

Date of Application: _____
Attending 3 days _____ (M, T, W, TH, F)

Roxbury Day Care Center, Inc.
Before and After School Program
25 Righter Rd, NJ 07876 Phone: (973)584-3030 Fax: (973)252-8299

Confidential Application/Emergency Form for Enrollment

Child's Name _____ Sex _____ Birth date _____

Child's Address _____ Home Phone Number _____

Mother's Information:

Father's Information:

Name _____

Name _____

Address _____

Address _____

Employer _____

Employer _____

Work Phone (Ext) _____

Work Phone (Ext) _____

Cell/Email _____

Cell/Email _____

Parents are: Married _____ Divorced _____ Single _____ Separated _____ Widowed _____

Siblings enrolled in RDCC BASP/Summer Camp? Yes _____ No _____

* Please check here if sibling attends RDCC Pre-school _____

Grade child will be in September _____ School child will be attending _____

If a non-custodial parent is not authorized to pick up the child, please explain below and attach a copy of appropriate documents (court order).

Persons authorized to assume responsibility for my child if a parent is not available:

Name _____ Name _____

Relationship _____ Relationship _____

Address _____ Address _____

Phone _____ Phone _____

The following persons may pick up my child:

Age if under 21

Relationship

- I hereby grant permission for my child to use all of the playground equipment and participate in all of the activities of the Center, and to leave the Center's premises under supervision of staff members for neighborhood walks or for field trips in an authorized vehicle.
- I hereby grant permission to have my child photographed while in attendance at the Center, and to have the Center use the photographs. Initials _____

By my signature, I attest that the above information is correct.

Parent Signature _____ Date _____

***Please fill in the following section regarding family income if applying for a scholarship space.**

Family Income Before Taxes is: (Please indicate is weekly, bi-weekly, semi-monthly, other)

Mother \$ _____ every _____ Father \$ _____ every _____
We receive: Welfare \$ _____ Child Support \$ _____ every _____ Other \$ _____

Roxbury Day Care Center, Inc.
Before and After School Program

EMERGENCY MEDICAL PERMISSION FORM

Child's Name: _____ Date of Birth: _____ Age: _____

Home Phone _____ Address: _____

Parent(s) Name: _____ Phone (Cell/Work): _____

Parent(s) Address: _____

Is your child under any medical/physical restrictions? Yes _____ No _____

If yes, check all that apply: *Program may require documentation from a licensed physician*

Asthma _____ Hearing Loss _____ Diabetes _____ Convulsions _____

Other: _____

Does your child have any allergies? Yes _____ No _____

If yes, please list specific allergies (Medicine/Food/Insects/etc.):

Please identify any medicine(s) your child is taking:

Has your child been under a doctor's care or hospitalized within the last year? Yes _____ No _____
If yes please explain:

Child's Doctor:

Name _____ Phone# _____

Child's Insurance:

Company/HMO _____

Group Number _____ Identification # _____

I (we) state that we are the parent(s)/guardian(s) having legal custody of the above child and attest that the information above is correct. I (we) authorize the above child care center director or director's designee to obtain emergency treatment for my child. I consent to an x-ray examination, anesthetic, medical, or surgical diagnosis or treatment, and hospital care to be rendered to the minor at a recognized medical facility, under the general or special supervision of a licensed physician or surgeon. I hereby grant permission for said minor to be released to the custody of the representative of the Roxbury Day Care Center, Inc., should hospital care no longer be required.

The following procedures will be followed in an emergency:

1. The parent/guardian will be contacted immediately. If the parent/guardian is unreachable we will attempt to contact the parent/guardian through all of the emergency persons listed on the child's application/emergency form.
2. The child's physician will be contacted.
3. If we cannot contact the child's parent/guardian or physician, we will do any or all of the following:
 - a. Call for emergency first aid assistance/transportation (911).
 - b. Call another physician.
 - c. Have the child transported to an emergency hospital in the company of a staff member.
4. The Center will not be responsible for complications that may occur as a result of false information given by the parent/guardian at the time of enrollment.

By my signature, I attest that the above information is correct.

Parent/Guardian Signature _____ Date _____

I have received the Information to Parents document, and our Parent Handbook.

