

APPLICATION FOR ENROLLMENT

First Day: _____

IMPORTANT form directions: CPDC is licensed by the Mississippi Department of Health and participates in other regulatory programs. Licensing requires that you complete these forms. *These forms and information are considered confidential and will be accessed by CPDC administrators or staff when a need for information arises, the child's parent or legal guardians, and regulatory (licensure) authorities.* You must INITIAL yes or no, or write NA. **Do not leave ANY blanks unanswered.**

Child's Full Name (FIRST, MIDDLE, LAST): _____

Child's Preferred Name: _____ Gender: _____

Date of Birth: _____ Today's Date: _____

Hours of Care Needed: _____ 7:30 AM - 5:30 PM (Typical drop off and pick up times: _____)

Days Care Needed: ☐ Monday ☐ Tuesday ☐ Wednesday ☐ Thursday ☐ Friday

Meals Needed: ☐ AM Breakfast/Snack ☐ Lunch ☐ Afternoon Snack ☐ Late Snack after 5 PM

Complete the below by **initialing** either yes or no. Licensing requires you initial in any yes or no location on these forms.

- I have provided CPDC with a current 121 Immunization Form, and understand that I must provide updated forms as required. I understand my child cannot attend without a current 121 Form. ☐ Yes ☐ No
- I understand CPDC and MUW does not provide accident or liability insurance. ☐ Yes ☐ No
- I have been given and have read a copy of the MSDH Regulation Summary for Parents. (Last sheet of the CPDC Handbook; available online.) ☐ Yes ☐ No
- I understand MUW CPDC is laboratory school and my child will participate in classroom activities with college students as part of their educational process. ☐ Yes ☐ No
- I acknowledge that I have read and understand the CPDC Preschool Family Policies and Procedures Handbook. I agree to comply with all stated policies and procedures. Available: <https://www.muw.edu/education/cpdc>
☐ Yes ☐ No
- I acknowledge that I have received, read, and understand the CPDC Application for Enrollment. I have retained a copy of my signed contract, which contains tuition payment policies and procedure information. I agree to comply with all stated policies and procedures.

Signature of parent or guardian

Date: _____ / _____ / _____

BRIGHTWHEEL:

CPDC uses the app Brightwheel to notify parents of our daily activities, much like today cards. CPDC also uses Brightwheel for all billing. Parents may add additional users to the account. Please make sure any included email addresses can receive an email to link to Brightwheel and download the app on your phone. The app is our main means of communication with families.

MUW CHILD AND PARENT DEVELOPMENT CENTER

FAMILY INFORMATION:

Parent/Guardian 1: Full Name: _____

- ☐ Child Lives at this Address ☐ Authorized to Pick Up / Drop Off ☐ Emergency Contact
☐ This parent has primary custody ☐ Court documents received, if necessary ☐ No contact with this parent

Address: _____

Home/Cell Phone: _____ Home/Cell Phone: _____

Occupation: _____ Employer: _____

Work Address: _____ Work Phone: _____

Email Address: _____

Social Security Number: (This is used to secure non-payment only) _____

Are you a Student at MUW? _____ How many hours? _____ Department: _____

Relationship to Child: ☐ Mother ☐ Father ☐ Grandparent ☐ Other _____

Parent/Guardian 2: Full Name: _____

- ☐ Child Lives at this Address ☐ Authorized to Pick Up / Drop Off ☐ Emergency Contact
☐ This parent has primary custody ☐ Court documents received, if necessary ☐ No contact with this parent

Address: _____

Home/Cell Phone: _____ Home/Cell Phone: _____

Occupation: _____ Employer: _____

Work Address: _____ Work Phone: _____

Email Address: _____

Are you a Student at MUW? _____ How many hours? _____ Department: _____

Relationship to Child: ☐ Mother ☐ Father ☐ Grandparent ☐ Other _____

Are there any other custodial agreements that we need to be made aware? Do we have proper documentation on record?

IMPORTANT: Any parent who desires to restrict access to their child's other parent must provide legal documentation establishing the lack of custody. Otherwise (the law states) a child will be able to be checked out by either parent listed on the birth certificate. If custodial rights are in question, please do not allow your child to come to school until proper documentation is available.

