



**CHILDREN'S
CENTER**

AT USC

FAMILY HANDBOOK
July 2011-June 2012

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INTRODUCTION

The Children's Center at USC values inclusion and diversity and strives to include families from the greater Columbia area who represent a wide range of educational and economic backgrounds. It welcomes all children who can participate in, and benefit from, programming with a diverse and well-qualified staff. The Center fulfills a very exciting mission on the USC-Columbia Campus and in South Carolina's childcare community. It offers full time, high quality childcare and education for young children, ages six weeks through pre-kindergarten with afterschool, holiday and summer programming for children up to 11 years of age.

The Center reflects current standards of best practice as articulated by the National Association for the Education of Young Children (NAEYC) and adheres to all SC DSS licensing regulations. The NAEYC *Code of Ethical Conduct* guides all decisions regarding programming and relationships. The Code can be accessed on-line. Go to NAEYC.org → Resources → Position Statements → Code of Ethical Conduct and Statement of Commitment.

Parents¹ are recognized and valued as active members of the Center's team and are partners in guiding the care and educational needs of their children.

The Center is governed by a Board of Directors. The Chair of the Board is Dr. Susie VanHuss. The Executive Director of the USC Foundation, Dr. Jerome D. Odom, serves as President and CEO. An Advisory Committee, chaired by Dr. Nancy Freeman, Associate Professor of Early Childhood Education, addresses issues related to the Center's day-to-day operations. The Director of the Center is Sherry King, and Amanda Hedgepeth is the business manager.

The Center plays an important role in University research and teaching efforts and provides a model of "best practice" for South Carolina's early childhood professionals at all levels of the professional ladder. The Center welcomes graduate and undergraduate students studying in a variety of fields: education, music, art, physical education, psychology, and medicine to participate in the Center's activities.

The Center welcomes faculty and student researchers investigating young children and their families. All research conducted at the Center has been approved by USC's Institutional Review Board (IRB) and is approved by the Research Director of the Child Development Research Center located on the second floor the building. The faculty in the College of Education and the Center's teachers collaborate regularly.

STATEMENT OF PURPOSE

The Center serves a three-fold purpose: First, the Center strives to provide a high quality environment and experience for young our children and their families. Second, the Center is a lab site with the mission of supporting research and teaching related to young children and preparing USC students to work professionally with young children. Third, the Center serves as a demonstration and training site for South Carolina's early child care and education workforce.

The Center's mission is to provide the best quality education and care for children and to serve as a national model for early childhood education. In addition to providing a healthy learning environment

¹ We use the word "parent" for clarity but appreciate that many families are made up of primary caregivers including grandparents, foster parents, and guardians.

for children, the Center provides an opportunity for researchers to study and implement the best practices in the classroom. USC students and faculty from education, psychology, art, music and medicine are involved at the center as part of their educational experiences.

The Children's Center at USC provides equal opportunity and affirmative action in education and employment for all qualified persons regardless of sex, race, national origin, religious belief, age, marital status/family structure, disability, or, sexual orientation, or veteran status.

PROGRAM STANDARDS

The Center is committed to adhering to the Code of Ethical Conduct of the National Association for the Education of Young Children (NAEYC). Copies of the Code can be obtained from the Director or from the web at www.naeyc.org → resources → position statements.

The Center adheres to the South Carolina Department of Social Services (DSS) requirements and standards of licensing requirements; the enhanced program standards of Child Care, the Development Block Grant (CCDBG) under the ABC voucher program, and our state's fire and sanitation codes.

DSS License

The Center is licensed by the SC Department of Social Services. The re-licensing process is repeated every two years and includes visits from the Health Department and the State Fire Marshal. Unannounced visits are conducted by DSS to ensure consistent adherence to state standards.
www.state.sc.us/dss/

Advocates for Better Care

The Child Care and Development Fund (CCDF) and its Advocates for Better Care Program have criteria that are higher than licensing standards. These criteria address curriculum, facilities, instruction, finance, and related standards. The program has yearly monitoring visits conducted by the ABC staff. The Center currently has an enhanced status with the ABC system. Families who have been awarded an ABC voucher are welcome to enroll their children at the Center.

<http://childcare.sc.gov/main/general/programs/abc/index.aspx>

Child: Teacher Ratios

The Center strives to adhere to these NAEYC ratios.

A Comparison on NAEYC and South Carolina DSS Staff: Child Ratios

Child's Age	Staff: Child Ratio	
	NAEYC	Current DSS
Birth to one year	1:4	1:5
One to two years	1:4	1:6
Two to three years	1:6	1:7
Three to four years	1:10	1:11
Four to five years	1:10	1:16
Five to six years	1:12	1:19
Six to eleven years	1:12	1:23

Low ratios and small groups are important criteria of quality care. SC regulations do not limit group size, however the Center follows NAEYC guidelines and keeps group sizes at two-times ratio (i.e. two caregivers can care for a maximum of eight infants or twelve 2-year-olds).

During rest times the Center follows DSS nap time ratio regulations. Under certain other instances, SC licensing ratios may be applied.

CENTER PHILOSOPHY

Teachers and caregivers are expected to base their work on their knowledge of each child's age and developmental level, his or her individual needs, and the family's culture. They enhance and support children's intellectual, social, emotional, and physical growth and development, ensuring that learning occurs across these domains. The Center's staff is expected to communicate constructively with children, their parents, and each other. The following statements describe the Center's approach to child development:

- Teachers organize classrooms in ways that enhance children's optimal growth, development, and learning.
- Materials selected help support the curriculum.
- Children learn best through play and active involvement with the people and materials in their environment.
- Children are developmentally complex persons each with unique temperament, growth and behavior patterns. Each child grows and develops at his or her own individual rate.
- The interactions and the relationships that form between adults and children are the most important components of quality early care and education. Children thrive on supportive, positive, and individualized adult-child interactions. The adult's role is to stimulate, guide and enhance the development of the whole child.
- The best atmosphere for learning is one of acceptance, mutual respect, fairness, consistency, clear limits, appropriate expectations, and encouragement.
- Children's thinking and cognitive abilities are quantitatively and qualitatively different from those of adults. Neither adult logic nor inappropriate adult expectations shall be imposed on children. Rigid classroom routines (sitting and waiting turns for long periods, lining up) are **inappropriate** for use with young children.
- Learning is an active process. Children create their own knowledge from the inside out. The environment will provide for active exploration, making free choices, a wide variety of hands-on experiences, and many opportunities to enhance language and early literacy development.
- Children's learning is integrated. They learn through a variety of experiences using all their senses.
- Children learn responsibility by making age-appropriate decisions and having an appropriate level of responsibility for their actions. A predictable, organized environment with caring adults, clear expectations, and appropriate consequences supports children's cognitive, physical, social, and emotional growth.
- The outdoor environment is an extension of the classroom, requiring the same level of adult planning, supervision, and involvement with children. Daily outdoor play gives teachers opportunities to interact with the children; plan and carry out specific learning experiences; and share responsibility for the care of the play area. Constant supervision and concern for child safety shall always be a priority.