Parent/Guardian Signature _____ Date _____

Department of Children and Families
Office of Licensing
INFORMATION TO PARENTS

Under provisions of the Manual of Requirements for Child Care Centers (N.J.A.C. 3A:52), every licensed child care center in New Jersey must provide to parents of enrolled children written information on parent visitation rights, State licensing requirements, child abuse/neglect reporting requirements and other child care matters. The center must comply with this requirement by reproducing and distributing to parents and staff this written statement, prepared by the Office of Licensing, Child Care & Youth Residential Licensing, in the Department of Children and Families. In keeping with this requirement, the center must secure every parent and staff member's signature attesting to his/her receipt of the information.

Our center is required by the State Child Care Center Licensing law to be licensed by the Office of Licensing (OOL), Child Care & Youth Residential Licensing, in the Department of Children and Families (DCF). A copy of our current license must be posted in a prominent location at our center. Look for it when you're in the center.

To be licensed, our center must comply with the Manual of Requirements for Child Care Centers (the official licensing regulations). The regulations cover such areas as: physical environment/life-safety; staff qualifications, supervision, and staff/child ratios; program activities and equipment; health, food and nutrition; rest and sleep requirements; parent/community participation; administrative and record keeping requirements; and others.

Our center must have on the premises a copy of the Manual of Requirements for Child Care Centers and make it available to interested parents for review. If you would like to review our copy, just ask any staff member. Parents may view a copy of the Manual of Requirements on the DCF website at <http://www.nj.gov/dcf/providers/licensing/laws/CCCmanual.pdf> or obtain a copy by sending a check or money order for \$5 made payable to the "Treasurer, State of New Jersey", and mailing it to: NJDCF, Office of Licensing, Publication Fees, PO Box 657, Trenton, NJ 08646-0657.

We encourage parents to discuss with us any questions or concerns about the policies and program of the center or the meaning, application or alleged violations of the Manual of Requirements for Child Care Centers. We will be happy to arrange a convenient opportunity for you to review and discuss these matters with us. If you suspect our center may be in violation of licensing requirements, you are entitled to report them to the Office of Licensing toll free at 1 (877) 667-9845. Of course, we would appreciate your bringing these concerns to our attention, too.

Our center must have a policy concerning the release of children to parents or people authorized by parents to be responsible for the child. Please discuss with us your plans for your child's departure from the center.

Our center must have a policy about administering medicine and health care procedures and the management of communicable diseases. Please talk to us about these policies so we can work together to keep our children healthy.

Our center must have a policy concerning the expulsion of children from enrollment at the center. Please review this policy so we can work together to keep your child in our center.

Parents are entitled to review the center's copy of the OOL's Inspection/Violation Reports on the center, which are available soon after every State licensing inspection of our center. If there is a licensing complaint investigation, you are also entitled to review the OOL's Complaint Investigation Summary Report, as well as any letters of enforcement or other actions taken against the center during the current licensing period. Let us know if you wish to review them and we will make them available for your review or you can view them online at https://data.nj.gov/childcare_explorer.

Our center must cooperate with all DCF inspections/investigations. DCF staff may interview both staff members and children.

Our center must post its written statement of philosophy on child discipline in a prominent location and make a copy of it available to parents upon request. We encourage you to review it and to discuss with us any questions you may have about it.

Our center must post a listing or diagram of those rooms and areas approved by the OOL for the children's use. Please talk to us if you have any questions about the center's space.

Our center must offer parents of enrolled children ample opportunity to assist the center in complying with licensing requirements; and to participate in and observe the activities of the center. Parents wishing to participate in the activities or operations of the center should discuss their interest with the center director, who can advise them of what opportunities are available.

Parents of enrolled children may visit our center at any time without having to secure prior approval from the director or any staff member. Please feel free to do so when you can. We welcome visits from our parents.

Our center must inform parents in advance of every field trip, outing, or special event away from the center, and must obtain prior written consent from parents before taking a child on each such trip.

