CLASSROOM AND BEHAVIOR EXPECTATIONS AND POLICIES

health, safety, and nutrition guidelines for early childhood educational settings, including earning the ServSafe Food Handler Certificate and AHA Heart Saver Pediatric Total (First Aid/CPR)

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Home	#:	Best time to Call?		Text or Voice Messaging? (Ci	rcle one or both)
Vork :	#:	Best time to Call?		Text or Voice Messaging? (C	ircle one or both)
CeII#:		Best time to Call?		Text or Voice Messaging? (Ci	rcle one or both)
Parent	Email Address:				
studer	nt School Email Address: _				
Studer	nt Personal Email Address:				
Studer	nt Cell Phone for Text Rem	inders, especially on Practicum I	Days, and Req	gistration for Certifications:	
1.	Does your child have acc	ess to the internet at home? YES	- no issues	YES - Cell phone only NO (Circle One)
2.	Does your student have	any food allergies or sensitivities	s I need to be	aware of - we occasionally have	food as part of a
	lesson? If yes, to what?				
3.	How can I support your	student (and you) to have a succ	cessful year in	my class?	
4.	Would you be willing to	speak to the class(es) about issu	es involved w	vith STIs, pregnancy, childbirth, i	infancy,
	toddlerhood, preschoole	rs, schoolage children, educatior	n, child abuse	or neglect, health care or social v	work with
	women and/or children,	careers working with children?	YES or NO	If yes, what topics?	
5.	Would you be willing to	volunteer with the class for certa	ain activities v	where extra supervision or help v	with setting up
	activities is needed (or ev	ven making copies)?	If yes,	would you be available and	would you be
	willing to help?				
	. https://www	acpsd.net/Domain/57057(r)-5(ce	e)-4(rta)4(i)-9(n)4()-ainay5 576.121 488.74 583.0)6 Tm0 a0 G[(NC