THE CENTER'S APPROACH TO CURRICULUM

The Center follows WestEd's Program for Infant/Toddler Care (PITC) approach to programming with children from birth through three years old and the preschool curriculum is based on a constructivist approach.

PITC Program for Infant/Toddler Care

PITC teaches that good infant care is neither baby-sitting nor preschool. It is a special kind of care, characterized by respectful, responsive relationships. Infant/toddler caregiving emphasizes child-directed learning. Policies fundamental to this approach include: primary care, small groups, individualized care, cultural responsiveness, and the inclusion of children with special needs. This approach also sees the setting as critical. PITC personnel designed the environments at the Center to ensure safety, offer infants appropriate developmental challenges, and promote optimum health for the children. For additional information about PITC go to their website: www.pitc.org.

Program for Infant/Toddler Care *Philosophy*

At the heart of the Program for Infant/Toddler Care philosophy is a commitment to providing care that respects the differing cultures, lifestyles, preferences, abilities, learning styles, and needs of the children and families served. Therefore, the Program for Infant/Toddler Care follows an approach that is responsive to what the infants and toddlers and their families bring to care. PITC emphasizes relationship-based care through the implementation of the following six essential policies:

Primary Care

In a primary care system, each child is assigned to one special caregiver who is principally responsible for that child's care. When children spend a longer day in care than their primary caregiver, a second caregiver is assigned to be the child's primary relationship. Each child should have a special caregiver assigned to him or her at all times during the child care day. Primary care does not mean exclusive care. It means, however, that all parties know who has primary responsibility for each child.

Small Groups

Every major research study on infant and toddler care has shown that small group size *and* good ratios are key components of quality care. PITC recommends primary care ratios of 1:3 or 1:4. in groups of 6-12 children, depending on the age. The guiding principle is: The younger the child, the smaller the group. Small groups facilitate the provision of personalized care that infants and toddlers need, supporting peaceful exchanges, freedom and safety to move and explore, and the development of intimate relationships.

Continuity

Continuity of care is the third key to providing the deep connections that infants and toddlers need for quality child care. Programs that incorporate the concept of continuity of care keep primary caregivers and children together throughout the infancy period, or for the time during that period of the child's enrollment in care.

Individualized Care

Following children's unique rhythms and styles promotes well-being and a healthy sense of self. It's important not to make a child feel bad about him or herself because of biological rhythms or needs that are different from those of other children. Responding promptly to children's individual needs supports their growing ability to self-regulate, i.e., to function independently in personal and social contexts. The program adapts to the child, rather than vice versa and the child gets the message that he or she is important, that his/her needs will be met, and that his/her choices, preferences, and impulses are respected.

Cultural Continuity

Children develop a sense of who they are and what is important within the context of culture. Traditionally, it has been the child's family and cultural community that have been responsible for the transmission of values, expectations, and ways of doing things, especially during the early years of life. As more children enter childcare during the tender years of infancy, questions of their cultural identity and sense of belonging in their own families are raised. Consistency of care between home and child care, always important for the very young, becomes even more so when the infant or toddler is cared for in the context of cultural practices different from that of the child's family.

Because of the important role of culture in development, caregivers who serve families from diverse backgrounds need to:

- Heighten their understanding of the importance of culture in the lives of infants,
- Develop cultural competencies,
- Acknowledge and respect cultural differences, and
- Learn to be open and responsive to, and willing to negotiate with families about child rearing practices.

In this way, families and caregivers, working together, can facilitate the optimal development of each child.

Inclusion of Children with Special Needs

Inclusion means making the benefits of high quality care available to all infants through appropriate accommodation and support in order for the child to have full active program participation. Issues already embraced by the PITC -a relationship-based approach to the provision of care that is individualized, and responsive to the child's cues and desires to learn- are equally important for children with disabilities or other special needs. Infants who have responsive, enduring relationships develop emotional security, which gives them the foundation for becoming socially competent and resilient. Infants who have individualized care are allowed to learn and grow in their own way and at their own pace.

A Constructivist Approach to Preschool Education

The Center takes a constructivist approach to curriculum that is based on the work of Jean Piaget and Lev Vygotsky to children's learning. We believe children learn from first-hand experiences in a rich and supportive environment that gives them opportunities to interact with materials, children and adults. The curriculum addresses appropriate SC Early Learning Standards. A link to these standards can be found on the Children's Center's website. Children make choices throughout the day that guide their learning and teachers help them make meaningful connections to previous experiences. Teachers are viewed as facilitators of learning. They create carefully planned environments, encourage child-child interactions, and provide a positive climate for social growth. These Key Experiences developed by High/Scope illustrate some of the ways children learn and develop in our classrooms.

Creative Representation

- Recognizing objects by sight, sound, touch, taste, and smell
- Imitating actions and sounds
- Relating models, pictures, and photographs to real places and things
- Pretending and role playing
- Making models out of clay, blocks, and other materials
- Drawing and painting

Language and Literacy

- Talking with others about personally meaningful experiences
- Describing objects, events, and relations
- Having fun with language: listening to stories and poems, making up stories and rhymes
- Writing in various ways: drawing, scribbling, letterlike forms, invented spelling, conventional forms

- Reading in various ways: reading storybooks, signs and symbols, one's own writing
- Dictating stories

Initiative and Social Relations

- Making and expressing choices, plans, and decisions
- Solving problems encountered in play
- Taking care of one's own needs
- Expressing feelings in words
- Participating in group routines
- Being sensitive to the feelings, interests, and needs of others
- Building relationships with children and adults
- Creating and experiencing collaborative play
- Dealing with social conflict

Movement

- Moving in nonlocomotor ways (anchored movement: bending, twisting, rocking, swinging one's arms)
- Moving in locomotor ways (nonanchored movement: running, jumping, hopping, skipping, marching, and climbing)
- Moving with objects
- Expressing creativity in movement
- Describing movement
- Acting upon movement directions
- Feeling and expressing steady beat

Music

- Moving to music
- Exploring and identifying sounds
- Exploring the singing voice
- Developing melody
- Singing songs
- Playing simple musical instruments

Classification

- Exploring and describing similarities, differences, and the attributes of things
- Distinguishing and describing shapes
- Sorting and matching
- Using and describing something in several ways
- Holding more than one attribute in mind at a time
- Distinguishing between "some" and "all"
- Describing characteristics something does not possess or what class it does not belong to

Seriation

- Comparing attributes (longer/shorter, bigger/smaller)
- Arranging several things one after another in a series or pattern and describing the relationships (big/bigger/biggest, red/blue)
- Fitting one ordered set of objects to another through trial and error (small cup-small saucer/medium cup-medium saucer/big cup-big saucer)

Number

- Comparing the numbers of things in two sets to determine "more," "fewer," "same number"
- Arranging two sets of objects in one-to-one correspondence
- Counting objects

Space

- Filling and emptying
- Fitting things together and taking them apart
- Changing the shape and arrangement of objects (wrapping, twisting, stretching, stacking, enclosing)
- Observing people, places, and things from different spatial viewpoints
- Experiencing and describing positions, directions, and distances in the play space, building, and neighborhood
- Interpreting spatial relations in drawings, pictures, and photographs

Time

- Starting and stopping an action on signal
- Experiencing and describing rates of movement
- Experiencing and comparing time intervals
- Anticipating, remembering, and describing sequences of events

PROGRAM POLICIES

Enrollment in the Children's Center at USC

The Center accepts children six weeks through 4 years old in the full day program and children up to 11 years old in the afterschool, holiday and summer programs. The Center does not discriminate on the basis of a child's ethnicity, economic level, family structure, language, religion, sex, national origin or disability.

