Phyllis and Richard Leet Center for Children and Families
2018 – 2019

Dear Families,

Thank you for choosing our Nationally Accredited preschool program. We are very excited to begin this partnership with your family. The first year of your child’s schooling will be an amazing adventure and we feel blessed that you have chosen to spend it with us at the Leet Center.

When this packet and your registration fee is returned to our office, and is approved, we will assign your child to a teacher and begin preparing for the explorations to be had.

The Phyllis & Richard Leet Center for Children & Families Child Enrollment Checklist is below.

Please fill out the following forms:

- Enrollment Form – **every** blank must be filled
- Medical Examination Form (due Aug 1)
- Up to Date Immunization Record (due Aug 1)
- Emergency Contact List
- Lead Poisoning Test (due Aug 1)
- Tuition Agreement
- Parents Agreement
- Meal Agreement
- Parent Survey

These items are necessary for our program to be licensed by the State of Missouri; your child cannot be enrolled until we have received all of your paperwork. Once we have received and approved the forms above, your child will be able to begin attending the 2018-19 school year.

Please take the time to return the Enrollment, Emergency Contact, Tuition, Parents, and Meal Agreement forms and a **$25 registration fee** to Mrs. Rouner by **Thursday, March 8th, 2018**. Checks can be made out to the Leet Center. The fee and enrollment forms will secure your place for the 2018-19 school year. We will need the rest of the forms (Medical Examination, Immunization and Lead Poisoning Test) by Aug 1st.

Sincerely,

Cindy Rouner
Director, Leet Center of Children and Families
Northwest Missouri State University
Emergency Contact List

In case of an emergency, contact in this order:

1. Name:_________________________________ Relationship:________________________
   Phone number:
   Home:____________________       Work:_____________________       Cell:_____________________

Comments or notes about schedule:

2. Name:_________________________________ Relationship:________________________
   Phone number:
   Home:____________________       Work:_____________________       Cell:_____________________

Comments or notes about schedule:

4. ______________________________
   Phone number:
   Home:____________________       Work:_____________________       Cell:_____________________

Comments or notes about schedule:

5. Name:_________________________________ Relationship:________________________
   Phone number:
   Home:____________________       Work:_____________________       Cell:_____________________

Comments or notes about schedule:

Additional information:
Along with my emergency contacts who can pick up my child:________________________

_________________________________________________________________________________

If applicable, whom should not pick up my child: _____________________________________________

*Please see director for policy protocol
Responsibilities as a Child Care Provider in an Area at High-Risk for Lead Poisoning*

What are my Responsibilities?

1. Beginning January 1, 2002, the department of health and senior services shall, subject to appropriations, implement a childhood lead testing program which requires every child less than six years of age to be tested for lead poisoning in accordance with the provisions of sections 701.340 to 701.349. In coordination with the department of health and senior services, every health care facility serving children less than six years of age, including but not limited to hospitals and clinics licensed pursuant to chapter 197, shall take appropriate steps to ensure that their patients receive such lead poisoning testing.

2. The test for lead poisoning shall consist of a blood sample that shall be sent for analysis to a laboratory licensed pursuant to the federal Clinical Lab Improvement Act (CLIA). The department of health and senior services shall, by rule, determine the blood test protocol to be used.

3. Nothing in sections 701.340 to 701.349 shall be construed to require a child to undergo lead testing whose parent or guardian objects to the testing in a written statement that states the parent's or guardian's reason for refusing such testing.

* Nodaway County is considered high-risk for lead poisoning

This information is offered as highlights regarding lead legislation. The full text of the legislation can be found on the website: http://www.moga.mo.gov/statutes/c701.htm
Evidence of Blood Lead Testing
Necessary for first time attendees only

Child’s Name: __________________________________________________________

Child’s DOB: ________________________________

Receipt of Test
Received a Venous/Capillary blood lead test (circle one) on ________________ (date).

Blood Lead Level was ________________.

Test was administered by:
______________________________________________________________________
(Signature of Medical Provider)

Medical Provider Address (City, State, Zip Code):
______________________________________________________________________
______________________________________________________________________

Refusal of Test
I verify that I have been made aware of the serious and long-term health effects of lead poisoning on children under the ages of six years. I do object to my child being blood test in order to determine if he/she is lead poisoned.

