John's Preschool/School may authorize the physician of their choice to provide emergency care in the event neither parents nor the child's physician can be contacted immediately. I understand that we, the legal guardians, will be contacted immediately in the event of an emergency.

I have read and discussed application/practices and policies/procedures with the Preschool Director. I accept the practices and policies of St. John's Lutheran Preschool and School. I will abide by the educational and financial policies herein set forth and by the regulations and administration.

Parent/Guardian signature: _____ Date _____



Child's Medical Report

Name of Child _____ Birth date _____

Name of Parent/Guardian _____

Address of Parent/Guardian _____

I. MEDICAL HISTORY (may be completed by parent)

Does the child have any allergies? _____ yes _____ no If yes, what? _____

Is child currently under a doctor's care? _____ yes _____ no If yes, for what reason _____

Is the child on any continuous medication? _____ yes _____ no If yes, what? _____

Any previous hospitalizations or operations? _____ yes _____ no If, yes, when and for what? _____

Any history of significant previous diseases or recurrent illness? _____ yes _____ no

Diabetes _____ yes _____ no Convulsions _____ yes _____ no Heart Trouble _____ yes _____ no

If others; what/when? _____

Does child have any physical disabilities? _____ yes _____ no If yes, please describe _____

Does child have any mental disabilities? _____ yes _____ no If yes, please describe _____

Signature of Parent/Guardian _____ Date _____

II. PHYSICAL EXAMINATION: This examination must be completed and signed by a licensed physician, or his authorized agent currently approved by the NC Board of Medical Examiners (or a comparable board from bordering states), a certified nurse practitioner, or a public health nurse meeting DEHNR standards for EPSDT program.

Height _____ % Weight _____ % Head _____ Eyes _____

Ears _____ Nose _____ Teeth _____ Throat _____ Neck _____

Heart _____ Chest _____ Abd/GU _____ Ext _____ Skin _____

Neurological system _____

Results of Tuberculin Test, if given: Type _____ Date _____ Normal _____ yes _____ no

Should physical activities be limited? _____ yes _____ no If yes, please explain _____

Any other recommendations: _____

Signature of authorized examiner & title _____

Date of examination _____ Office phone _____

Office address (may use stamp) _____

*******PLEASE ATTACH RECORD OF CHILD'S IMMUNIZATIONS*******



2022/2023

Permission/Release Forms

Photo/Video Release for Minors

Name of Student _____ Grade _____

(Please mark)

- I give permission for St. John's Lutheran School to use photographs/videos of my child (children) for the purpose of classroom/school display, class projects, and the school yearbook, brochures/advertising, including the school website, media purposes news articles, news station interviews.
- I do not want my child's (children's) photographs/videos used for any reason.

Liability Release

I give permission for my child (children) to participate in St. John's Lutheran Church and School activities, including gym, P.E., field trips, playground and on-site outdoor activities. By granting permission for my child (children) to participate in these activities, I release St. John's Lutheran Church and School, its employees, volunteers and any entity associated with St. John's Lutheran Church and School from any liability for any incident or injury which may incur during normal participation in the activities and locations listed above. I understand that St. John's Lutheran Church and School provides a safe environment for children, that all activities are age and developmentally appropriate, and that all children and activities will be well supervised by persons 18 and older.

Permission to Administer Topical Ointment/Lotion/Powder/Sunscreen

Authorization must be provided for staff to apply over the counter, sunscreen lotion only. Items must be provided in its original container and labeled clearly with the child's name. Staff will keep items out of reach of children when not in use.