Please see Appendix I for the priority of Admission and Waiting List Policy.

The following information will be completed prior to a child's enrollment and will be updated as required by DSS regulations and/or requested by Center administration or staff:

- Enrollment Form
- Student Information
- Physical Statement signed by physician
- Special Care Plan for children with asthma and other chronic health conditions
- Copy of the Child's Birth Certificate
- Emergency Information/Release Form
- Allergy Information
- Immunization Record
- Parent Agreement
- Child Guidance Agreement
- Parent Permission Form permitting the child to interact with USC students, researchers and other approved classroom visitors.

***A child cannot attend until the enrollment packet is completed.**

Attendance and Arrival Time

Children benefit from predictable routines. Regular attendance helps them gain the most from the Center's program. For that reason teachers encourage children to arrive by mid-morning so that they can fully participate in planned learning activities.

Children who arrive before 7:30 are accommodated in an age appropriate classroom until their teacher arrives. All classrooms are typically open by 8:00. **Breakfast** is served for all children who arrive before **8:30**. Class activities are scheduled to begin at 8:45.

Arrivals during or just before naptime disrupt classroom routines. For that reason ALL children (except infants) must arrive either before lunch is served in the classroom, between 11:15 and 12:00, or after 2:30.

The **afterschool program** begins at 2:30 and goes until closing.

Hours of Operation

The hours of operation are from 7:00 am to 6:30 pm, Monday through Friday.

In consultation with the Center's Advisory Committee, the Governing Board has approved a calendar that includes closing the center 15 days and dismissing early 7 days annually for teachers' professional development and for workdays. During this time teachers will be preparing their classrooms for children's transitions, participating in required professional development, planning for instruction, preparing documentation of children's learning, and meeting individually with parents.

The academic calendar can be found on page 23.

Weather Delay and Closings

In case of severe weather or natural disasters, the Center will follow the decision made by the University of South Carolina regarding the college's hours of operation. Such decisions will be broadcast on local radio and television stations and posted on the USC website at www.sc.edu. You may also call USC's emergency weather number at 777-5700. The Children's Center will open a half hour before USC when there has been a delay.

Drop Off and Pick Up

Every child must log in each morning both on the key pad by the front door and in the classroom log. A parent or another adult **must** accompany every child to the classroom and notify the teacher that the child is present. Please recognize that for safety reasons children may not walk to their classrooms alone. The Center is not responsible for the child until the parent has signed the child in and a teacher recognizes the child as being present.

Teachers must be informed when a child leaves the classroom or outside on the playground. Children must be logged out every day. The names of all adults authorized to pick up each child must be on file with the Center. Parents must notify the Center if someone who does not regularly pick up their child will be coming to take their child home in the afternoon. When an adult who does not routinely pick up a child comes to the Center a photo ID must be presented to the administrator before the person enters the child's classroom.

If there is a court order prohibiting any individual from having access to a child, the Center must have a copy of the documentation ordering such prohibition.

Parents need to call the Center immediately should an emergency arise that prevents them from timely picking up their child. Parents will be charged a \$4.00 per minute late fee for every minute after the center's closing time until they arrive at the center, even if parents call the staff to let them know they will arrive late. It is important to call, however, because it is comforting for children and staff to know a parent is on the way. If a child has not been picked up by 7:30 pm and no word or directions have been received from the parent or other authorized adult, a protective service worker or law enforcement officer will be notified to pick up the child. In such cases, the administrator on duty will stay with the child until he/she is united with his/her family.

The Parents Right to Free and Full Access to Their Child During School

Hours

The Children's Center at USC shall permit the parent / guardian of a child free and full access to his or her child without prior notice *unless there is a court order limiting parental access*. Your free access must not disrupt instructional activities or classroom routines. Because we must think of your child and all the children in the classroom, repetitive disruptions will require us to impose limitations on access on a case by case basis.

Supervision of Children

Appropriate adult supervision is required at all times, both in the classroom and on the playground. No child is ever to be left unattended or out of a teacher's sight.

School age children must always be within a supervising adult's earshot but may occasionally walk in the hall or to the restroom alone or with a friend.

Resources and Referrals

Agency	Contact Number
ABC Special Needs	803-935-5238 or 803-935-5281
ABC Child Care Voucher Program	1-800-476-0199
Adoption and Birth Parent Services	1-800-922-2504
AFDC/Food Stamps/Medicaid	1-800-868-0404
Child Find (Age Birth to 21)	1-866-SC-Find-1
BabyNet Central Office (Age Birth to 3) Department of Health and Environmental Control	1-800-868-0404
Special Education Department (Age 3 to 21) Richland County School District One	1-803-231-6778 Or contact your home school district
Child Abuse Hotline (National)	1-800-422-4453
Child Care Resource and Referral-Midlands	1- 803-733-5449
Department of Social Services	803-714-7300
Family Connection of South Carolina	1-800-578-8750
NAEYC (National Association for the Education of Young Children)	1-800-424-2460
Richland County First Steps	1-803-256-7237
South Carolina Program for Infant Toddler Care	1-803-777-0092

Volunteers and USC Students

Classroom volunteers (i.e. USC practicum and Service Learning students) are required to have a South Carolina Law Enforcement (SLED) background check. This provides information about students' backgrounds but does not qualify them to be alone with children. Students are always under the supervision of regular, fully-qualified staff members.

The number of extra adults in the classroom is limited to two per classroom for infants and toddlers, and three in preschool classrooms. Students must schedule their visits, display their USC ID, and check in at the front desk.

Music Play

Music play is an extension of the curriculum and is aimed at promoting children's growth and development through social music interaction. The classes are led by Dr. Wendy Valerio and graduate students working under her direction. Dr. Valerio is the founder of USC's Children's Music Development Center (http://www.music.sc.edu/Special_Programs/CMDC/Index.html). The Music Play program is funded by the Parent Teacher Organization (PTO.)