Reason for Refusal: _____________________________________________________

Signed: ___________________________ Date: __________________________
(Parent/Guardian)

Relation to Child: _____________________________________________________

Parent/Guardian Address (City, State, Zip Code):
______________________________________________________________________
______________________________________________________________________

Provide Patient with two copies: One for record
One for child care provider

One copy should be retained in patients chart.
**Tuition Rates and Other Fees for 2018 - 2019**

Northwest Missouri State University’s Board of Regents sets tuition from the recommendation made by the Dean of the School of Education and the Director of the Phyllis & Richard Leet Center for Children and Families. Charges are billed through the cashiering department in eight installments.

The rates for the 2018 - 2019 school year are:

<table>
<thead>
<tr>
<th>Attendance</th>
<th>Regular Tuition/month</th>
<th>Families That Qualify for Reduced Tuition Tier 1</th>
<th>Families That Qualify for Reduced Tuition Tier 2</th>
</tr>
</thead>
<tbody>
<tr>
<td>5 day Morning Only Program</td>
<td>$200</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5 day School Day Program</td>
<td>$360</td>
<td>$270</td>
<td>$235</td>
</tr>
<tr>
<td>3 day School Day Program</td>
<td>$210</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5 day Full Day Program</td>
<td>$435</td>
<td>$325</td>
<td>$285</td>
</tr>
<tr>
<td>3 day Full Day Program</td>
<td>$270</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

The following rates apply to Extended Care and Bearcat Club:

<table>
<thead>
<tr>
<th>Attendance</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Late Fee</td>
<td>$1/minute (after 5:30 pm)</td>
</tr>
<tr>
<td>Hourly Rate</td>
<td>$3/hour</td>
</tr>
<tr>
<td>Hot Lunch when available</td>
<td>$2.50</td>
</tr>
<tr>
<td>Regular Adult Lunch</td>
<td>$4.15</td>
</tr>
<tr>
<td>Special Event Adult Lunch</td>
<td>$4.50</td>
</tr>
</tbody>
</table>
Leet Center Tuition: What you should know

This guide is designed to help you understand your Leet Center charges. This process may be confusing, but we are here to help! Below is an example of a Leet Center bill with explanations of each charge. If you have any further questions, or need assistance feel free to call or email us at any time!

<table>
<thead>
<tr>
<th>Johnny B Good</th>
<th>Date</th>
<th>Item</th>
<th>Charge</th>
</tr>
</thead>
<tbody>
<tr>
<td>xx/ xx/ xxxx</td>
<td>Leet Center Tuition*</td>
<td>$355.00</td>
<td></td>
</tr>
<tr>
<td>xx/ xx/ xxxx</td>
<td>Leet Center Bearcat Club*</td>
<td>$36.35</td>
<td></td>
</tr>
<tr>
<td>xx/ xx/ xxxx</td>
<td>Leet Center Meals*</td>
<td>$20.90</td>
<td></td>
</tr>
</tbody>
</table>

*At the end of the item statement you will find the month or installment number associated with the charge.

- Leet Center Tuition- Tuition is billed through the University monthly in eight installments. A total of 4 installments will be billed per trimester beginning in August and due on the 15th of each month. For example, a bill you receive in August will be due on September 15th and must be paid to return to school in October.

- Bearcat Club After School Program- Bearcat Club is billed on an hourly basis ($3/hour) and is called Leet Center Bearcat Club on your bill each month. Bearcat Club will also be charged by the minute if you are late picking up your child. These charges will be prorated by the minute with the charge of $3/hour based on your digital signature. Snow Day Care is also a $3/hour additional charge, if used. The BCC charges that you receive on your bill will be for the previous month. For example, a bill you receive in January will have December’s charges on it.

- Preschool Lunches- Lunches are $2.50 per child lunch and $4.09 for adults. The lunch charges that you receive on your bill will be for the previous month. For example, a bill you receive May will have April’s lunch charges on it.
**Tuition Agreement**

I understand billing will be processed through the University Cashiering Office and is due by the 15\textsuperscript{th} of each month. Tuition will be charged in eight installments according to the attendance program I have chosen. Any questions about billing should be directed to the Center Director, Cindy Rouner at 660-562-1542 and any questions about payments should be directed towards cashing at 660-562-1609. If I default on my payments, I understand that my child may not be permitted to attend The Leet Center until arrangements have been made with the Cashiering Office.