Our center is required to provide reasonable accommodations for children and/or parents with disabilities and to comply with the New Jersey Law Against Discrimination (LAD), P.L. 1945, c. 169 (N.J.S.A. 10:5-1 et seq.), and the Americans with Disabilities Act (ADA), P.L. 101-336 (42 U.S.C. 12101 et seq.). Anyone who believes the center is not in compliance with these laws may contact the Division on Civil Rights in the New Jersey Department of Law and Public Safety for information about filing an LAD claim at (609) 292-4605 (TTY users may dial 711 to reach the New Jersey Relay Operator and ask for (609) 292-7701), or may contact the United States Department of Justice for information about filing an ADA claim at (800) 514-0301 (voice) or (800) 514-0383 (TTY).

Our center is required, at least annually, to review the Consumer Product Safety Commission (CPSC), unsafe children's products list, ensure that items on the list are not at the center, and make the list accessible to staff and parents and/or provide parents with the CPSC website at <https://www.cpsc.gov/Recalls>. Internet access may be available at your local library. For more information call the CPSC at (800) 638-2772.

Anyone who has reasonable cause to believe that an enrolled child has been or is being subjected to any form of hitting, corporal punishment, abusive language, ridicule, harsh, humiliating or frightening treatment, or any other kind of child abuse, neglect, or exploitation by any adult, whether working at the center or not, is required by State law to report the concern immediately to the *State Central Registry Hotline, toll free at (877) NJ ABUSE/(877) 652-2873*. Such reports may be made anonymously. Parents may secure information about child abuse and neglect by contacting: DCF, Office of Communications and Legislation at (609) 292-0422 or go to www.state.nj.us/dcf/.

ROXBURY DAY CARE CENTER, INC.
Before and After School Program

Permission for School Activities, and For Emergency Medical Care Procurement

I hereby grant permission for my child to use all of the playground equipment and participate in all of the activities of the Program, and to leave the Site's premises under the supervision of staff members for neighborhood walks or for field trips in an authorized vehicle.

I hereby grant permission for the Executive Director or Staff to take whatever steps may be necessary to obtain emergency medical care for my child. These steps may include, but are not limited to the following:

1. Take any necessary emergency medical actions.
2. Attempt to contact a parent or guardian, the child's physician, or the persons listed on the emergency information form.
3. If we cannot contact you or your child's physician or the people listed on the emergency form, we will do one or both of the following:
 - A. Call another physician.
 - B. Call the paramedics (911).

I hereby grant permission to an emergency hospital to X-ray examination, anesthetic, medical or surgical diagnosis or treatment, and/or X-ray examination, anesthetic, dental/surgical diagnosis or treatment, and hospital care to be rendered to said minor.

I hereby grant permission for said minor to be released to the custody of the representative of the Roxbury Day Care Center, Inc., should hospital care no longer be required.

I understand that the above emergency procedures will be used ONLY IN EXTREME EMERGENCY when I, the custodial parent/guardian cannot be contacted or am unavailable.

Signed _____ Date _____

Call First in Emergency _____ Phone _____

Call Second in Emergency _____ Phone _____

Doctor's Name _____ Phone _____

Doctor's Address _____

Roxbury Day Care Center, Inc.

Methods of Parental Notification Policy

The Roxbury Day Care Center, Inc. will use the following methods of Parental Notification during and after Center operation hours.

-Daily Communications: The Lead teachers and other site staff will speak directly to you, and notes will be placed next to the sign-in sheet informing you of upcoming events.

-Bulletin Boards/ Parent Binders: Located at the site, bulletin boards provide center news, events, announcements, etc.

-Email: We encourage you to provide an email address that you use regularly so we may send you announcements, invoices, event invitations, and general updates.

-One Call Now: The One Call Now system allows administrators to make phone calls to parents, send emergency texts, and email reminders that can commence within seconds.

-Telephone: Any administrator or staff member will use phone numbers that have been listed on your child's information to inform you of any necessary information.

-Facebook: An Administrator will use the social network site (following the Social media Policy limits) for communicating events, closings, posting of pictures, messaging, etc.

-Website: An administrator will use the Centers website to communicate events, documents, photos, announcements, etc.