Outdoor Play

Outside play is an extension of the curriculum and is aimed at promoting children's physical growth and socialization. Teachers are encouraged to take stimulating materials outdoors to extend curriculum activities. Plan for your child to play outdoors every day, when weather permits. Remember to dress your child appropriately for the season. We follow the Child Care Weather Watch for the chill factor and heat index. The children won't go outside when the wind-chill is below 16 degrees or when the heat index over 90 degrees. A copy has been added to the end of the parent handbook for your information and can be found at http://www.scdconline.org/PDF_files/weatherwatch.pdf

If your child is too ill to go outside, she or he belongs at home. The Center will make appropriate accommodations for children with chronic medical conditions that may make outside play inappropriate.

Clothing and Personal Belongings

Clothing should be comfortable enough to allow children to fully participate in a wide variety of activities (i.e. painting, water play, sandbox, etc.) without undue concern that these clothes will be damaged. For safety, as well as health reasons, children should wear comfortable footwear that has closed toes and fit securely on their foot during active play. Do not send your child to school in flip-flops or open toed shoes.

Children are expected to dress appropriately and be ready to go outdoors in every season. Please dress children in cool clothing for summer; warm coats, hats and gloves in the winter; and sweaters in the fall and spring. Parents are responsible for providing a new bottle of sunscreen, labeled with their child's name, each spring as needed. Sunscreen will be applied when needed if written permission for its application is on file.

Each child is expected to keep a complete change of extra clothing, **including socks and shoes** at the Center. Please also include a comb or brush. Extra clothing should be placed in a plastic Ziploc bag clearly labeled with your child's name. During toilet training please bring at least two extra changes of clothing. Parents of infants and toddlers also need to provide disposable diapers and any needed diaper powder, wipes, or ointment.

Parents should provide a blanket and pillow (if the child desires) for naptime. Parents will be responsible for laundering these items on a weekly basis. A soft toy or doll from home may also be provided for naptime comfort. The Center cleans cots at least weekly.

Children should not bring other toys from home except for special projects. The Center provides adequate toys and materials for all children and cannot take responsibility for items from home that may get lost or broken.

Field Trips

Well-planned and carefully supervised field trips are an important part of a quality curriculum for preschool children. Parents are welcome and encouraged to help chaperone all field trips.

The Center's enrollment contract includes a Field Trip Authorization Form. However, a parent's signature will be required each time children **aged four and up** are going to use the Center's bus to leave the school grounds for a planned outing.

Short walks on the USC campus (e.g. to the Horseshoe) may occur spontaneously if they support the current learning and interests of the children. As on any outing, stringent, safe ratios will be adhered to and teachers will always have cell phones, first aid supplies, and emergency contact information with them.

When planning a field trip, the Lead Teacher submits a *Field Trip Authorization Form* to an administrator in advance. Approved outings are designed to contribute to the curriculum and bring learning to life through a hands-on look at the world beyond the Center.

Meals and Snacks

The Center provides breakfast, lunch and afternoon snack daily. The food served meets the guidelines of the Child and Adult Care Food Program under the U.S. Department of Agriculture. Menus are emailed, posted on the kitchen door and in classrooms for parental review.

Meals at the Center are served family style and are used as an opportunity for developing appropriate social behaviors, conversation skills, good nutrition habits, and ecological attitudes that discourage food waste.

Parents of infants who are not yet eating table food must provide formula or breast milk in bottles clearly marked with the child's name and date and baby food as needed. Baby food is to be in unopened containers and clearly marked with the child's name and date.

The Center strives to partner with families to accommodate the nutritional and cultural needs of each child. It is important to indicate any special dietary needs (i.e. allergies or cultural/religious food preferences) on enrollment forms. Parents need to bring these needs to the attention of the caregivers at the time of enrollment and when their children transition into a new classroom. Parents will be asked to provide alternative meals and snacks if the regular menu can not accommodate their children's dietary needs. Any food brought from home must follow our guidelines. **Do not bring fast food (McDonald's breakfasts) or soft drinks for your child to eat at the Center.**

Child Guidance & Discipline

The goal of the Center's child guidance policy is to build self-worth, increase social competence, and enhance the dignity of each child. All guidance and discipline techniques used at the Center will be in accordance with this positive emphasis. The purpose of any set of procedures should be to teach children to learn how to control themselves in various situations.

Positive approaches to guidance include the following:

- Staff will have a well-designed, developmentally appropriate learning environment and provide developmentally appropriate learning experiences.
- Staff will know and be sensitive to the developmental, cultural, and individual needs of each child.
- When inappropriate behavior occurs, the teacher shall examine the situation thoroughly to determine the cause; for example, a child may be reacting to something in the classroom, stress at home, a physical problem, or some other factor.
- The teacher shall be responsible for documenting patterns of inappropriate behavior and bringing such patterns to the attention of parents and to the administrators.

The goal of developmentally appropriate guidance is to help children learn to make socially acceptable choices. For this reason, teachers strive to use mediation, guidance, and various techniques to assist children in making acceptable choices. The High/Scope curriculum has a six-step plan to help children resolve conflicts within a teacher supported framework. Teachers are encouraged to use this approach. The goal of the High/Scope approach is to give children the tools they need to become good friends and good citizens.

The Children's Center at USC follows procedures as outlined below in encouraging self-discipline: Infants and Toddlers

When working with infants and toddlers, teachers will use such strategies as: prevention, distraction, encouraging, modeling, and enticing the child to a new activity. Infants and toddlers should never be put in time out because it is developmentally inappropriate for this age group.

Three, Four, Five Year Olds, and Schoolagers

Similar techniques such as: prevention, redirecting, humor, reminding, encouraging, modeling, discussing, problem-solving, and conferencing will be used with preschoolers and schoolagers.

Calm down time may be used as a behavior management technique to assist in solving an on-going or habitual behavioral problem for this age group. Calm down time will be no longer than one minute per year of the child's age. Calm down time will be followed by redirection and positive encouragement.

The Children's Center at USC does not permit ANY FORM of corporal punishment or physical force.

These discipline techniques are NOT permitted:

- A child is NEVER to be deprived of food, water, a nap or rest, a comfort item from home, or bathroom facilities!
- Unsupervised isolation of a child is NEVER allowed! "Time Out" shall rarely be used. Instead, teachers will use a "calm down" time to help children compose themselves before returning to play. Further, it is recommended that more appropriate methods of redirecting and/or guiding children, as described in Developmentally Appropriate Practices (Copple & Bredekamp, 2009), be used with four years of age and older.

- Adults are expected to always show respect for children by NEVER addressing a child harshly with intimidation or ridicule. Also, in accordance with the NAEYC *Code of Ethical Conduct*, Center personnel will not discuss a child's behavior with other adults, in the presence of other children, or with other parents. Written or verbal reports to parents regarding conflicts will guard confidentiality by not revealing the name of any other children involved in a particular incident.

Staff members will encourage parents to use these same approaches to guide and discipline their children. All parents and staff are required to sign the Center's Child Guidance & Discipline Procedures Agreement. A copy of this Agreement is included in this Handbook as Appendix I.

