



## Bigelow Cooperative Daycare Center

Dear Friends,

Welcome to the \_\_\_\_\_ school year!!!

Attached please find the required paperwork for the coming school year. The forms include information specific to Bigelow so that we may get to know you a little better and information required by the State of Massachusetts.

**Please date all forms 9/5/ \_\_\_\_\_ (date of admission) to ensure that the paperwork is valid for one year. You are welcome to update the forms at any time throughout the year.**

**Please fill out these forms completely. If a question does not apply to your child, write N/A (not applicable). If you are unable to get the forms in on time, please let us know. The forms must be in Bigelow's possession before the first day your child begins school. Please notify us if any of the information changes from the time you submit the forms.**

Included forms **required** by the State of Massachusetts are:

### **Child Enrollment Form**

This form provides General information about your child, his/her parent(s) or guardian(s) and his/her physician.

### **Developmental History and Background Information Form**

If you have previously filled out a Developmental History form for your child at Bigelow, please update as needed or write "No Changes from Previous Year," sign and date.

### **Immunization Record**

**Physical Exam Form: Most physicians have a standard form that they will provide for school, camp and daycares please let me know if you need Bigelow to provide with a form for your child's physician to complete.**

According to the EEC, Bigelow is required to obtain an immunization record for each child as well as a written physician's statement indicating that the child has had a complete physical examination within a year of entering the program and then annually.

We are also required to have a lead screen on record pursuant to Department of MA Department of Public Health requirements. All children, regardless of risk, must be screened for lead poisoning at least once between the ages of nine and twelve months and annually thereafter at ages two and three.

*Children are admitted to the program only if an immunization record has been submitted prior to admission AND a written physician's statement is submitted within 30 days after admission indicating that the child has had a complete physical examination within one year prior to admission and then annually, or obtains written verification from the child's parent(s) that they object to such an examination on the ground that it conflict with their religious beliefs.*

See information about mandatory flu vaccine included in this packet.

#### **Off Site and Photo Authorization Form**

Permission for staff to take children on neighborhood walks, parks etc. This form also authorizes Bigelow to photograph your child for both in school and website documentation. Teachers may use their personal devices to take photos of the children for documentation purposes. Please know that by signing this form you are permitting Bigelow staff to use their personal devices to photograph and video your child. Teachers are required to delete all photos once they have been sent to the Homeroom App.

#### **First Aid and Emergency Medical Care Consent Form**

Form authorizing staff appropriately trained to administer first aid/CPR if needed.

#### **Individual Health Care Plan Form: must be completed for all children with allergies/chronic health issue**

This form is needed ONLY if your child has an allergy or other chronic health need that would require attention outside of our normal practices.

#### **Transportation Plan and Authorization Form**

This form provides information on how your child will be arriving and departing from school each day.

**Important note: If your child will be going home with anyone other than his/her parent, you must notify the school in writing (e-mail or note on the attendance sheet) on a daily basis. You can also provide written permission for anyone who will be picking up frequently.**

#### **Sunscreen Permission Form**

If you would like for us to apply sunscreen to your child, please provide us with an unexpired bottle of sunscreen, labeled with your child's first and last name.

### **Permission/Letter Explaining ASQ Screening**

Bigelow conducts a developmental screening of all of our children upon entrance to the school. Both parents and teachers complete the ASQ screening tool so that we have a baseline for assessment

### **Can be completed on an as needed basis:**

#### **Unanticipated Non-Prescription Medication Authorization Form for Mild Symptoms**

You can choose to have your **pediatrician sign** the Non-Prescription, over the counter medication form for Tylenol or Motrin or other over the counter medications. The Authorization Form for Non-prescription Medications needs to be filled out **only once** annually by your physician to include the dosage information. Bigelow will administer non-prescription medication if **you have provided the medication** and we have written permission on file from both the parent and physician. The child must have been administered the medication prior to receiving it at Bigelow to ensure that the child is not allergic to that medication. Please provide Bigelow with the medication at the time the form is submitted.

### **Can be completed on an as needed basis:**

#### **Medication Consent Form**

Bigelow will need you and your physician to sign the Medication Consent form every time there is a need for Bigelow to administer **prescription** medication to your child. The medication must be in the original container from the pharmacy.

This form is also used in the event that your child needs Bigelow to administer topical, non-prescription medication NOT applied to an open wound or broken skin such as diaper cream or lip balm. Administration of this medication **needs only a parent or guardian's signature** but all lines on the form must be completed.

### **Allergies**

**Please be reminded that Bigelow is a nut free environment. Bigelow does not purchase or serve children any foods that have been manufactured on machinery or in a facility that processes nuts.**

**Please note that individual children do bring in food items for their own consumption that have been manufactured on machinery or in a facility that processes nuts.**

**If this is an issue for your family please inform the office immediately.**

Please see the office to ensure the proper forms have been completed.

If you have any questions, please don't hesitate to call the office.

I look forward to seeing you soon.

Best,

Dawn Lorino  
Executive Director