PARENTAL PERMISSION FOR APPLICATION FOR TOPICAL OINTMENTS

For the period _____ to _____

ALLERGY? Yes/No/None	Initial for Permission to use	Topical Ointment	Reason for Application
		Diaper Cream	Diaper Rash, redness
		Hydrogen Peroxide	To clean any open wound to skin including: scrape, minor cut, etc.
		First Aid Cream-Equate Triple Antibiotic Ointment,	To apply to above open wounds to skin including: minor cut, scrape, and burn to prevent infection.
		Calamine Lotion Equate Anti-itch Cream	To apply to poison ivy, oak, and insect bite and minor skin irritation to relieve itch and swelling.
		Sting-Kill	To apply to bee stings for fast relief (external anesthetic) pain and itch.
		Vaseline	To be applied to dry chapped lips or cheeks (mainly in winter).
		Antiseptic Wipes Band Aid Antiseptic Wash	To clean open wounds to skin including: minor cut, scrape, etc. while on walks/outings/trips. (these are in Travel First Aid Kits)
		Sun block	Protect skin from sun rays.

I give permission for my child _____ to have any of the initialed topical ointments listed above unless I have informed you that the above child is allergic to any of these by completing each line next to the ointment listed. If there is any allergic reaction to any of these ointments, I understand that the ointment (s) will not be applied.

Please choose:

_____ Initial form

_____ Updated Information to replace old information.

Dear Parents,

The Roxbury Day Care Center BASP uses *One Call Now* for all of our emergency contact needs. We are therefore requesting updated emergency contact information from every child within the program. We ask that you give up to 6 phone numbers and up to 5 e-mail addresses that you would like contacted for emergency closings or delays and other important information. **Please put siblings on one contact form.**

Child's Name: _____ Site: _____

Sessions attended : _____ (i.e., morning or afternoon, or both)

Siblings (within program) _____ Sibling's Site: _____

Contact Phone numbers in order of preference:

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____

Contact e-mail addresses:

1. _____
2. _____
3. _____
4. _____
5. _____

Language Preference: *(The system automatically translates the messages please understand we are not responsible for any mistranslations.)*

English Spanish French Italian Polish Portuguese Chinese Vietnamese Japanese Korean
Russian

Please note all numbers and emails will be contacted simultaneously.

ROXBURY DAY CARE CENTER, INC.

RELEASE OF CHILDREN POLICY

1. Every child enrolled in the Roxbury Day Care Center, Inc. program will be released only to the child's custodial parent(s), or the person(s) authorized by the custodial parent(s) to take the child from the center and to assume responsibility for the child in an emergency if the custodial parent(s) cannot be reached;
2. The child shall not be visited by or released to a non-custodial parent unless the custodial parent specifically authorizes the center to allow such visits or releases in writing. This written authorization shall include the name, address, work and home telephone numbers of the non-custodial parent;
3. If a non-custodial parent has been denied access, or granted limited access to the child by a court order, the center shall obtain documentation and maintain copy on file;
4. If the parent(s) or person(s) authorized by the parent(s) fails to pick up a child at the time of the center's daily closing, the following procedures will be followed:
 - A. The staff shall supervise the child at all times.
 - B. Staff shall make every attempt to contact the parent(s) or person(s) authorized by the parents; and
 - C. An hour or more after closing time, and provided that other arrangements for releasing the child to his or her parents or authorized persons have failed, and the staff members cannot continue to supervise the child at the center, the staff member shall call the Divisions 24 hour Child Abuse Hotline to seek assistance in caring for the child until the parent(s) or person(s) authorized by the child's parent(s) is able to pick up the child.
5. Children will be released to parent(s) or authorized person(s). If the parent(s) or persons(s) authorized by the parents appear to be physically and/or emotionally impaired to the extent that, in the judgment of the director and/or staff member, the child would be placed at risk of harm if released to such an individual, the following procedures shall be followed:
 - A. The child shall not be released to such an impaired individual.
 - B. Staff members shall attempt to contact the child's other parent or an alternative person authorized by the parent to pick up the child.
 - C. If the Center is unable to make alternative arrangements, a staff member shall call the Division's 24 hour Child Abuse Hotline to seek assistance in caring for the child.
 - D. The Center shall immediately report the incident to the Division of Youth and Family Service's District Office and to the Roxbury Township Police.

I have read the above policy regarding release of my child from the Roxbury Day Care Center, and understand it fully.

Parent Signature _____ Date _____

Pick Up Person _____ Date _____

Pick Up Person _____ Date _____

Pick Up Person _____ Date _____

Pick Up Person _____ Date _____

ROXBURY DAY CARE CENTER, INC.