Transitions

Many children transition into a new classroom at the start of the academic year in mid-August. Children are prepared for this transition during the last weeks of the summer session.

Our younger children may be ready to transition at other times of the year. When teachers and parents agree that a child is ready to transition to the next classroom, they will begin a two weeks (or more) transition process that meets the child's individual developmental needs. Parents, the primary caregiver, and the new classroom teacher(s) will plan to conference before the transition process begins to ensure its success. They will also communicate frequently with each other throughout the process.

Child Abuse and Neglect

Child care providers are mandated by state law to immediately report any suspected child abuse or neglect to the Department of Social Services (DSS). A written statement is signed annually by all staff and parents in the Center indicating their awareness of this policy. The number one priority of the Center is to protect all the children in its care.

Emergency Procedures

Current emergency phone numbers for each child shall be kept on file so that a parent or designated emergency contact can be reached in the case of an emergency. It is important that families report changes in their own and emergency contacts' phone numbers to the office. Failure to provide updated emergency phone numbers/contacts may be grounds for termination of services.

Parents and then emergency contacts will be telephoned in case of the following:

- If a child becomes ill or injured while attending the Center. Emergency contacts will be called if parents cannot be reached in a reasonable amount of time.
- If a child is left at the center until 7:00pm or later.
- If the Center must close because of extenuating circumstances such as a weather emergency.

The USC Fire Marshall advises in case of an extreme emergency such as a fire, for the children to be evacuated to the Blatt PE Center or the ROTC building.

Injury/Accidents

In the event of a minor accident at the Center, first aid measures will be taken and an *Accident Report Form* will be completed. The original *Accident Report* will be given to the parent, and a copy will be placed on file in the child's folder. Minor scrapes and bruises are treated with tender loving care. The Center does not call parents for every minor injury. Parents will be called in the case of accidents that may need a doctor's attention. The Center will always call parents if their children experience one of the following:

- Injury to the head or face
- Injury that causes a great amount of bleeding
- Injury or incident that upsets the child to the point of inconsolability

In the event of a serious accident or emergency, the child will be taken to the hospital by ambulance. Every effort will be made to contact parents immediately. If parents cannot be reached, the Center will attempt to reach the emergency contacts and then the physician listed on the *Enrollment Information Form*. In the event the child's physician cannot be reached, an assigned member of the staff will stay with the child and secure needed medical treatment.

Emergency Medical Plan

In the case of a medical emergency in which emergency medical care and treatment is warranted, the following steps will be followed:

- Call 777-9111 USC Emergency Medical Service for First Responders team to come to the Center and the parent/guardian will immediately be called after that.
- If parents cannot be reached, the Center will attempt to reach the emergency contacts and then the physician listed on the *Enrollment Information Form*.
- If CPR or First Aid is necessary, trained staff will administer treatment until the ambulance arrives.
- First Responders will assess and determine whether the child needs to be taken to the nearest hospital (Palmetto Richland Hospital) or parents' preferred hospital by ambulance.
- A teacher will accompany the child to the hospital and remain until a parent or guardian arrives.
- A qualified staff member will be assigned to the classroom until the regular teacher returns.
- Emergency information for the child will be taken with the child to the hospital or emergency room.

Illnesses

To protect the health of all children, the Center follows the guidelines of the American Academy of Pediatrics for exclusion. The Center requires that a child, teacher, or USC student with the following conditions be excluded from the Center until his/her recovery has reached a stage conducive to inclusion in regular Center activities.

DHEC regulations supersede the regulations set by the Children's Center at USC and the handbook will be updated as needed. For more information please visit their website:

<http://www.scdhec.gov/health/disease/schoolexclusion.htm>

The following illnesses or conditions shall result in exclusion from the Center:

- **Fever** of 100° F or above as measured in an axillary position (under the arm). Child must be fever free for 24 hours without fever-reducing medication; this includes ear infections.
- **Diarrhea** – uncontrolled diarrhea, increased number of stools, increased water and/or decreased form that is not contained by the diaper or toilet use. The child may return to the center 24 hours after the symptoms stop. In the event of an outbreak, the Center may choose to follow the advice of a DHEC representative and require that affected children not return to the Center for a longer period of time.
- **Vomiting** – defined as two or more episodes of vomiting in the previous 24 hours. The child should remain home until vomiting resolves or a physician determines it to be non-communicable and the child

is not in danger of dehydration. The child may return to the center 24 hours after the vomiting stops. DHEC representatives may extend the time the child is not allowed to return to the Center.

- **Chicken Pox** – until seven days after onset of rash or until all sores have scabbed over
- **Hand Foot Mouth disease (Coxsackievirus)** - The child may return three to six days after no longer contagious.
- **Head lice** – The child may return 24 hours after treatment is begun and nits are no longer present. The parent(s)/guardian(s) must submit a statement indicating that his/her child received appropriate treatment. The statement must include the name of the specific Head Lice medication administered either by a physician or the parent(s)/ guardian(s) before the child may be readmitted to our center. Contact an administrator for information about effective and approved treatment plans.
- **Impetigo or Staphylococcus (Staph)** – The child may return 24 hours after treatment is begun.
- **Mouth sores** – with drooling unless a physician or health official determines the condition as non-infectious.
- **Pink eye (purulent conjunctivitis)** – after the condition has been evaluated and treated.
- **Rash with fever or behavior change** – until a physician determines that it is not a communicable disease.
- **Ringworm or Pinworm** – The child may return 24 hours after treatment is begun.
- **Roseola** – after rash and fever are gone.
- **Rotavirus** - The child may return after the diarrhea stops for 24 hours which can be up to 9 days but no less than 2 to 3 days.
- **Scabies** – The child may return 24 hours after one treatment with prescription cream.
- **Streptococcal pharyngitis (strep throat)** – Child may return to the center 24 hours after initial treatment and after 24 hours of being fever-free.
- **Viral or bacterial infections** – until treated and released by physician.
- **Symptoms of possible severe illness, such as unusual lethargy, irritability, persistent crying, difficulty breathing, or other unusual signs** – until medical evaluation indicates inclusion.

The Director, in consultation with the child’s teaching team, will determine if a child is exhibiting any of the above illnesses or symptoms. If it is decided your child should be sent home, parents will be asked to pick their child up promptly. A reasonable amount of time (no more than 90 minutes) will be allowed for parents’ arrival. If the parents of an ill child cannot be reached or do not respond to the Center’s request to pick up their child, the emergency contact identified on the child’s Enrollment Form will be asked to come pick up the child instead.

If your child is sent home with an *Exclusion for Illness Form*, its terms are strictly enforced. It is very important that all communicable illnesses be reported to the Center. A statement from a physician identifying the type of illness and the date when the child may return to school may be required for contagious illnesses. Contagious illnesses will be reported to DSS and/or DHEC if there are concerns that the illness is occurring in epidemic proportions. The goal of the Center is to prevent the spread of illness. Parental cooperation is essential in this effort.