Volunteer Driver Compliance

We, the undersigned, assure St. John's Lutheran School of the following:

1. When transporting children for curricular activities of the preschool, only licensed drivers over twenty-one years of age will be allowed to drive.
2. That we carry at least the minimum liability insurance coverage required by the state of North Carolina.
3. The driver of our vehicle will not have been convicted of reckless driving, operating a motor vehicle while under the influence of an intoxicant or of a controlled substance, or any other type of unsafe driving within the previous five years.
4. All children transported in our vehicle will be seated in permanent mounted seats which face forward.
5. All children transported in our vehicle will use seat belts in compliance with state law.
6. We will provide St. John's Lutheran School with copies of a valid NC Driver's License and a current insurance card showing coverages.
7. A private vehicle transportation form will be filled out submitted and approved by appropriate administrator before taking students/parents/staff off campus.

Child's Name: _____

Parent/Guardian Signature: _____ Date: ____/____/____



Sick Child Policy

All North Carolina Child Care Centers are required to enforce all Health Department regulations on children's illness.

If a child becomes ill at school, the responsible adult will be notified to pick him/her up within 60 minutes. A child with a fever (100 degrees or higher), rash, diarrhea, vomiting, throat infections (strep or thrush), conjunctivitis, or continuous nasal discharge should not be brought to the school. If a child has had any of these symptoms at home or at school, he/she must be free of the symptoms for at least 24 hours before returning to the school. Children with ear infections are not allowed to return to the school for 24 hours after the diagnosis.

Parent/Guardian signature: _____ Date: ____/____/____



Discipline and Behavior Management Policy

Praise and positive reinforcement are effective methods of the behavior management of children. When children receive positive, no violent, and understanding interactions from adults and others, they develop good self-concepts, problem solving abilities, and self-discipline. Based on this belief of how children learn and develop values, this facility will practice the following discipline and behavior management policy:

We:	We:
· DO praise, reward, and encourage the children.	· DO NOT spank, shake, bite, pinch, push, pull, slap, or otherwise physically punish the children.
· DO reason with and set limits for children.	· DO NOT make fun of, yell at, threaten, make sarcastic remarks about, use profanity, or otherwise verbally abuse the children.
· DO model appropriate behavior for the children.	· DO NOT shame or punish the children when bathroom accidents occur.
· DO modify the classroom environment to attempt to prevent problems before they occur.	· DO NOT deny food or rest as punishment.
· DO listen to the children.	· DO NOT relate discipline to eating, resting, or sleeping.
· DO provide alternatives for inappropriate behavior to the children.	· DO NOT leave the children alone, unattended, or without supervision.
· DO provide the children with natural and logical consequences of their behaviors.	· DO NOT place the children in locked rooms, closets, or boxes as punishment.
· DO treat the children as people and respect their needs, desires, and feelings.	· DO NOT allow discipline of children by children.
· DO ignore minor misbehaviors.	· DO NOT criticize, make fun of, or otherwise belittle children's parents, families, or ethnic groups.
· DO explain things to children on their levels.	
· DO use short, supervised periods of "time-out".	
· DO stay consistent in our behavior management program.	

Praise and positive reinforcement are effective methods of the behavior management of children. When children receive positive, non-violent, and understanding interactions from adults and others, they develop good self-concepts, problem solving abilities, and self-discipline. Based on this belief of how children learn and develop values, this facility will practice the following discipline and behavior management policy:

I, the undersigned parent, or guardian of _____, do hereby state that I have read and received a copy of St. John's Discipline and Behavior policy and that the director (or other designated staff member) has discussed the Discipline and Behavior policy with me.

Signature of parent or guardian: _____ Date: _____



Toileting Policy

Staff guidelines: Children are encouraged to use the bathroom facilities whenever they wish. No child shall be punished, humiliated, or verbally abused for soiling, wetting, or not using the toilet. If a child is not developmental ready to change after a soiling, the staff will nurture the child's development by helping the child under dress, cleaning off the soiling, and help the child dress. All children will wash their hands with soap and running water after going to the bathroom. Staff members also wash their hands with soap and running water after assisting children with toileting or toileting themselves. Individual paper towels are used to dry hands.

Clothing soiled by feces, urine, vomit, or blood is double bagged in sealed plastic bags and stored in a soil bin in your child's classroom apart from other items for the parent to take home to launder.

