

Newberry Academy Kindergarten

Guidelines for 2024 - 2025

Arrival and dismissal: The kindergarten opens at 7:30 a.m. You may arrive any time between 7:30 and 8:00, but we ask you please be at school by 8:00. After 8:00, your child is considered tardy. Please understand the importance of arriving on time as it not only affects your child's class experience, but interrupts the morning routine for others as well. Dismissal is at noon for 2K, 3K and 4K and at 2:40 for 5K unless your child is attending our after school program.

Please enter off Smith Road and circle the drive to the kindergarten building. A teacher will greet you at your car for morning arrival and both dismissals. Please do not let your child out until a teacher is ready to assist you.

Dress Code: Students are asked to wear closed toe shoes. Please dress your child appropriately for the weather – we play outside every day unless it is absolutely too wet or too cold. *Please keep an extra set of clothes (underwear and socks included) in your child's book bag for any type of accident (bathroom, spills, etc.).*

Toys: Students are not allowed to bring toys to school or keep toys in their book bags. Toys from home create hard feelings, distractions and listening issues. Please handle this at home or in the car prior to the teacher greeting you. We encourage students to bring books and educational items to share with their teacher.

Snacks: We have snack each day around 10:00. There is a \$40.00 snack fee per student to cover the cost of snacks for the year. You are welcome to send goodies for your child's birthday to share with their class. PLEASE INFORM US IN WRITING OF YOUR CHILD'S FOOD ALLERGIES.

Lunch: If your child attends our after school program or is a 5K student, they will need to bring or order their lunch. Lunch needs to be as ready as possible – fruit peeled, meat cut, macaroni and cheese made, etc. Not doing so delays your child eating their lunch. We are happy to warm up any items. An online ordering system for lunch is available also and can be accessed on the NA website. Please label your child's lunch box.

After school rest time: 2K and 3K students who attend our after school program have rest time after lunch. Rest time is optional for 4K students. Those napping will need a SMALL nap mat or sleeping bag. You are welcome to send an extra blanket for them to cover with. We do not have storage space for bulky items. All nap items, including roll mats, MUST be in a solid, not mesh, laundry bag with your child's name on it per DSS regulations.

Parties: We have several parties throughout the year – Halloween, Christmas, Valentines and Easter. These are organized by the teachers. You are welcome to send goodies for these holidays.

Illnesses and Medication Policy: If your child is ill or has a fever, do not send them to school. Students must be symptom and fever free (without fever reducing medicine) for 24 hours before returning to school.

We are glad to administer medication. We must have written permission so please see a teacher to make arrangements. Do not send any type of medicine or cough drops in your child's book bag.

Sending in Money: When sending in tuition, after school fees or other items, it is very important it is enclosed in an envelope with your child's name on it and put it in their folder. It can be difficult to figure out who unmarked money belongs to!

Progress Reports and Conferences: For 3K, 4K and 5K students, progress reports will be sent home November 18, February 18 and the end of school. We encourage you to speak with us any time you have a questions regarding your child's work or progress.

School Programs: All kindergarten students (2K – 5K) participate in school-wide programs throughout the year. Programs have not been scheduled at this time. Details will be sent out prior to any event.

We have kindergarten graduation for 2K, 3K, 4K and 5K. Details will be provided prior to the event.

Teacher Guidelines – we promise:

- *To instill in each child a love for school.*
- *To help each child develop the ability to cooperate, show respect, share and love one another.*
- *To teach by example, not just with words.*
- *To help each child develop scholastically from his own particular ability to his highest potential using consistent praise, encouragement and sincere caring.*

Dear 2K – 5K and 1st – 5th grade late stay parents,

The following items are needed for your child's school records. These records are required by DSS and necessary for your child to attend school. Please complete or send these items as soon as possible. If helpful, immunization records can be emailed to dpoland@newberryacademy.com. We **MUST** have these items before your child can attend kindergarten classes and late stay.

_____ Immunization record

_____ South Carolina DSS #2900

_____ Newberry Academy Pick-up Authorization

_____ Newberry Academy Policy Statement

_____ Newberry Academy Transportation Authorization

Please let us know if you have any questions.

Thank you,

Deborah Poland

South Carolina Department of Social Services
Child Care Regulatory Services

GENERAL RECORD AND STATEMENT OF CHILD'S HEALTH FOR ADMISSION TO CHILD CARE FACILITY

This form is to be completed for each child at the time of enrollment in the child care facility, updated as needed when changes occur, and maintained on file at the facility.

GENERAL INFORMATION: (to be completed by Parent or Guardian)

Name of Facility: Newberry Academy County: Newberry Select County ...