Medications/Treatments

The Center requires written authorization to administer any medication or medical treatment. **Medication Forms** are available at the front desk. Completed forms are kept in a medication log.

- If a child requires prescription medication, parents will complete the *Medication Form* requesting and authorizing administration of the medication and specifying the dosage and times of day the medication is to be administered.

An administrator will check the name and date of the prescription to be sure the medication is prescribed for this specific child and is current. The prescription label or doctor’s note should also indicate the nature of the condition being treated.

Written, signed and dated parental consent is required prior to the administration of any prescription or over-the-counter medication or administration of special medical procedures:

- The medicine must be in its original container. All medications shall be used only for the child for whom the medication is labeled.
 - Medications shall not be given in excess of the recommended dose
 - Prescribed special medical procedures ordered for a specific child shall be written, signed and dated by a physician or other legally authorized health care provider.
 - Medicine will be administered for only one day with a parent's authorization. Continued usage requires a physician's written authorization.
- Storage of medication:
All medications shall be kept in their original labeled containers and have child protective caps. The child's first and last names shall be on all medications.
All medications shall be stored in a separate locked container under proper conditions of sanitation, temperature, light and moisture.
Discontinued and expired medication shall not be used and shall be returned to the parent or disposed of in a safe manner.
 - Medication Log:
For each medication that is administered by a staff person, a log shall be kept including the child's name, the name of medication, dosage, date, time and name of person administering the medication. This information shall be logged immediately following the administration of the medication and a copy provided to child's parent(s)/guardian(s).

Any errors in administration of medication will be reported immediately to the family and to the Department of Social Services (DSS).

Parents may also come to the Center to personally administer medications to their children. The Center will not be responsible for medications administered by parents. The Center has one refrigerator designated solely for the purpose of storing medications requiring refrigeration.

To meet DHEC's standards (Department of Health and Environmental Control) if a child has an Epi-Pen, it should be stored in a First Aid Kit that is readily accessible in the event of an emergency. Staff is trained to administer emergency medication. Parents should complete an Emergency Consent Form to allow the staff to administer an Epi-Pen.

Research and Training

All children enrolled at the Center will participate in research/training projects and observations conducted by University faculty, staff and students. Parents will be informed and their consent will be requested when special research/training projects are planned that may involve their child interacting individually with a student or researcher.

Confidentiality

All children and families have the right to expect that all information about their family will be kept confidential. A child's behavior and development should be discussed only with his or her teachers and parents. A parent does **not** have the right to know who injured their child (pushing, biting, etc.); they do, however, have a right to know the circumstances and how both children were cared for or disciplined. All staff members are committed to abiding by the NAEYC *Code of Ethical Conduct* regarding respect and confidentiality.

Children's records are stored in secure file cabinets and computer files at the Center. Only authorized personnel – the child's teacher, the director(s), or director designee, or an authorized employee of the Department of Social Services, or the child's parent or legal guardian will be given access to **the child's** personal information.

Photographs and Recordings

All children may be photographed or recorded to develop videos, published material, or news releases, with the understanding that a family's privacy will be respected and honored. Teachers and students may also photograph or record children for the purpose of course assignments or for educational or scholarly purposes. Identifiable photographs will not be used on the Internet without prior specific approval from the parents.

Communication and Privacy

We protect the privacy of our staff and the families we serve and expect all staff and families to follow these guidelines:

- Email to communicate with Center families only on Center-related matters.
- It is acceptable to email the families in your child's class for strictly social purposes (for example to invite them to your child's birthday party)
- Email addresses distributed by the Center are NOT to be used for personal financial gain (for example to invite them to a *Pampered Chef* party) or for any political purposes whatsoever.

If you have any questions about the appropriate use of the Center's email addresses check with the Center's administration.

Termination of Services

Except in the case of an emergency, it is expected that parents will notify the Center in writing at least two weeks in advance of withdrawing from the program. If this advance notice has not been given, tuition for the two week notification period will still be due.

Service may be terminated when a pattern of any of the following becomes excessive:

- Habitual late pick-ups
- Requests for special accommodations that Center staff cannot meet
- Failure to pay tuition in a timely manner
- Failure to comply with Center policies concerning ill children
- Being unreachable and out of touch by phone
- Failure to provide documentation requested by Center staff and/or required by DSS regulations
- Failure to keep immunization records current
- Failure to provide emergency contact updates
- Extreme behavior that prevents the child from participating safely with peers

Our philosophy of terminating services reflects that found in the NAEYC *Code of Ethical Conduct*.

PROGRAM INFORMATION

Staff Positions

The Center Director reports to the President and Chief Executive Officer of the Children's Center and is responsible for the curriculum, staff, and program at the Center. The Director is expected to provide comprehensive leadership in developing and maintaining a state-of-the-art child development center, offering quality programs of full-day group care and education for the young children and families, and for

overseeing the provision of afterschool and summer programming for the school-age children who are enrolled.

The Associate Director is to aid and support the Director. Specifically, the Associate Director is responsible for the management of staff and oversees matters related to the curriculum and physical environment at the Center. In the absence of the Program Director, the Associate Director is responsible for the Center. In the absence of both directors, a designated teacher will serve as the designee for managing the Center for short periods of time in accordance with DSS regulations.

The Business Manager is to aid and support the Director. The Business Manager is responsible for the management of the office and oversees all matters related to the Center's financial records.

The Children's Center utilizes a differentiated staffing design combined with a "team approach." Each classroom teaching team is supported by Graduate Assistants and/or Student Workers.

Lead Teachers are the instructional leaders of the classroom. They are to assume a leadership role in curriculum development and implementation and to guide and mentor their teaching team as well as USC students and classroom volunteers.

Teachers are partners in caregiving and instruction. They are to work to support and enhance the lead Teacher's role to ensure a smoothly run, positive environment that enhances young children's development, growth and learning.

Child Assessment

Continuous assessment of each child's development is carried out at the Center. Informal and formal teacher assessments are used to gain insights into each child's social, emotional, cognitive, and physical growth and development. Each classroom collects checklists, developmental assessments, work samples, photographs, and anecdotal records to place in each child's developmental portfolio. This information is used to make informed curricula and planning decisions so as to provide appropriate activities that will enhance each child's development. These assessment strategies also help guide teachers as they share information about the child's learning, growth and development with parents.

Parent-Teacher Conferences

Lead Teachers will hold regularly scheduled conferences with parents twice a year for the purpose of sharing and gathering information about the children in their care. Such conferences should occur at least annually or at the time of transition. Teachers view themselves as important resources for each child and family. While parents are the child's most important teacher, sharing information about development and learning is a primary way to partner for success. Parents may request a meeting with their child's teacher or primary caregiver at any time.

Birthday Celebrations

Many families eagerly anticipate celebrating their young children's birthdays and enjoy making it a memorable day for the family. The Center welcomes birthday celebrations, but asks that classroom parties remain age appropriate and simple. We encourage healthy snacks such as special fruit or muffins instead of snacks full of sugar.