All bathrooms at the preschool are cleaned every day. They are supplied with soap dispensers, paper towels, toilet paper, a wastebasket, and a step stool. The recommended rules for washing hands are posted in each bathroom.

3 years of age and fully toilet trained: We understand starting preschool can be an adjustment for your child. During the first 2 weeks of this transition period, our staff will assist your child with toileting needs. During the transition period if the child asks for help or the staff member sees the child needs help, the staff member will provide full staff assistance by finish cleaning their bottom. However, if your child continues to need full staff assistance on a regular daily basis or more than 2 times a week after the transition period, you will be ask to remove your child from St. John's until the child does not need full staff assistance. If accidents continue to occur after your child returns, he or she will be asked to leave for the remainder of the school year, and there will be no reimbursement of fees paid to St. John's Lutheran School.

4 & 5 years of age: If your child has potty accident, a staff member will take your child the bathroom. The staff member will assist the child if she/he requested, or if no assistance is required, the teacher will stand in the doorway until the child is ready to return to the classroom. However, if your child 2 accidents per week, for 2 weeks in a row, after the transition period, we may ask you to remove your child from St. John's until the child does not accidents. If accidents continue to occur after your child returns, he or she will be asked to leave for the remainder of the school year, and there will be no reimbursement of fees paid to St. John's Luther School.

We ask that the child be dressed in "user friendly" clothing, as much as possible. The best items are shorts and pants with elastic waists, or dresses. Try to avoid tight clothing, pants with snaps and zippers, and overalls. These are difficult for children to remove "in a hurry".

By signing your signature below, you are stating that you agree with St. John's Lutheran Preschool and will abide by the above.

I, _____, fully agree with the above and will abide with St. John's Lutheran Preschool toileting policy.

Parent(s) Signature: _____

Prevention of Shaken Baby Syndrome and Abusive Head Trauma

Belief Statement

St. John's Lutheran preschool believe that preventing, recognizing, responding to, and reporting shaken baby syndrome and abusive head trauma (SBS/AHT) is an important function of keeping children safe, protecting their healthy development, providing quality childcare, and educating families.

Procedure/Practice

- **Recognizing:** Children are observed for signs of abusive head trauma including irritability and/or high-pitched crying, the head, seizures, lack of appetite, vomiting, bruises, poor feeding, no smiling or vocalization, inability of the eyes to track and/or decreased muscle tone. Bruises may be found on the upper arms, rib cage, or head resulting from gripping or from hitting the head.

Responding to:

If SBS/ABT is suspected, staff will:

- Call 911 immediately upon suspecting SBS/AHT and inform the director.
- Call the parents/guardians.
- If the child has stopped breathing, trained staff will begin pediatric CPR.

Reporting:

- Instances of suspected child maltreatment in childcare are reported to Division of Child Development and Early Education (DCDEE) by calling 1-800-859-0829 or by emailing webmasterdcd@dhhs.nc.gov.
- Instances of suspected child maltreatment in the home are reported to the county Department of Social Services.

Communication

Staff*

- Staff will sign an acknowledgement form that includes the individual's name, the date the center's policy was given and explained to the individual, the individual's signature, and the date the individual signed the acknowledgment.
- The childcare facility shall keep the SBS/AHT staff acknowledgement form in the staff member's file.

Parents/Guardians

- A copy of the policy will be given and explained to the parents/guardians of newly enrolled children up to five years of age on or before the first day the child receives care at the facility.
- Parents/guardians will sign an acknowledgement form.
- The childcare facility shall keep the SBS/AHT parent acknowledgement form in the child's file.

* For purposes of this policy, "staff" includes the operator and other administration staff who may be counted in ratio, additional caregivers, substitute providers, and uncompensated providers.

The North Carolina Child Care Health and Safety Resource Center www.healthychildcarenc.org
800.367.2229



Prevention of Shaken Baby Syndrome and Abusive Head Trauma

Parent or guardian acknowledgement form

I, the parent, or guardian of acknowledges that I have read and received a copy of the facility's Shaken Baby Syndrome/Abusive Head Trauma Policy.

