



**Child's Preadmission Record (continued)- page two of three-form not valid without first page**

**Describe any special needs or instructions below:**

Does your child have asthma? \_\_\_\_\_ Please be specific below about the triggers and management.


**May we post these needs or instructions in the classroom, office and service areas?** \_\_\_\_\_

Person(s) the child may be released to:

<b>Name</b>	<b>Relationship to child</b>	<b>Address</b>	<b>Telephone number</b>

**I understand that the Department of Human Resources does not inspect activities away from the child care facility (home or center). The licensee of the child care facility assumes full responsibility for such activities.**

\_\_\_\_\_ Signature of parent/guardian      Date

**I give my permission for my child to participate in:  
(Circle yes or no and sign each line)**

Activities away from the center:	<b>Yes</b>	<b>No</b>	Signature of parent/guardian	<b>Date</b>
Transportation provided by the facility:	<b>Yes</b>	<b>No</b>	Signature of parent/guardian	<b>Date</b>
Swimming/wading activities provided by the facility:	<b>Yes</b>	<b>No</b>	Signature of parent/guardian	<b>Date</b>

**Form not valid without signature of child's parent/guardian in each space indicated above.**

\_\_\_\_\_

**Child's Preadmission Record (continued)- page three of three-form not valid without first & second page**

**Parents:** Pre-placement visits are a requirement before the first full day. You must stay with your child during the pre-placement visits. The best times for visiting are around 9:00am and 3:30 pm if it suits with your schedule. The number of pre-placement visits will depend on your child.

Help us get to know your child by completing the "All about Me" form.

Please send pictures of your family, home, pet, etc. to be made into a collage. This will help in your child's transition to the Center.

**Confidentiality**

Wetumpka Preschool & Child Development Center, LLC utilizes a Developmental Checklist and Developmental Record from High Reach for the Preschool and the Language & Emerging Literacy Assessment (LELA) for the state funded Pre-k class within three months of placement and annually thereafter in the spring and fall. The purpose is to assess each child's developmental strengths and needs. Based on the results, the curriculum will be adapted to optimize learning opportunities for every child. The assessments will be conducted by an adult familiar with your child in an individual setting when possible. Information about the assessment will be shared with you during parent conferences twice yearly or at any time upon request.

Your child's assessment will be kept confidential and be used only by staff working with your child. The results of the LELA will be forwarded to the Office of School Readiness for program evaluation and statistical purposes. Individual child files will be kept in a secure location in the classroom. Information about your child's developmental screenings will not be shared without your written permission.

Information about your family's situation will only be shared with staff working with your child on an as needed basis.

\_\_\_\_\_  
Signature of parent/guardian

\_\_\_\_\_  
Date

---

**This section to be completed by the facility's staff.**

**Child's first day of attendance:** \_\_\_\_\_ **Child's withdrawal date:** \_\_\_\_\_