Parents may want to commemorate their child's birthday by presenting a book or puzzle to the classroom in their child's honor. Teachers' birthdays may be recognized in a similar manner as children's birthdays.

Conflict Resolution

When a concern arises, please discuss the concern with the teachers first to seek a resolution. If the concern is not resolved, we encourage you to discuss the concern with the director and teachers together to find a resolution. A follow up meeting will be scheduled to make sure the concern is resolved. If it is still not resolved at this point, a formal grievance may be submitted to the Chairperson of the Advisory Committee for review. After review, a final recommendation will be made. Every effort is made to provide a respectful and professional environment. The expectation is to respect everyone and support each other in maintaining the NAEYC *Code of Ethical Conduct*.

Toilet Training

Children must be physically, cognitively, and emotionally ready if they are to be successful with learning to toilet independently. The child's primary caregiver will follow the family's lead and will partner with the family to make toilet learning a relaxed and successful process that build's the children's self confidence and self esteem. The process usually begins when children are about 24 months old. **Children are encouraged to be toilet trained when they enter classrooms for three year olds.**

Biting

Biting is not uncommon when infants and toddlers respond to the discomfort of teething and when they are beginning to express their strong likes and dislikes. Biting can also occur when children are seeking adults' attention or when they are adjusting to sharing their space and their materials. Biting occurs most frequently when children's language is just emerging – it is sometimes their most effective strategy for expressing their emotions.

We wish that biting never happened – but it does. You can be assured that the Center's staff supervises all children at all times. When working with a child who is using his/her teeth to solve his/her problems, our teachers and caregivers target their efforts to prevent injuries and to change this behavior as quickly as possible.

Teachers model and encourage children to “use their words” to solve their problems. They also model and encourage other appropriate ways to express strong emotions. They may say, for example, “If you are upset you can stamp your feet!” Teachers and administrators also make every effort to work with parents to eliminate this behavior and can suggest methods for changing the biting behavior, books to share with children, etc.

If a child should be bitten these procedures are followed:

- The child who was bitten receives necessary first aid immediately. He/she is comforted and the injury is washed with soap and water.
- The teacher fills out an *Incident Form* describing what happened. It is put in the files of both the child who was bitten and the child who did the biting.
- If the skin was broken, parents of the child who was bitten are called immediately. If the skin was not broken the incident is discussed with the parent(s) when the child is picked up.
- The *NAEYC Code of Ethical Conduct* requires us to carefully maintain confidentiality. That means that when we discuss issues of concern we will share information about your child ONLY with you.

For additional information about biting you may want to review:

Dealing with Biting Behaviors in Young Children

<http://ceep.crc.uiuc.edu/poptopics/biting.html#parent>

Understanding Children: Biting

<http://www.extension.iastate.edu/publications/PM1529A.pdf>

Biting Among Toddlers and Twos: Responses to Try

<http://www.oh-pin.org/articles/pex-08-biting-among-toddlers-and.pdf>

Biting Hurts!

<http://www.oh-pin.org/articles/pex-08-biting-among-toddlers-and.pdf>

Parent Teacher Organization (PTO)

All parents are encouraged to be a part of the PTO. The purpose of the PTO is to promote the welfare of the children attending the Center and their families; to create closer relationships between the Center; and to support the activities of the Center and its programs. Please talk with the Program Director or the PTO President for more information. The PTO President can always be reached via e-mail at **ChildrenscenterPTO@gmail.com**.

PTO meetings will be announced in the minutes and reminder signs will be posted the week before the meeting. PTO information and minutes are available on the bulletin board outside the Director's office.

PTO Fundraising efforts will always have a specific, announced focus. If families wish to make donations to efforts, such support will be greatly appreciated. All PTO funds are kept separate from general operating funds of the Center and are the fiscal responsibility of the organization. The non-profit status of the PTO and the Center allows all donations to be tax-deductible.

Parent involvement is welcome and we recognize that PTO may not be for everyone. The PTO is organized under the leadership of four elected officers who serve for one year. These positions are President (also serves on the Advisory Committee), Vice President, Secretary, and Treasurer. Parents of any child enrolled at the Center on a full-time basis are eligible for these positions. Other parent involvement opportunities include serving as a Classroom Coordinator and volunteering for special events or projects.

Classroom Coordinator Position Description

The purpose of the Classroom Coordinator is to assist the classroom teachers and parents and enhance communication among all parties while keeping in mind the best interest of all children in the classroom.

Responsibilities include but are not limited to:

- maintain regular contact with classroom teachers and parents of the other students in the classroom
- assist with welcoming new parents and their child(ren) to the classroom
- assist with coordination of the classroom email list. The classroom coordinator will take precautions to protect all parents' email addresses.
- assist teachers with their wish lists and special events in the classroom
- share information about a vacancy in this position and help recruit a new coordinator when your child transitions to another class.
- offer suggestions and make recommendations to teachers and/or staff as concerns or ideas arise
- attend PTO meetings as schedule permits

Please let your child's teacher know if you would like to serve in this capacity for your child's class.

TUITION and FEE POLICIES

Waiting Application Fee

There is a \$100.00 non-refundable Waiting Application Fee for families with one child. The fee is \$75.00 for each additional child. This fee is non-refundable.

Registration Fee

There is a \$100.00 annual Registration Fee that is due July 1st of each year for families with one child. The fee is \$75.00 for each additional child. Registration for the 4K program is due in February. The Summer Activity Fee for the Schoolager program is due in January. Drop In students' registration is \$100.00 annually and is non-refundable.

Tuition Payment/ Late Fees

All payments are due the Friday before the upcoming week. Credit is not given for sick days or vacation days beyond the 5-day allowance established by the Center's Governing Board. Tuition is divided by 51 weeks and payment is due on a weekly basis even if the child is absent more than the five days of credit allowed.

A late fee of \$30.00 will be imposed if tuition has not been paid by Wednesday evening of the current week. If payment or a suitable arrangement is not made by Friday of that week, the child will not be allowed to return to the Center. Re-application to the Center may be made as long as the tuition, late payment fee, and new application fee accompany the application. However, there may be a waiting list.

Educational Activity Fees: Dependent upon the classroom, each child may be charged extra if he/she attends a field trip or if the classroom sets a summer activity fee. Your child's teacher will let you know in advance.

Vacation Credits

After 1 year of enrollment at the center, each child is entitled to 5 days of tuition-free vacation each fiscal year July 1st- June 30th. They do not need to be consecutive days. All vacation credit requests must be submitted in writing to an administrator. **Vacation credit is given to full time students including school agers. It is not given to drop-ins or children only in the summer program.**

Returned Check Fee

A \$30.00 charge will be assessed to checks that do not clear the bank due to insufficient funds. If the tuition and the returned check fee are not paid by the specified deadline the account will be turned over to a collection agency and the child will not be allowed to return to the Center. If a family has pattern of returned checks, then it will be necessary for all future payments to be made in cash, by credit card or money order. **The Children's Center is not responsible for check collecting or bank fees.**

Late Pick Up

The Children's Center at USC closes at 6:30 pm or earlier as scheduled and announced in advance. A \$4.00 late fee will be applied for every minute your child remains at the Center after close.