Print name of parent/guardian _____

Signature of parent/guardian _____ Date _____

Tobacco-Free Policy for St. John's Lutheran Preschool

Purpose/Belief Statement

St. John's Lutheran Preschool, understand that the use of tobacco products on childcare premises and in vehicles used to transport children or during any off-premises activities is an environmental hazard and detrimental to the health and safety of children, staff, and visitors.

Background

Exposure of children to environmental tobacco smoke is associated with increased rates of lower respiratory illness and increased rates of middle ear effusion, asthma, and sudden infant death syndrome. Exposure during childhood may also be associated with development of cancer during adulthood.

Applicable NC Child Care Laws/Rules

N.C. Child Care Rule 10A NCAC 09 .0604 (h)(i)(j) Safety Requirements for Child Care Centers states that:

- Children shall be in a smoke-free and tobacco-free environment. Smoking and the use of any product containing, made or derived from tobacco, including but not limited to e-cigarettes, cigars, little cigars, smokeless tobacco, and hookah is not permitted on the premises of the childcare facility, on vehicles used to transport children or during off-premises activities. All smoking materials shall be kept in locked storage.
- Signage regarding the smoking and tobacco restriction shall be posted at each entrance to the facility and in vehicles used to transport children.
- The operator shall notify the parent of each child enrolled in the facility, in writing, of the smoking and tobacco restriction.

Application

This policy applies to all children, families, visitors, volunteers, and staff.

Procedures/Practice

Smoking and the use of tobacco products are prohibited at all times:

- on the premises of the childcare facility
- on vehicles used to transport children
- during any off-premises activities sponsored by our facility

Signs are posted at each entrance to the facility and on vehicles used to transport children. The signs are posted in a manner and location that adequately notify families, visitors, volunteers, and staff of the tobacco-free childcare facility policy.

Communication

Our facility will review this policy yearly. Parents/guardians, volunteers, and staff will be given a copy of our **Tobacco-Free Policy** in writing yearly and signed they have been trained and have received a copy.

Staff*

- All current staff members and newly hired staff will review yearly the **Tobacco-Free Policy** before providing care for children.

- Staff will sign yearly an acknowledgement form that includes the individual's name, the date the facility's policy was given and explained to the individual. All Staff will sign and date the policy to acknowledge they have received their copy of the policy and it was explained to them.
- The childcare facility shall keep the signed **Tobacco-Free Policy staff acknowledgement form** in the staff member's file.

Parents/Guardians

- A copy of the policy will be given and explained to the parents/guardians of newly enrolled children on or before the first day the child receives care at the facility.
- Parents/guardians will sign an acknowledgement form that includes the child's name, date the child first attended the facility, date the operator's policy was given and explained to the parent, parent's name, parent's signature, and the date the parent signed the acknowledgement
- The childcare facility shall keep the signed **Tobacco-Free Policy parent acknowledgement form** in the child's file.

* For purposes of this policy, "staff" includes the operator and other administration staff who may be counted in ratio, additional caregivers, substitute providers, and uncompensated providers.

Enforcement

Parents and visitors using tobacco products will be asked to refrain while on the childcare premises or to leave the premises.

