

AUM EARLY LEARNING CENTER

INFORMATION FORM

NAME OF CHILD _____

BIRTH DATE _____ Age: _____

Name Child is called at home _____

Male _____ Female _____

Address of Child _____ Zip _____

Parent's Address (if different from child) _____

Home Phone _____ Cell Phone _____

Does child have any physical disabilities? _____

List any special problems or limitations your child may have (allergies, previous existing illness or condition, sunburn sensitivity, diet requirements, long-term medications, emergency treatment for insect bites) which the staff should be aware of: _____

List of persons authorized to pick up your child: _____

What language(s) are spoken at home? _____ Primary language _____

Child's favorite activity _____, favorite pet or plaything _____

What opportunity does child have to be involved with other children? _____

Name and ages of others in family home _____

What holidays are important to your culture? _____

What values are most important to your family? _____

Name of part-time or full-time person who cares for child in parent's absences: _____

Child's previous daycare/preschool? _____

Has your child ever been dismissed from a daycare/preschool? If so, please explain: _____

Method of discipline used at home: _____

What hobbies, interests, and experiences can you as parents share with our school? _____

Please share with us some of your feelings regarding your child's potential growth, and any information that will assist us in facilitating this growth and development: _____

Because the Early Learning Center is a laboratory setting for students at AUM, the following releases are needed. **Please initial each:**

_____ My child has permission to go on field trips with the AUM-ELC.

_____ My child has permission to be photographed in connection with activities at the AUM-ELC, and for those photographs to be made public.

_____ I give my permission for my child to be observed while involved in research activities with AUM students concerning the AUM-ELC.

_____ I agree for my child to work with AUM students in teaching/learning activities. I understand all activities will be approved and supervised by the Center's professional staff.

_____ I assume responsibility for any emergency treatment that the professional staff of the ELC deem necessary. I understand that the ELC professional staff will engage the University Police/911 Emergency Medical Team, only if myself, or those persons authorized by me, or my personal physician cannot be reached.

Parent's Signature _____ Date _____

AUM-ELC

HEALTH/EMERGENCYRECORD

AUTHORIZATION FOR EMERGENCY MEDICAL CARE

Child's Name _____ Birth Date _____ Age _____

Address _____ Home Phone _____

Father's Name _____ Bus/ Cell Phone _____

Mother's Name _____ Bus/ Cell Phone _____

Parent's address if different from child _____

Relative or neighbor to be contacted in case of emergency if unable to reach parent:

Name _____ Phone _____

Name _____ Phone _____

MEDICAL INFORMATION:

List any special problems or limitations your child may have (allergies, previous existing illness, sunburn sensitivity, diet requirements, long-term medications, emergency treatment for insect bites) which the staff should be aware of: _____

Treatment to be given: _____

Does your child have a disabling or limiting condition? _____

In the event that I cannot be reached to make arrangements for emergency medical attention, I authorize the professional staff to take my child to:

Licensed Physician _____ Phone _____

Address _____

Doctor to be called if above not available _____ **Phone** _____

Name Health Insurance Company: _____

Policy # _____ Name of Policy Holder: _____

I give my consent for necessary treatment when my child is in the care of this physician and/or hospital and I assume all responsibility for any expenses incurred.

Signature of Parent/ Guardian

Date

Auburn University at Montgomery Early Learning Center Registration for Emergency Notification System

In an effort to keep everyone on our campus safe in the event of an emergency, Auburn Montgomery uses **AUM ALERT** – a voice and text messaging system that provides critical information in the event of severe weather and other campus emergencies.

AUM ALERT enables officials to send updates and instructions via voice messages, emails and text messages to landlines, desktops and mobile devices.

We strongly recommend that you register at least one mobile number for text messages. Your mobile carrier's text messaging rates apply, but AUM will use the system **only in emergency situations**.

If you receive an **AUM ALERT**, you should monitor calls and messages for further updates.

Specific instructions to parents and guardians will come from the ELC. You should not enter campus to pick up your child unless instructed to do so by ELC staff.

Please use the phone numbers and email addresses that you have access to throughout the day. AUM can register four phone numbers and two email addresses per child. We strongly recommend that you register at least one mobile number for text messages. Your mobile carrier's text messaging rates apply, but AUM will use the system only in emergency situations.

Child's Name _____

Father's Name _____ Cell# _____

Work# _____ Home# _____

E-Mail Address _____ Other _____

Mother's Name _____ Cell# _____

Work# _____ Home# _____

E-Mail Address _____ Other _____

(Please be reminded that if numbers or email addresses change, it is a MUST that you notify our office immediately at 244-3441 for the **AUM ALERT to be effective.)**

SUNSCREEN PERMISSION FORM

___ I give permission for the faculty and staff at the AUM Early Learning Center to apply sunscreen on my child, _____, as needed to participate in outdoor activities.

___ Due to skin sensitivity and allergies, I will apply sunscreen daily on my child, _____, prior to arriving at school. *AUM Early Learning Center staff may apply the sunscreen I provide that is labeled and kept in my child's cubby/backpack.*

Parent Name: _____

Parent Signature: _____

Date: _____

AUM EARLY LEARNING CENTER

Hand Sanitizer Permission Form

Keeping hands clean is one of the most important steps we can take to avoid getting sick and spreading germs to others whether inside or outside of the center. It is best to wash your hands with soap and clean running water for a least 20 seconds. Children and staff must wash their hands with soap and water before eating or handling food and after toileting. At other times, if soap and clear water are not available, the use of hand-sanitizing product to clean your hands may be used as an alternative.

Guidelines when using alcohol-based hand sanitizers:

- Apply a dime size amount of product to the palm of one hand
- Rub hands together to move the product over all surfaces of hands, including the back of the hands, and fingers
- Rub hands together until the hands are dry
- Always follow manufacturer's instructions
- Hand sanitizers must be maintained inaccessible to children
- All children must be supervised by a staff member when using hand sanitizers

I give permission for the AUM Early Learning Center to allow my child _____ to use hand sanitizer periodically through the school day as needed or as directed by the teachers, in addition to using soap and warm water to clean his/her hands while at school.

Parent/Guardian's Signature

Date