The attendance program I wish to be billed for beginning August of 2018 for the 2018 – 2019 school year is:

<table>
<thead>
<tr>
<th>Attendance</th>
<th>Regular Tuition</th>
</tr>
</thead>
<tbody>
<tr>
<td>5 day Morning Only Program (11:00)</td>
<td></td>
</tr>
<tr>
<td>5 day School Day Program (3:00)</td>
<td></td>
</tr>
<tr>
<td>3 day School Day Program (3:00)</td>
<td></td>
</tr>
<tr>
<td>5 day Full Day Program (5:30)</td>
<td></td>
</tr>
<tr>
<td>3 day Full Day Program (5:30)</td>
<td></td>
</tr>
</tbody>
</table>

We require 30 days written notice to change attendance agreements and tuition obligations.

☐ Please check the box if you currently receive any state or federal assistance such as free/reduced school lunch, TANIF, Food Stamps or Medicaid (Please include a copy of your statement when you turn in this packet to verify that you qualify for our office records) OR if you believe you may qualify for reduced tuition based on your income and would like to apply.

To issue your bill through the university please provide the following information. Inquiry about outstanding balances will be a part of the approval process:

Child’s Name: ________________________________________________________________

Parent’s Name: ______________________________________________________________

Parent’s 919#: ___________________ If you do not have a 919, please fill out the following:

Middle Initial: _____ Address: ________________________________________________

Last 4 of social: __________

Parent’s Signature: __________________________________

Date: ______________
Parents Agreement

Northwest Missouri State University
The Phyllis & Richard Leet Center for Children and Families

Your signature serves as your approval throughout the remainder of your years in the Leet Center, unless updated by you through the office.

Photography/Videotaping
As a lab school for the University, there are occasions when the classrooms may be videotaped and/or children in the classrooms may be photographed for educational purposes. These photographs and videos may be shown to college students or as research seminars or presentation.

<table>
<thead>
<tr>
<th>Do</th>
<th>Do Not</th>
</tr>
</thead>
<tbody>
<tr>
<td>□</td>
<td>Give consent for my child to be photographed or videotaped in an educational context for use in classrooms, seminars, or presentations</td>
</tr>
<tr>
<td>□</td>
<td>Give consent for my child’s photograph to be disseminated in presentations and in handouts or PowerPoints for the presentations</td>
</tr>
</tbody>
</table>

University Student Participation
As a lab school for the University, there are occasions when the children will work with practicum or observation students one-on-one or in groups. These students may conduct screening or assessments of the children under the supervision of the classroom teacher or their University instructor.

I ___ do or I ___ do not give permission for my child to participate in activities, assessments, or screenings conducted by University observation or practicum students.
Meal Agreement Policy
Northwest Missouri State University
The Phyllis and Richard Leet Center for Children & Families

Your signature serves as your approval throughout the remainder of your years in the Leet Center, unless updated by you through the office.

1. The Leet Center at Northwest Missouri State University provides nutritional, well-balanced lunches and snacks that meet the requirements for nutrition according to the Bureau of Child Care of the State of Missouri and the USDA Child and Adult Care Food Program.

2. Parents of children attending the Leet Center may choose to have their child purchase a lunch (current cost is $2.50/lunch, milk is included with lunch) or may provide a sack lunch for their child. If preferred, parents may choose to have their child purchase their lunch on some days and provide a sack lunch on other days. Adult Lunches may also be ordered before 9:00 am of the day they would like the lunch (regular lunch cost is $4.09 and special event lunches are $4.39; milk is also included with adult lunches). However, once a lunch has been ordered, it cannot be refunded due to meal preparation being done in advance. The Leet Center is not responsible for the nutritional value of meals provided by the parent.

3. The Leet Center is required to supply milk for all children at lunch (unless there is a documented milk allergy).

4. Food brought from home by individual children for their own lunch may not be shared with other children. The Leet Center must ensure that children do not share food brought from home with one another.

5. The Leet Center will provide refrigeration for sack lunches provided by parents. Each morning your child’s teacher will place your child’s sack lunch in the refrigerator. After the lunch meal, teachers will ensure that your child’s non-disposable lunch container(s) are place into the child’s cubby for the parent to take home. We will not store leftover food from individual sack lunches.

6. By signing this agreement, you are indicating that you understand will adhere to the lunch policies of The Phyllis and Richard Leet Center for Children and Families.

Child’s Name (Printed): _______________________________________________________

Parent’s Name (Printed): ____________________________________ Date: ___________

Parent’s Signature: ___________________________________________________________