Definitions

- "Premises" – the entire childcare building and grounds including but not limited to natural areas, outbuildings, dwellings, vehicles, parking lots, driveways, and other structures located on the property.
- "E-cigarette" – Any electronic oral device that employs a mechanical heating element, battery, or electronic circuit regardless of shape or size and that can be used to heat a liquid nicotine solution or any other substance, and the use or inhalation of which simulates smoking. The term shall include any such device, whether manufactured, distributed, marketed, or sold as an e-cigarette, e-cigar, e-pipe, or under any other product name or descriptor.
- "Off-premises activity" – any event sponsored by our facility that is not on the child care facility premises, including but not limited to field trips and educational or entertainment activities.
- "Smoking" – The use or possession of a lighted or heated cigarette, e-cigarette, cigar, little cigar, pipe, hookah or any other lighted or heated tobacco product containing, made, or derived from tobacco and intended for inhalation in any manner or in any form.
- "Tobacco product" – Any product containing, made or derived from tobacco that is intended for human consumption, whether chewed, smoked, absorbed, dissolved, inhaled, or ingested by any other means, including but not limited to cigarettes, e-cigarettes, cigars; little cigars, hookah, snuff, snus, and chewing tobacco. A tobacco product excludes any product that has been approved by the United States Food and Drug Administration for sale as a tobacco cessation product, as a tobacco dependence product, or for other medical purposes, and is being marketed and sold solely for such an approved purpose is prohibited at all times.

Tobacco Cessation Resources

Our facility will consult with the local health department or other appropriate health and community-based organizations to provide staff and administrators with information and access to treatment programs and services to support them in complying with this policy. The North Carolina Quitline 1-800-QUIT-NOW (1-800-784-8669) offers free coaching sessions, helps develop a plan to quit, provides reading materials, and offers counseling. See <http://www.quitlinenc.com>.

References

- NC DHHS Tobacco Prevention and Control Branch, <http://tobaccopreventionandcontrol.ncdhhs.gov/smokefreenc/>
- Caring for Our Children 3rd Edition, Standard 3.4.1.1: Use of Tobacco, Electronic Cigarettes, Alcohol, and Drugs <http://cfoc.nrckids.org/StandardView/3.4.1.1>
- Caring for Our Children 3rd Edition, Standard 9.2.3.15: Policies Prohibiting Smoking, Tobacco, Alcohol, Illegal Drugs, and Toxic Substances <http://cfoc.nrckids.org/StandardView/9.2.3.15>

2415 Silas Creek Parkway, Winston-Salem, NC 27103
(336) 725-1651
StJohnsFalcons.org



Parent or guardian acknowledgement form

I, the parent, or guardian of _____ (**child or children's name**) acknowledge that I have read and received a copy of the facility's 100% Tobacco-Free Policy for North Carolina Child Care.

Date

Print name of parent/guardian

Signature of parent/guardian

Date



Parent Participation Opportunities

We require all parents to set-up a tour with our Preschool Director. We encourage the parent/ guardian to bring the child to visit the center. At that time the teacher will inform the parent as to what they will be studying and some of the special activities that are in the classroom. It will be explained that at the end of each week the teacher will send home a class weekly newsletter about what the child will learn the next week. Simple developmental progress report for each child will be sent home with in the first month of school, just before Christmas break, and sometime in the middle of April. The teacher will request the parent come in to go over the final progress report. The parent can schedule an appointment after receiving the first and second progress reports.

If a child is struggling with learning or behavior skills during the year, we will set up a time to meet with the parents and as a group develop a strategy that will continue developmental growth for that child. We encourage parents to requests and schedule a parent/teacher or director conference if they have any concerns at any time.

We believe that children learn through play and their own personal hands-on experience with objects and the world around them. These opportunities are provided in the centers in each classroom and the activities found in them. Each classroom works on themes through the year, which are based on the seasons, holidays, and special calendar/ community events. Parents are welcome to participate in their child's classroom or the school. Some of these opportunities could be reading of stories at circle time, a special art project you would like to share with the children, music and dancing, cooking with the children, helping during parties, demonstrating a special work skill or practice during community workers week or other times during the year, helping with splash days during the summer and other special fun filled days, become members of our PTO, work with the teacher planning classes parties and help with planning and volunteering the day of our school carnival.

We have an open-door policy, which allows parents to visit or view their child's classroom whenever you would like. Just please remember that while visiting the classroom, the teacher is in there working with all the children and cannot stop to talk to you about your child. If you wish to talk, please arrange a time that you and the teacher can sit down and discuss your child's progress.