TERMINATING CHILDREN FROM ENROLLMENT POLICY

Roxbury Day Care Center, Inc. reserves the right to terminate children from enrollment for the following reasons:

PARENT/GUARDIAN RESPONSIBILITIES:

1. Parent/Guardian failure to meet tuition requirements as per their signed fee agreement.
2. Parent/Guardian failure to meet agency's policies.
3. Parent/Guardian display of verbal and/or physical abuse, or threat of such toward staff members and/or children, or other adult while on premises.
4. Parent/Guardian falsification of information supplied by parent/guardian at time of enrollment or at the time of semi-annual financial review, i.e., bathroom trained, proof of income, etc.

CHILD'S ADJUSTMENT TO CENTER ROUTINE:

1. Child's inability to adapt to center routine.
2. Child's aggressive behavior causing danger to self and/or others.

I have read this policy regarding possible termination of children from Roxbury Day Care Center's enrollment. I understand this policy and will abide by it.

Signature _____ Date _____

ROXBURY DAY CARE CENTER, INC.
EMERGENCY MANAGEMENT PLAN
Emergency Escort List

Child's name _____

Mother's name _____ daytime telephone _____

Father's name _____ daytime telephone _____

In the event of an emergency, please list the persons to be called first, second, third:

Call 1st _____ telephone _____
alternate telephone _____

Call 2nd _____ telephone _____
alternate telephone _____

Call 3rd _____ telephone _____
alternate telephone _____

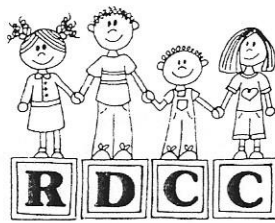
In the event of emergency, please list two persons authorized to escort your child who can arrive within 10 minutes of being notified:

1. Name _____ Relationship to child _____

2. Name _____ Relationship to child _____

Have these people been notified that you are listing them as emergency escorts? _____

Parent signature _____ Date _____



Roxbury Day Care Center, Inc.

February, 2015

Dear Parent,

In the event of an emergency, a disaster plan should be in place for every home, business and school. Parents have been asking if the Center has an emergency response plan in the event of a terrorist attack or other disaster. This letter is written to address some of those concerns.

The Roxbury Township Office of Emergency Management has assured me that they have extensive plans in place to respond to any type of emergency or disaster which may occur. The Roxbury Day Care Center is listed in their plan and the Center will be included in any disaster procedures that are put into action by their office.

After days of researching this subject on the internet and by discussions with various town officials, the following plan has been developed:

Before a disaster happens, the Center will:

1. Distribute information about family disaster planning to all families of children in our care. An article downloaded from the American Red Cross website: www.redcross.org is attached. Another excellent website is the US Department of Homeland Security, www.ready.gov, or call 1-800-BE-READY.
2. Require that all parents provide names and telephone numbers of at least 2 people who will be able to arrive to pick up their child within 10 minutes of receiving notification that the Center is closing. Parents may want to make arrangements with family, friends, neighbors, or parents of other children at the Center to escort their child and keep him/her until the parent can arrive at their location. This information must be checked and approved by the parent on the first day of every month to assure that it is current.
3. Begin to assemble a disaster supply kit (page 2, 7a.) for each classroom. If you can help with this, please let the Preschool or BASP Office know.
4. Inform the Roxbury Township Office of Emergency Management of the number and ages of children enrolled and the number of staff. The Roxbury OEM will also be given a copy of the Center's lockdown procedure and this Disaster Plan.

If Disaster Strikes, the Center will:

1. Follow directions/advice of local emergency officials regarding evacuation or "shelter-in-place". Priority will be given to getting all children home from the Center sites; however,

evacuation to another location or shelter-in-place procedures will be followed if advised by local officials.

