



CREATIVE NATURE PLAYSCHOOL

5829 Filbert Ave.

Orangevale, CA 95662

(916) 542-2757 / LIC #343621520

creativenatureplayschool@gmail.com

## CREATIVE NATURE PLAYSCHOOL ENROLLMENT APPLICATION

The following pages contains Creative Nature Playschool's Enrollment Application, links to required state child care licensing forms, and other pertinent information. All forms must be completed, returned, and reviewed by CNP staff to complete the enrollment process. ***If this is your initial application please ONLY complete pages 2-6. Once staff have reviewed the application your family will be notified if you have been selected for a phone interview. If your family is selected to move forward in the process, after the phone interview, you will be contacted for an in person interview and tour of CNP. If CNP is full your family will be added to our waitlist using this application and will be contacted once a space opens. Staff does not guarantee enrollment as families/children are chosen based on interview, in person interview, and application.***

### Requirements If Selected for Enrollment

- 1) Complete all forms fully and check/sign/initial where indicated. Enrollment will not be complete without submitting all proper forms and payment prior to the your child's start date. If selected to enroll, this includes forms listed below as well as CNP's Enrollment Application, CNP's Enrollment Agreement, ASQ assessments, and a copy of the child's current immunization record.
- 2) State of California Family Child Care licensing required documents: Please use the links below or our CNP enrollment website page to access these forms. For facility name use Creative Nature Playschool and for Licensee name use Brandy Wade.
  - 1) Parent Notification, Additional Children in Care ([LIC 9150](#))
    - Information form to sign and return
  - 2) Consent for Medical Treatment ([LIC 627](#))
    - Medical Treatment form to sign and return
  - 3) Identification and Emergency Information ([LIC 700](#))
    - Emergency Information form to sign and return
  - 4) Notification of Parents' Rights ([LIC 995A](#))
    - Information form to sign and return
  - 5) Physician's Report - Child Care Centers ([LIC 701](#))
    - To be completed within first 30 days of enrollment and each birthday thereafter
  - 6) A copy of the child's current immunization record. (Please note there are required immunizations needed prior to enrollment, per Sacramento County regulations.)
  - 7) Information only forms (no returned form needed)
    - \* Caregiver Background Check Process ([LIC 995E](#))
    - \* Family Child Care Consumer Awareness Information ([LIC 9212](#))
- 3) On this application form you must declare your child's start date. Please notify CNP as soon as possible if this date changes. Staff will only hold your child's reservation for 15 days once all paperwork, monthly tuition, and enrollment fees are paid. If the child does not start at the specified enrollment date the reservation will be released and any fees paid will be forfeited.
- 4) At this time CNP does not hold spaces for potential children. If your family is interested in postponing your child's start date please reach out to staff.

## CNP POTENTIAL PLAYSCHOOLER ENROLLMENT APPLICATION

Name of child being enrolled: \_\_\_\_\_ Child's Age: \_\_\_\_\_

Nickname or preferred name: \_\_\_\_\_ Child's Birth Date: \_\_\_\_\_

Name of person enrolling child: \_\_\_\_\_

Relationship to child: \_\_\_\_\_

Primarily Resides with: Mother \_\_\_\_\_ Father \_\_\_\_\_ Both \_\_\_\_\_

Other (specify): \_\_\_\_\_ Requested Start Date: (Month) \_\_\_\_\_ / (Day) \_\_\_\_\_

**Schedule Preference:** *CNP only operates between 8:30am and 12:30pm and all schedules must contain at least two days. Please also note that our themed lessons taught on Monday and Wednesday are repeated on Tuesday and Thursday.*

**First Preference (circle):** Monday Tuesday Wednesday Thursday Friday

**Second Preference (circle):** Monday Tuesday Wednesday Thursday Friday

**If your child is not chosen for an opening due to availability would you like to stay on CNP's waitlist or take another schedule (circle one):** Waitlist No Waitlist Will Take Any Schedule

Child's family pets: \_\_\_\_\_

Child's siblings and ages: \_\_\_\_\_

Child's favorite/least favorite interests: \_\_\_\_\_

Please describe your child's nap schedule (including length and time of day): \_\_\_\_\_

Child's favorite/least foods/beverages: \_\_\_\_\_

CNP's outdoor classroom consists of chickens, dog, cat, plants with thorns, stumps, insects, rabbits, guinea pigs, nut trees, reptiles, native bees, peanut plants, chicken eggs and other environmental factors that your family needs to be aware of. With this in mind please list any dietary restrictions, allergies, medical alerts, and/or special accommodation requests for your child: \_\_\_\_\_

Please list any specific words used in your family for daily interactions (i.e.: potty, urination, bowel movement, thirsty, injury, sleep, diaper, etc.): \_\_\_\_\_

Are there any legal or custody issues that affect your child: \_\_\_\_\_

**When do you anticipate starting your child in Transitional Kindergarten, Kindergarten, or other program (month/year):** \_\_\_\_\_

**Within our four hour day there are two scheduled restroom breaks where children will be required to try; unless they have already gone before our scheduled break. CNP defines potty trained as being able to successfully use the restroom from beginning to end, without any help. CNP ONLY accepts children whom are completely potty trained. Please describe your child’s skill level in using the restroom facilities:** \_\_\_\_\_

**At CNP we find that the more a child becomes independent the more self confidence they gain which only furthers their sense of empowerment and resilience. Please share in what way your family encourages independence at home:** \_\_\_\_\_