The current Fee Schedule is attached.



**CHILDREN'S
CENTER
AT USC
FEE SCHEDULE**

Effective September 5, 2011

1530 Wheat Street
Columbia, SC 29201
Tax ID or FEIN # 20-3404109

FULL TIME PROGRAM, WEEKLY

CLASSROOM	AGES	SINGLE CHILD	SINGLE CHILD w/ 3 % DISCOUNT	MULTI- CHILD w/ 5 % DISCOUNT	MULTI-CHILD
Infant-Toddlers	6 wks – 24 mos	\$ 197.00	\$ 191.00	N/A	(No Discount for Infants)
Preschool 2	2 – 3 yrs old	\$ 181.00	\$ 176.00	\$ 172.00	All other classrooms: Full Tuition for youngest child, 5% discount off tuition for each additional child.
Preschool 3	3 – 4 yrs old	\$ 165.00	\$ 160.00	\$ 157.00	
Preschool 4	4 – 5 yrs old	\$ 161.00	\$ 156.00	\$ 153.00	
Preschool K4	4 – 5 yrs old	\$ 159.00	\$ 154.00	\$ 151.00	
Schoolage	6 – 11 yrs old	\$ 99.00	\$ 96.00	\$ 94.00	

Please Note: Infant rates apply to all children under 2 years of age (designated as Infants and Toddlers).

The 3 % discount is available if paying by debit card, check, or cash.

SCHOOLAGE RATES FOR PUBLIC SCHOOL CLOSINGS

ATTENDANCE	FEE
Weekly Closing	Full Time Preschool 5 weekly rates apply
Full Day Closing	Additional \$18.00 per day
Half Day Closing (mid-day pick-up)	Additional \$9.00 per day

ANNUAL ENROLLMENT AND REGISTRATION FEE

NUMBER OF CHILDREN	FEE
One Child	\$ 100.00
One or More Children	\$ 75.00 for each additional child

The Registration Fee is due at initial registration, and becomes an annual enrollment fee thereafter.

Please note: Both fees are NON REFUNDABLE.

DROP-IN FEE \$ 50.00 per day –Available on a space available basis

LATE PICK-UP FEE \$4.00 for every 1 minute increment after 6:30 pm

RETURNED CHECK/LATE PAYMENT FEE \$ 30.00 per child, per tuition week. With returned checks, we are not responsible for check collecting or bank fees.

WAITING LIST \$ 100.00 NON REFUNDABLE one time fee and \$75.00 for each additional child



CHILDREN'S CENTER AT USC

2011-2012 Academic School Calendar

Early dismissals and Dates the Center is Closed

July 4	School Closed for 4 th of July Holiday
August 10,11,12	School Closed for Teachers Work Day & Staff Development: Team planning, age-group planning, regulations up-date, preparing classrooms
September 5	School Closed for Labor Day Holiday
September 30	Early Dismissal at 3:00 for Staff Meeting
October 21	School Closed for SCAEYC Conference
November 4	Parent Teacher Conference -All classrooms dismissed at 12:00 pm.
November 23	Early dismissal at 3:00pm for Staff Meeting
November 24, 25	School closed for Thanksgiving Holiday
December 23, 26	School Closed
December 29, 30	School Closed
January 2	School Closed
January 16	School Closed for Martin Luther King, Jr. Day
February 10	Early Dismissal at 3:00pm for Staff Meeting
March 16	Parent Teacher Conference- All classrooms dismissed at 12:00 pm
April 27	Early Dismissal at 3:00pm for Staff Meeting
May 25	School Closed at 12:00pm for Teacher Workday
May 28	School Closed for Memorial Day Holiday

15 Days Closed all day 3 Days Early Dismissal at Noon 4 Days Early dismissal at 3:00pm

In consultation with the Center’s Advisory Committee, the Governing Board has approved a calendar that includes closing the center 15 days and dismissing early 7 days annually. During this time teachers will be preparing their classrooms for children’s transitions, participating in required professional development, planning for instruction, preparing documentation of children’s learning, and meeting individually with parents.

Important Parent Meetings

August 5	2011-2012 Parent attend Academic Registration
August 19	Open House 4:30pm – 6:00pm
January 20	K4 Parent Information Meeting for Qualifying Students at 4:30pm

Important Dates for Parents and Children

August 9	Last day of 2011 Summer Session
August 15	First Day of School for Students
October 20	Fall Festival 5:30 – 7:30 pm
October 24-28	Spirit Week
February 6 -10	2011 School Age Summer Session Registration
April 2 – 6	School Age children Spring Break Camp
May 17	Infant/Toddler Side Field Day
May 18	Preschool Side Field Day
May 29	First Day of 2012 Summer Session

We encourage families to work together to meet their childcare needs during Center closings. Families can support one another by sharing caregivers and suggestions for childcare alternatives (e.g., babysitters, playgroups).

Children's Center at USC, LLC Priority of Admissions and Waiting List Policy

The demand for quality childcare is very high. An insufficient number of quality programs creates tremendous anxiety and hardship on families seeking childcare services. Balancing this demand with our finite capacity, admissions must be made in an impartial and fair manner to all those seeking entrance and with consideration for the strong ties with the University of South Carolina.

Because of support received from University faculty, staff and students, the Priority Admissions schedule has been established as follows.

Qualified students will be admitted with priority from the following priority categories:

- Priority 1.** Siblings of current, full-time Children's Center at USC students and children of full-time Children's Center employees
- Priority 2.** Children of full-time USC employees
- Priority 3** Children of full-time USC students
- Priority 4.** All others

Because of factors not controllable by the Center, a family on the Priority 1 list may be accepted before a Priority 2 family as siblings are born regardless of length of time on the list. Four waiting lists are kept – one for each Priority category. The date of acceptance onto each waiting list matters only within each priority category, not overall. Dates are transferrable when a family becomes eligible for a Priority 1, 2 or 3 list as, for example, when one becomes employed by USC, but was entered originally as a Priority 4.

Applying parents must keep their contact information current with the Center. We will attempt to contact an applying family about an open slot with the contact information in our file. We will make two attempts to contact the family with a minimum of twenty-four hours between attempts. The date and time of the attempted contact will be documented in the applicant's file. If we are unsuccessful in our two attempts to contact a family, we will remove that applicant from the priority list and move to the next family on the list. If an applicant is successfully contacted, the applicant may defer admission only once to the next available slot, without losing priority. A second deferment is not allowed.

“Qualified students” are those children that meet all other admissions criteria such as age. The Center, at its discretion, may refuse acceptance to any family. Availability of a slot is not guaranteed in any circumstance.

The Board of the Children's Center has approved this Priority in Admissions Policy and may change this policy as needed and without notice.