Address: 2055 Smith Road Newberry, S.C. 29108
Street Address - no Post Office Boxes City, State, Zip

Child's Name: _____
Last First Middle Initial Nick Name

Date of Birth: _____ Enrollment Date: _____

Child's Current Home Address: _____
Street Address City, State, Zip

Parent/Guardian's Full Name: _____

Home Phone: _____ Work Phone: _____ Other Phone: _____

Parent/Guardian's Full Name: _____

Home Phone: _____ Work Phone: _____ Other Phone: _____

You must have two individuals who have the authority to obtain emergency medical treatment for the child.

1. Person responsible if parent/guardian unavailable for emergency medical services:

Full Name Relationship
Address: _____
Street Address City, State, Zip
Telephone Number(s): _____ Family Code Word(s): _____

2. Person responsible if parent/guardian unavailable for emergency medical services:

Full Name Relationship
Address: _____
Street Address City, State, Zip
Telephone Number(s): _____ Family Code Word(s): _____

Is Child currently enrolled in school? (5K up to 6 years old) Yes No

My Child will regularly attend this facility FROM _____ am/pm TO _____ am/pm

If Child is a drop-in, indicate hours of care: FROM _____ am/pm TO _____ am/pm

Check all days Child will regularly attend this facility: Mon Tue Wed Thurs Fri Sat Sun

Check all meals Child will receive daily: Meals are not offered Breakfast Morning Snack Lunch
 Afternoon Snack Dinner Evening Snack

HEALTH INFORMATION: (to be completed by Parent or Guardian)

Family Physician or Health Resource: _____
Name

Street Address City, State, Zip Telephone

Emergency Care Provider: _____
Emergency Facility Name

Street Address City, State, Zip Telephone

Dental Care Provider: _____
Name

Street Address _____ City, State, Zip _____ Telephone _____

Health Insurance Provider: _____

Certificate of Immunization: Yes No N/A Please explain: _____

My child has the following health conditions such as allergies, asthma, diabetes, epilepsy, etc., and/or takes the following medications on a regular basis:

Additional Comments: _____

I certify that to the best of my knowledge _____
Child's Name

is in good mental and physical health and able to participate in the child care program at

_____ *Newberry Academy* _____
Name of Child Care Facility

Signature: _____ Date: _____
Parent or Guardian

Signature: _____ Date: _____
Director/Operator/Staff Designee

Pick-up and Release of Children

The following pick-up authorization must be completed and updated yearly, or as needed, for our records. It allows individuals, other than the legal guardians of your child, to pick up your child from the Newberry Academy Kindergarten program or after school program. These individuals should have identification available or know the code word as indicated on DSS form #2900 that you complete yearly.

We ask you to please send a note or call us when your child will be picked up by someone other than a regular ride to avoid any complications. Thank you!

Student's Name _____

Parent or Guardian's Name(s) _____

The following persons are allowed to pick up my child(ren):

Parent Signature: _____

Date: _____



Newberry Academy

The Smart Investment

Safe. Disciplined. Competitive. Proven.

Policy Statement

The Newberry Academy Parent/Student Handbook states all school policies for 2K through 12th grade. Additional Kindergarten Guidelines are provided with information specific to kindergarten students and parents. Please sign below to acknowledge you understand school policies and guidelines.

I have read, accept, and understand the policies presented in the Newberry Academy Parent/Student Handbook and Kindergarten Guidelines.

(Signature of parent or guardian)

Date

One Chance.
the *One Choice.*
Academy.



NEWBERRY ACADEMY
2055 SMITH ROAD
NEWBERRY, SC 29108

STUDENT TRANSPORTATION AUTHORIZATION FORM 2024 -2025

Newberry Academy offers this singular travel authorization form for the convenience of parents in lieu of multiple documents for each off-campus travel event in which a student of Newberry Academy may participate. This form serves as a statement of permission from parents for a student to travel to all off-campus events for which Newberry Academy provides or arranges transportation and participates. Trips or travel events that are not covered by this form will be events that require overnight stay or events that require travel beyond the borders of South Carolina. This form pertains also to travel for athletic events, but certain athletic events may require an additional permission form due to the nature of the travel necessary for the event.

_____ has my permission to travel with and be transported by representatives of Newberry Academy to any and all off-campus events. I do hereby give my consent and authorization to the personnel and representatives of Newberry Academy to seek the services of medical staff, including but not limited to, doctors, hospital doctors, hospitals, ambulances and emergency personnel, in caring for this student, with the understanding that all financial costs incurred will be assumed by me. I furthermore absolve Newberry Academy and any representative or employee of Newberry Academy of any and all liability stemming from any accident or incident that occurs during the trip or travel related to the off-campus event. It is also understood that any student participating in such a travel event will strictly adhere to the guidelines and policies of Newberry Academy and the guidelines set forth by the chaperons. It is also understood that any discipline resulting from non-compliance of these guidelines will be accepted without recourse.

Parent or Guardian

Date

This form is effective for all events related to the 2023-2024 academic year.

Confidentiality of Records

It is the policy of Newberry Academy that all staff members keep permanent records and any information discussed at school pertaining to students strictly confidential.