**Please describe how your family handles discipline/behavioral issues/concerns:**\_\_\_\_\_

**Positive reinforcement and natural consequences are key to guiding children towards positive behavior choices. In order for your child to be successful in child care Parent/Guardian(s) and care givers must work together to handle disciplinary issues. What are some examples of how your family encourages positive reinforcement and natural consequences at home:** \_\_\_\_\_

**CNP holds the health and safety of all child’s in our care as our highest priority. With that said, does your child have a history of physically violent behavior, such as hitting, kicking, scratching, biting, running away from teachers/care givers and/or other similar behavior towards adults and/or peers? If so please explain, as well as, how this behavior is handled at home. Misinformation regarding this question may result in a redetermination of enrollment.**\_\_\_\_\_

**Describe your child’s best qualities:**\_\_\_\_\_

**Has your child attended another organized program? If so, what program and why did your family**

leave? Misinformation regarding this question may result in a redetermination of enrollment. If your family has attended another program please list the name and contact information. \_\_\_\_\_

Why did your family choose to apply to CNP? What specifically are you hoping to gain from your child's time at CNP? \_\_\_\_\_

What about the CNP program appeals to your family and why do you feel CNP would be a good fit for your child? \_\_\_\_\_

What concerns, if any, do you have about the CNP program? \_\_\_\_\_

Does your family have or has anyone else expressed any developmental concerns about your child at this time? If so, what were the concerns? \_\_\_\_\_

Are there any areas you feel your child needs assistance with; physical, developmental, social, or otherwise? \_\_\_\_\_

In care, staff only get to see a short (and sometimes incomplete) snippet of your child, and also see them in comparison to others the same age. Sometimes, this results in concerns that will prove to be founded, or unfounded. Finding out there is a possible concern about a child can be a difficult conversation to have. If staff has a possible concern about your child's growth or development, what is the best way to approach you? \_\_\_\_\_

**Mutual respect** is a very important part of the Parent/Caregiver relationship. CNP views child care as a team effort between Parent/Guardian(s) and staff are therefore picky when choosing the right families for our program. How do you plan to work with staff to ensure your child is supported both at CNP and at home? This also includes addressing concerns. \_\_\_\_\_

Care of the environment is a critical part of the CNP program. Does your child have responsibilities,

chores, or is requested to help at home? If so, please describe? \_\_\_\_\_

Working together to provide for the needs of children requires us to have positive communication about what works for your child; how you see their temperament and how you approach them. What specifically do you want us to know about your child? \_\_\_\_\_

Throughout your child's time at CNP we will use several methods of communication (i.e., text, call, email, notes, one on one meetings, etc.) What are the most effective ways you want to be communicated with? \_\_\_\_\_

CNP is an ALL outdoor preschool program, that includes play outdoors rain or shine, nap/quiet time outdoors, and shoes are not always required. We get dirty, encourage independence daily, take safe risks, play hard, touch bugs and critters, and get clothes slimy and muddy! Do you have any concerns regarding our philosophy? \_\_\_\_\_

### **PARENT/GUARDIAN INFORMATION**

#### **Parent/Guardian One**

Parent/Guardian Full Name: \_\_\_\_\_

Address: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Occupation: \_\_\_\_\_ Work Location: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_

#### **Parent/Guardian Two**

Parent/Guardian Full Name: \_\_\_\_\_

Address: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Occupation: \_\_\_\_\_ Work Location: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_

***By signing below you are acknowledging you have completed this application truthfully and also fully understand that CNP is an ALL outdoor program that participates in risky and dirty play. You further acknowledge and understand this document in it's entirety, that enrollment is on a first come first serve basis, that acceptance is based on interview and best fit, and finally that your child does not have a history of physically violent behavior towards their peers or adults.***

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

# The Temperament Assessment Scale for Children

Please complete the following temperament assessment to the best of your ability. If you feel your child is between a rating please mark it and/or note your comments. CNP's goal is to enroll children who's temperaments are similar to our current students, thus maximizing the best fit possible for all children. Parent/Guardian(s) who put the same rating in every category will not be taken seriously for enrollment.

1. **Activity Level.** How much does the child wiggle and move around when being read to, sitting at a table, or playing alone?

High Activity	1	3	5	Low Activity
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2. **Regularity.** Is the child regular about eating times, sleeping times, amount of sleep needed, and bowel movements?

Regular	1	3	5	Irregular
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3. **Adaptability.** How quickly does the child adapt to changes in her or his schedule or routine? How quickly does the child adapt to new foods and places?

Adapts quickly	1	3	5	Slow to adapt
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4. **Approach/Withdrawal.** How does the child usually react the first time to new people, new foods, new toys, and new activities?

Initial approach	1	3	5	Initial withdrawal
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5. **Physical Sensitivity.** How aware is the child of slight noises, slight differences in temperature, differences in taste, and differences in clothing?

Not sensitive	1	3	5	Very sensitive
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6. **Intensity of Reaction.** How strong or violent are the child's reactions? Does the child laugh and cry energetically, or does she or he just smile and fuss mildly?

High intensity	1	3	5	Mild reaction
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7. **Distractibility.** Is the child easily distracted, or does she or he ignore distractions? Will the child continue to work or play when other noises or children are present?

Very distractible	1	3	5	Not distractible
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8. **Positive or Negative Mood.** How much of the time does the child show pleasant, joyful behavior compared with unpleasant crying and fussing behavior?

Positive mood	1	3	5	Negative mood
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9. **Persistence.** How long does the child continue with one activity? Does the child usually continue if it is difficult?

Long attention span	1	3	5	Short attention span
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