Parent or guardian acknowledgement form for Parent Participation Policy

I, the parent, or guardian of _____ **(child or children's name)** acknowledge that I have read and received a copy of the Parent Participation Policy

_____ Date

_____ Print name of parent/guardian

_____ Signature of parent/guardian

_____ Date

THE PARENTAL PLEDGE AND PARENT CODE OF CONDUCT

The Parental Agreement is an essential part to our partnership of school and families working together for your child's education in both academics and in the love of Jesus. Your signature of this document gives your pledge of working with us and your child's teacher for reaching their full potential as a student at St. John's Lutheran School in Winston-Salem, NC.

The Parental Pledge is connected directly to these tenets of education with which St. John's Lutheran School will daily provide to your child throughout this school term by our trained and loving teachers.

We, St. John's Lutheran School, do so promise to provide:

- A foundational Christian education in the core academic subject areas, PE, Art, Computer Lab, and to the knowledge and love of God through Jesus Christ as is found in the Bible, God's Word.
- Christ-centered principles and values which instructs students toward a God pleasing life of purpose and service to each other and the community at large.
- Daily social interaction with students and staff in a Christian school setting, supervised by caring Christian teachers who will both model and guide toward a safe and caring educational environment.
- Academic excellence and standards to challenge each student to achieve their God given potential in a more direct application to their learning needs.
- Transparent and clear communication to parents on a regular basis for progress and assessment to a student's learning with both challenges and accomplishments.
- Dedication by our teachers and staff to give our best each day for the benefit to your child's education as expressed in the light of God's will and design to form a positive school community.

The Parental Pledge

I will give my best, as I am able, with the help of God, to hereby pledge myself to the following:

- To ensure my child arrives to school on time and prepared for the day with good rest, with clean clothes, with a good breakfast, and with positive encouragement for their day of learning.
- To regularly attend my church's Sunday worship and Bible class, and to seek a Christian life in conformity with God's Word.
- To teach and be an example to my child for the Christian values of love, respect, service, and forgiveness, in addition to, their responsibility and accountability for their actions.
- To cooperate with and uphold the teacher and school/church leadership, in the exercise of Christian discipline and in the training of my child while at school.
- To fulfill my financial obligation to St John's Lutheran Church and School, realizing the importance of prompt payment
- To take issues, as they arise, directly to the teacher/administrator in a Christian manner and follow the "Due Process for Concern" and "Personal Conduct" policies in the Parent/Student Handbook.
- To allow my child to participate in St John's Lutheran Church worship services when their class has a program to present, i.e. a Christmas Service or other programs planned by the teacher.
- To pray for my child, the teachers, the school, and the administrators for knowledge and wisdom to perform their work in a productive manner for the success of my child's education.
- To attend parent/teacher conferences when they are scheduled.
- To read the **STLCS Parent/Student Handbook** and to adhere to all school rules and regulations therein.

ST. JOHN'S LUTHERAN SCHOOL CODE OF CONDUCT

To ensure a productive dialog with teachers, administration, and our pastor for resolutions to issues as they come up during the year, it is necessary for St. John's Lutheran School to have this policy of Due Process of Concern with our school families

The Due Process of Concern will be handled by staff and school parents/guardians as follows:

