

English Rose Day School- Activity Authorization

Activity Release Authorization

I hereby give permission for my child _____ (Child's Name), to use all of the play equipment and participate in all of the activities as designed and implemented by English Rose Day School.

Signed by Parent/Guardian: _____ Date: _____

Print Name: _____

Picture Release Authorization

I hereby give permission for my child _____ (Child's Name), to be photographed and/or videotaped whilst involved in activities connected with the program at English Rose Day School. No commercial use will made of these photographs or videotapes without further consent.

Signed by Parent/Guardian: _____ Date: _____

Print Name: _____

Kindly note: We will from time to time take photographs of the group, or individual children for printing in the local newspaper. The newspaper does request that we give them each child's name along with the photographs. We find that children get a sense of pride and belongings by seeing their pictures in the newspaper. We also use videotape from time to time as a learning tool and we use videos of the children engaged in learning activities in order that they have the opportunity to observe themselves on TV in order to increase their confidence and self-esteem.

Parental Involvement

If you have any special talents, skills or interesting ideas which you would be willing to share with the children, please indicate them below, so that we may contact you.

Thank you for your help and cooperation in making our school a special one for your children!

OPTIONAL: Every year, the National Center for Education Statistics of the US Department of Education requests information about our students. Please fill in the following information.

Child's Ethnicity:

_____ Hispanic, regardless of race

_____ Black, not Hispanic origin

_____ American Indian or Alaska Native

_____ White, not of Hispanic origin

_____ Asian or Pacific Islander

English Rose Day School – Child Questionnaire

Please take a few minutes to answer the questions below. This will help us get to know your child better.

Child's Name: _____ (as you want him/her to be called at school)

1. Please list the names and ages of your child's brothers and sisters, as well as household members.
2. What holidays does your family celebrate at home?
3. Has your child previously attended pre-school or day care?
4. Does your child have any health problems or allergies?
5. Does your child have any difficulties with speech?
6. Does your child receive services such as speech, PT or OT or behavioral?
7. Has your child been evaluated for early intervention services or special Education Pre-K services?
8. Is your child afraid of anything?
9. What responsibilities does your child have at home?
10. What forms of discipline do you use at home?
11. What holidays are celebrated at your home?
12. What expectations do you have for this year? What specific things would you like to see happen this year?
13. If your child is reading, how did he/she learn and how long has he/she been reading?

14. Does your child have anything he/she is really interested in that we might be able to incorporate into our program (i.e. dinosaurs?)

15. Is there anything special you would like us to know about your child?

Please use the remainder of this form to provide us with any other information that you would like to share with us in order for us to know your child better prior to the start of school.