MUW CHILD AND PARENT DEVELOPMENT CENTER

Other Emergency Contacts and Authorized Pickup/Drop-Off Persons

If the parents or guardians cannot be reached, CPDC will contact the following:

Contact 1: Full Name: _____

Relationship to Child: _____ Cell Phone: _____

Contact 2: Full Name: _____

Relationship to Child: _____ Cell Phone: _____

Contact 3: Full Name: _____

Relationship to Child: _____ Cell Phone: _____

Contact 4: Full Name: _____

Relationship to Child: _____ Cell Phone: _____

Contact 5: Full Name: _____

Relationship to Child: _____ Cell Phone: _____

Contact 6: Full Name: _____

Relationship to Child: _____ Cell Phone: _____

MY CHILD MAY:

Complete the below by **initialing** either yes or no.

Be photographed by the center for CPDC internal use only; including Brightwheel. _____ Yes _____ No

Be photographed or videoed by the media. _____ Yes _____ No

Be photographed for university social media, including our website and Facebook page. _____ Yes _____ No

Be given medication (including lotion sunscreen and insect repellent) as directed by parents. _____ Yes _____ No

If age appropriate, may your child be given over the counter diaper cream, as needed. ____ Yes ____ No ____ NA

Visit our MUW campus community within walking distance of the CPDC. _____ Yes _____ No

Participate in field trips sponsored by the CPDC off of MUW's campus. I understand that I will need to sign a specific permission slip for each field trip if the trip is off campus. _____ Yes _____ No

Is your child toilet trained? _____ Yes _____ No If no, a consultation is required to be documented between the parent and caregiver prior to training. Date of consultation ____ / ____ / ____

If no to any of the above, please provide specific instructions. _____

Previous childcare experiences or concerns: _____

MUW CHILD AND PARENT DEVELOPMENT CENTER

HEALTH INFORMATION:

List any allergies (including food) and any special precautions or treatment indicated for these allergies. If none, please write none and initial. **IMPORTANT: CPDC only substitutes food menu items with a documented doctor's note. Certain exemptions are also allowed for religious reasons with clergy documentation. CPDC has a specific form required by our nutrition reimbursement plan with the Mississippi Department of Education. Please ask for this specific form if substitutions for health or religious reasons are needed. Parents are responsible for providing reasonably healthy substitutions.**

List any physical, mental or medical conditions, medications, and/or special needs your child may have. If none, please write none and initial. (Eczema, chronic congestion, reactions to biting insects, etc.)

Will your child require any physical, mental, or medical adaptations to participate in CPDC activities? Please explain. If none, please write none and initial.

Preferred Hospital in Case of Emergency: _____

MUW nor CPDC provides medical or liability insurance to cover medical care of your child.

In the event a parent or guardian cannot be reached, do you authorize the release of medical information (HIPAA) and authorize medical care? _____ Yes _____ No

Insurance Policy Name and Numbers: _____

Pediatrician: _____ Pediatrician Phone Number: _____

If masks become optional at CPDC (as based on research, science, and licensing oversight) do you prefer your child continues to wear a mask? (If age and abilities are appropriate for masking?) _____ Yes _____ No

HEALTH CONTRACT:

I understand CPDC will contact me when my child is ill and needs to be picked up. (Fever, diarrhea, vomiting, or a general feeling of unwell as determined by the caregiver.) I, or a designated adult, will pick up my child immediately and comply with all CPDC, CDC, and MSDH regulations regarding illnesses.

Signature of parent or guardian

Date: _____ / _____ / _____

MUW CHILD AND PARENT DEVELOPMENT CENTER

FINANCIAL AGREEMENT:

Tuition for 2021-2022 is \$6,240 for the entire 240-day school year at \$26 per day. The tuition amount is based on CPDC providing education and care for 240 school days. CPDC is closed for 15 holidays on the [University calendar](#) and 5 days for [trainings](#) and other closures. The tuition amount is divided into a payment plan for all 52 weeks or 12 months. You are making payments on the entire yearly amount due, not paying for the week at a time. Payments are due every week or every month for the entire calendar year. As included in the CPDC handbook, CPDC will go up in small increments each year of 2-5%, depending on the year.