1. Your first contact should always be with your child's teacher to discuss the problem. Contact will only be made during non-school hours (before 8:00am and after 3:30pm). It is recommended that a scheduled time be made to discuss the concern. Pick-up and drop off time is not an appropriate time to discuss issues. You can contact the school office to make an appointment with your child's teacher.
2. Your discussion should be made in a calm and reserved manner and away from others, including children. This will most likely secure cooperation, help, and a resolution to the problem in a Christian manner.
3. If you feel your concerns were not met with the teacher, you may contact the school principal to discuss it further. It is recommended that an appointment be made by contacting the school office.
4. If your child has a problem with another child in the school, again the teacher should be contacted first to determine a resolution. Please respect confidentiality with students and families who are involved.
5. If a parent has a problem with another parent in regards to the school classroom or other school matters, discussion of the problem should again begin with the classroom teacher to be handled in a calm and reserved manner and away from others, including children. If the problem cannot be resolved with the parent and classroom teacher, then it is recommended that a scheduled appointment be made with the school principal to address the situation for an agreed upon resolution.
6. It is strongly urged for parents who have an issue with a teacher, a staff member, church leadership, Pastor Clocker, or another parent not to discuss it at home in front of their children. Children are sensitive to conflict and not always clear as to all the issues of the situation. This may affect their schoolwork, their relationships with their classmates, their mental well-being, or their spreading of misinformation. We follow Jesus' words for conflict in Matthew 18: 15-20.
7. If your discussion takes place in a school meeting or congregational meeting, the discussion should always be done in a Christian and reserved manner to ensure cooperation, help, and a resolution to the problem.
8. Yelling and/or physical contact of any type between a parent, a teacher, pastor, church leadership, or a staff member will not be tolerated and will result in an immediate discussion with the principal or pastor. Any form of "bullying" directed at students, parents, teachers, staff, administration, or church leadership will not be tolerated and will also be addressed by the principal and/or pastor and could result in several levels of action, as listed in item #10.
9. Parents and families are to fulfill their financial obligation to St John's Lutheran Church and School in its entirety when due, unless other arrangements have been made through the principal or pastor. Parents/Guardians will understand and accept that St John's School will use debt collection services for any unpaid financial obligations that are owed to St John's. Additionally, parents/guardians understand that student's grades and/or report cards will be held until all financial obligations are fulfilled.



10. By signing this document, you hereby acknowledge and agree to its terms, and will refrain from using any form of social media, texting, email, web communication, facsimile, written documents, video, or telephony methods to disparage, communicate or miscommunicate, any information, related to your disagreement with St John's Church, School, its leadership, members or other parents.

The main purpose of this document is to support and encourage a healthy Christian dialog for a strong partnership between our school families, students, staff, administration, Board of Directors, and our pastor, and we must insist on a close adherence to the **Parental Pledge** and the **Codes of Conduct**. Inappropriate conversations or discussions outside of these steps will be brought to the principal's attention and could result in several levels of action which may include but not limited to student suspension, student withdrawal, forfeiture of paid tuition, legal counsel, or legal action.

As parents, I(we) will assure that my (our) child, as well as us (parents), will abide by items listed in the **Parental Pledge** above, to enable all students to grow in a safe, pleasant and Christian school environment.

I also agree to handle, any school issues or conflicts in the manner stated herein this document, and prayerfully submit, and agree to abide by the **St. John's Lutheran School Code of Conduct**.

Student's Name(s)

Two signatures are required:

Parent/Guardian Signature: _____ Date:

Other Parent/Guardian Signature: _____ Date:

Please print a copy of this document for your files and a signed copy for the school office. Thank you.

Transitional Kindergarten & Preschool Supply List No Book Bags 2022/2023

Half Day

2 Container of Baby Wipes	4 Rolls of paper towels
6 Glue Sticks	1 box of 8 crayons (basic colors)
2 boxes of tissues	Pencil Box
1 box of Bandage	3 Pack of classic color washable markers
1 set of water paints	Box of Snack Size Zip Lock Bags
Change of clothes in a Ziploc bag (top, bottom, socks, undies)	

School Day

2 Container of Baby Wipes	4 Rolls of paper towels
6 Glue Sticks	1 box of 8 crayons (basic colors)
2 Boxes of tissues	Pencil Box
1 box of Bandage	3 Pack of classic color washable markers
1 set of water paints	Box of Snack Size Zip Lock Bags
Change of clothes in a Ziploc bag (top, bottom, socks, and undies)	
1 Nap linen bag-Reusable	
5 Fitted crib size sheets (no pillows or rest toys due to Covid)	