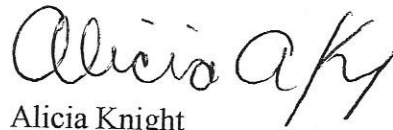
2. Notify parents of the procedures that the Center will follow by calling them at the emergency numbers provided and by changing the message on the answering machine (Preschool 973-584-3030 or BASP 973-584-9671). Parents are instructed to call their respective Center office immediately upon the event of a local or national disaster, or announcement of a Red Alert for our area.
3. Based upon the advice of local officials, parents will be instructed to pick up their child within 10 minutes, to allow staff and parents a like time to get home within the 30 minute deadline recommended. Parents should notify their authorized pick-up people (indicated in #2 above) to come for the child within 10 minutes if the parent is unable to do so themselves. Staff will remain with the children until all children have been picked up.
4. In the event that communications and/or power are lost, parents are instructed to automatically initiate procedures to have their child picked up within 10 minutes (as in #3 above) rather than wait to be contacted by telephone. Should any Center site need to be evacuated to another building, notification will be left so that parents will know where to find their children.
5. If local officials recommend "shelter-in-place", each site will be closed and sealed as conditions warrant in that individual site. Please see fact sheet attached for shelter-in-place information.
6. The Center will follow all directions issued by local, state, or federal government officials, and will remain closed until the all-clear is announced. The answering machines at both offices will be kept updated as needed.
7. Evacuation Plan: *see attached*
 - a. In the event that the occupants of the center need to be relocated to any of the shelter locations listed in the Evacuation Plan, each classroom will bring a disaster supply kit with them. Each kit will contain the following:
 - i. Food, water, battery powered radio, flashlight, extra batteries, cell phone and blankets.
 - ii. Infant/Toddler kits will contain formula, bottles, diapers and wipes
 - b. Teacher's will also bring with them:
 - i. Attendance book, Family emergency phone numbers, children's allergy information, medical consent forms and first aid supplies.
 - ii. Quiet activities: paper and crayons, books, etc.

Please complete the attached emergency number update form and return it to your child's day care site on the next school day. This information will be transferred to a master list at each site, and you will be asked to review and update it on the first day of every month.

The first concern of all of us is to keep our children safe in the event of any type of emergency situation. Please be assured that we at the Center will do everything in our power to protect all of the children in our care. You, as parents, will be kept informed at all times as to the well-being and the location of your children. It is your responsibility as parents to remain constantly aware of events as they happen and to make any necessary arrangements to prepare to get your child home quickly should disaster strike.

Let's all hope that we never have to put this plan into action. However, in this day and age it is necessary to have such a plan in place if it becomes necessary.

Sincerely,

A handwritten signature in cursive script that reads "Alicia Knight". The signature is fluid and stylized, with a large initial "A" and a long, sweeping underline.

Alicia Knight
Executive Director

Shelter Locations

1. Roxbury High School (generator back up power) 973-584-1200
1 Bryant Drive
Succasunna, NJ
2. Eisenhower Middle School (generator back up power) 973-584-2973
47 Eyland Ave.
Succasunna, NJ
3. Franklin School 973-584-5549
Meeker Street
Succasunna, NJ
4. Jefferson School (generator back up power) 973-584-8955
Corn Hollow Road
Succasunna, NJ
5. Kennedy School (generator back up power) 973-584-3938
Pleasant Hill Road
Succasunna, NJ
6. Nixon School (generator back up power) 973-398-2564
Mount Arlington Blvd.
Landing, NJ
7. Roosevelt School 973-583-4331
Hillside Avenue
Succasunna, NJ
8. Roxbury Fire Dept. - Company #1 (generator back up power) 973-584-7517
Main Street
Succasunna, NJ
9. Roxbury Fire Dept. CO. #2 - (generator back up power) 973-770-1942
Shippenport Rd Landing

10. Roxbury Fire Dept. – Company #3 (generator back up power) 973-366-7726
Lower Berkshire Valley Rd.
Wharton, NJ

10. St. Dunstan's Church 973-584-9819
179 Hillside Ave.
Succasunna, NJ
Contact: Rev. Robert Mason 973-584-4233

11. Redeemer Lutheran Church 973-583-0300
Unneberg Avenue
Succasunna, NJ
Contact: Rev. Robert Gaffney 973-584-9235

12. United Methodist Church 973-584-7349
91 Main Street
Succasunna, NJ
Contact: Rev. Juel Nelson

13. First Presbyterian Church of Succasunna 973-927-9049
99 Main Street
Succasunna, NJ
Contact: Jim Koi 973-627-2173

14. St. Therese Church 973-584-9133
Main Street
Succasunna, NJ
Contact: Rev. Joseph Davis 973-584-8271