MUW Child and Parent Development Center accepts [Mississippi Child Care Certificates](#). ALL low income and MUW students are encouraged to apply for certificates to help offset their child care bill. Currently, child care certificates cover almost all of the child care costs at CPDC. For more information and assistance, contact The Mississippi Child Care Payment Program at 1-800-877-7882. OR VISIT: <https://www.apps.mdhs.ms.gov/ccis/NewApplication/AppStartPage.aspx>

- Deductions of 10% per month for MUW students -OR- CPDC families with multiple **full-time** children.
- Families who have multiple children and are MUW students receive a 15% discount on their entire account bill.
- **Discount only applies to accounts established on bank draft.**
- For families with multiple children, the discount does not apply to the first child account, only to additional children accounts.
- CPDC is a non-profit program. All of our tuition goes directly back into our program.

Payment Plan Options			Please select your plan
Full Time Yearly (240 Days)	Tuition for 2021-2022 School Year (beginning August 2, 2021, ending July 26, 2022.)	\$6,240	
Full Time Every Month	Monthly Bank Draft, All 12 Months, Deducts on the 2nd of Every Month	\$520	
Full Time Every Week	Weekly Deduction on Bank Draft, All 52 Weeks, Deducts on the Monday of every week	\$120	
Full time Biweekly	Biweekly Deduction on Bank Draft, All 26 Weeks, Deducts on the Monday of every other week	\$240	
Drop in Rate	Availability Dependent on Vacancies	\$35 Per Day	

Is your family served by an Emergency or Low-Income Child Care Certificate? _____ Yes _____ No

Is the certificate under MUW Child and Parent Development Center?* _____ Yes _____ No _____ NA

*Please make sure the certificate is transferred or active before your child's first day.

Families (including foster families) are responsible for any additional fees, co-pays, or tuition not covered by the child care certificate program.

Date: _____ / _____ / _____

Signature of parent or guardian

MUW CHILD AND PARENT DEVELOPMENT CENTER

INTERVENTION SERVICES:

Does your child receive any special program services during the school day at CPDC? We strongly encourage our children who need interventions to receive pull-out or classroom program services from campus therapies (music/speech) or through the public-school system or the state early intervention program. Please sign below to give the service permission to pull "check-out" your child from the classroom for services and acknowledge that you understand a CPDC employee will not always be present during the time of intervention services. Services are typically received in the intervention room at CPDC or the children walk with their assistant to the speech building. If you think your child may need screenings, please indicate as well. ***You may designate not applicable.***

Services/times if existing:

Any concerns regarding development:

Signature of parent or guardian

Date: ____/____/____

TERMINATION AGREEMENT

CPDC reserves the right to immediately terminate our contract for childcare service. Some of the reasons for termination may be:

- Failure to pay
- Routinely late picking up your child
- Failure to complete required forms or turn in required forms
- Continuously sending a sick or ill child to school
- A child is absent 5 or more days in a row without written explanation or payment
- CPDC determined that the health, safety, or welfare of the program or individuals is threatened by the continued presence of the family. (*Attitudes and behaviors that are threatening are not allowed.*)

Signature of parent or guardian

Date: ____/____/____

Date of Original Application: _____ Date of Acceptance/ First Day: _____

Withdrawal Date: _____ Reason for withdrawal: _____

Parent updated form (date and sign) _____

MUW CHILD AND PARENT DEVELOPMENT CENTER

CPDC PANDEMIC WAIVER RE: COVID-19 Beginning August 2, 2021

In consideration for my child/children to be permitted to utilize the services and programs at Mississippi University for Women Child Parent Development Center ("CPDC"), I, on behalf of myself and any minor child/children for whom I have the capacity to contract, hereby acknowledge and agree to the following modifications in CPDC's operations:

GREEN LEVEL - When minimal spread is in the community:

1. Parents will be allowed in the building and shall remain outside the classroom door when children are present. Parents will NOT enter the classroom and will wait at the door for CPDC staff to deliver your child. Classrooms are considered a safe place where children can go maskless. Masks will be asked to be worn in communal or shared spaces or group indoor gathering where children are mixed with other classes. Example – if Mother Goose visits, children may be combined in a mixed group together in one room and will be expected to wear a mask.
2. Parents will be responsible for temperature checks, answering COVID-19 screening questions, handwashing, and signing in on arrival at the CPDC sign in station.
3. Any teaching staff and MUW student or CPDC parent and/or visitor is encouraged to vaccinate. Unvaccinated adults, including any CPDC teaching staff and/or interns and visitors, are recommended and strongly encouraged to wear masks at all times in the building. Vaccinated adults will use personal preference with masking. Any teacher within their own classroom is not expected to wear a mask. However, when an unvaccinated teacher or other adult or child enters another classroom or communal space, masks are expected.
4. Children are not required to wear masks indoors or outdoors. However, parents may use personal preference on masking their children. We are hopeful that allowing children to go without masks in their classrooms may help with social emotional behaviors, communication, and articulation.
5. Parents will be allowed to come into the building for afternoon pickup. Parents are **not** allowed in the classroom spaces. Parents should message through the app Brightwheel to notify staff of pickup time before entering the building. Additionally, parents should arrange conferences and meeting times with staff through brightwheel so we can make sure all classes have coverage for any meetings.
6. Parents are to socially distance themselves from other families, children, and staff if they do not wear a mask.
7. Outside visitors and programs can continue with director approval with safety as a priority.

YELLOW LEVEL - When there is a higher transmission or as advised by licensure or other governing agencies:

1. Parents will not be allowed inside the building without specific reason, screening, and approvals.
2. Parents are to message CPDC through Brightwheel when in the circle for pick up/drop off and a staff will deliver children to the main CPDC door.
3. Temperature checks of children will be conducted each day by staff before a child may enter the building.
4. Screening questions will be asked each day for families.
5. All teachers will wear face masks indoors and children will be encouraged to wear facemasks unless outside or during nap time. CDC recommends masks for all children over age 2, and CPDC will strongly encourage masks for preschool children.
6. Outside visitors and programs can continue outdoors with formal campus approvals with safety as a priority.

RED LEVEL - When there is active spread within the CPDC or immediate families:

1. CPDC may close down classrooms or the entire CPDC center.
2. In the event of spread, CPDC does not have depth to call in additional reinforcements to cover classrooms that are closed.
3. Parents will not be allowed inside the building.
4. Parents should wear masks outside of the center during drop off/pickup of open classrooms.
5. All teachers will wear face masks indoors and children will be encouraged to wear facemasks unless outside or during nap time. CDC recommends masks for all children over age 2, and CPDC will strongly encourage masks for all preschool children.
6. All outside events and specials are canceled.

AT ALL TIMES:

1. The primary parent is responsible for notifying every pick-up person of the policies and procedures and ensuring they comply with all policies.
2. Morning drop-off is only permitted between 7:30-8:30 AM unless proof of doctor's appointments.
3. If a parent believes anyone in their household has come in close, direct contact with an individual who has tested positive for COVID-19 in the last 14 days, their child will not be permitted to stay.
4. Any child who has a fever of 100.0 degrees or higher will not be allowed inside and must remain outside of school until the child is fever free for 48 hours.
5. Parents are required to keep their children home if sick and to inform the center if anyone in their immediate household tests positive for COVID-19 or any other transmittable illness.
6. In the event there is a reported positive COVID-19 case in the center, the center (or partial center/classrooms) will be immediately closed and CPDC will work with local health officials to implement appropriate cleaning and disinfectant protocols.
7. In the event of a positive COVID-19 case at the center, the name of the child, family or staff will remain confidential to other CPDC families and staff.
8. In the event MUW CPDC closes to mitigate the spread of COVID-19 for longer than a two consecutive week period, parents are not required to pay tuition. If CPDC does close longer than two consecutive weeks payment plans will complete for the current month of service and payments will stop. No refunds will be issued. However, if CPDC is open, parents are required to pay tuition or risk forfeiture of their child's spot-on roster.

I, on behalf of myself and my minor child/children, also acknowledge and agree that I understand the hazards of COVID-19 and that the circumstances regarding COVID-19 are changing day to day. As such, I accept that there is an inherent risk of exposure by allowing my child/children to be cared for by the CPDC. I willingly choose to fully assume the risk of exposure, illness or death that may result from participating in the services offered by CPDC, and I hereby release, waive, discharge and covenant not to sue Mississippi University for Women, the Institutes of Higher Learning, their employees, directors, agents, trustees and assigns ("Releasees") from any liability related to COVID-19. In signing this Agreement, I acknowledge and represent that I agree to abide by the modifications to CPDC operations, follow CDC recommendations related to COVID-19, and that I have read this Waiver of Liability and assume all risks associated with my child's voluntary participation.

Signature of parent or guardian

Date: ____ / ____ / ____