

Beginners Kollege
Infant/Toddler Care (Infant– 36 Months)

Beginners Kollege

Child Care Centre



Learn ● *Play* ● *Explore*

Beginners Kollege

Infant/Toddler Care (Infant– 36 Months)

Philosophy

At Beginners Kollege, we know each child is unique. We strive to provide a nurturing, loving, and creative environment for children. We are sensitive to their social, emotional, intellectual, and physical needs. We provide developmentally appropriate programs that focus on the process of learning while also helping them to enjoy different successful experiences. We encourage not just learning, but also the love of learning.

Our Curriculum

We provide distinct types of materials to help improve the seven development domains. We offer a range of learning materials, a positive environment and activities that meet the individual developmental needs and group skills of children. Every day we walk through the local field, park, and forest so that children have a chance to connect with their local environment.

When inside the facility, if our daily program resonates with an educational video, we use it to instruct the children about daily and monthly subjects. We understand that older people can be at the heart of the early learning agenda and their knowledge of cultural traditions and language can be of great benefit to children, families, educators, and the community. We involve parents as much as possible, for example when it comes to learning, we let parents talk about their work or culture. Even during COVID-19 we organize the same events, but on zoom as graduation and Christmas party. We invited parents and grandparents to watch and support zoom. We also zoomed in with Santa.

We spend time with children as much free play and play outside, helping when they ask for help. We take care of the children in every way for their safety, well-being, and nutritional needs. We make sure they feel loved in the center all day long. We respect the emotions, words, and feelings of children.

We understand the situation and differences of each child. We also include the diversity of different families with books about different families, such as a single parent, two parents led by a household and a culture, adoptive parents, stepchildren, etc. We also provide various toys and books for cultural diversity. We include learning about indigenous and three diverse groups in the curriculum, we have various materials that we provide to children, including books, matching games, toys, puppets, puzzles. We also include various activities, such as art projects, and tutor children in a circle about their history and culture.

In conclusion, our facility understands that Canada is home to people with different ethnicities and different values. Our goal is to provide each child and their family with a service that gets their needs met appropriately. We will continue to grow into a bigger facility with the help of our local families.

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Our Location

Unit 2,4&6 - 12350

Harris RD Pitt

Meadows, BC

V3Y 0C5 Phone:

(604) 457-2555

beginnerskollege@yahoo.com

www.beginnerskollege.com

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Program Information

Infant/Toddler Care (Infant – 36 Months)

Hours: 7:00am -6:00pm

<i>October's Fee 2020 – August 2021</i>		<i>Reduction Fee</i>	<i>Parent portion</i>
5 Days Per Week	\$1400/month	\$350	\$1050
4 Days Per Week	\$1200/month	\$280	\$920
3 Days Per Week	\$880/month	\$210	\$670
2 Days Per Week	\$640/month	\$140	\$500
Extra Day	\$80/day		

- Full Time and Part Time program available 2/3/4/5 Days per week.
- The non- refundable registration fee is \$75.

Subsidy

- Beginners Kollege accepts government subsidies for families that qualify.
- If applicable, a valid childcare subsidy authorization number is required for children receiving government childcare subsidies. Parents should ensure that the subsidy authorization renewal is in place one month before expiration of their existing subsidy. If a subsidy authorization number is not provided by the first of the month, a cheque must be provided by the parent and Beginners Kollege will issue a refund cheque when the subsidy payment is provided.
- <https://myfamilyservices.gov.bc.ca>

Security Deposit

Along with your completed parent contract, please remit payment of the non-refundable registration fee and the deposit (**equal to one month's fees**). The deposit will be cashed and held in account with us to be used towards your last month's fees. It will be accepted with one complete month of notice. Mid-month notices will not be accepted.

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Holidays

- Beginners Kollege will be closed on the following statutory holidays:
New Year's Day, Family Day, Good Friday, Easter Monday, Victoria Day, Canada Day, BC Day, Labor Day, Thanksgiving Day, Remembrance Day, Christmas Eve (Early closure), Christmas Day, Boxing Day
 - We will be closed from Christmas Day to New Year's Day.
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Daily Program plan

A flexible yet predictable daily schedule increases your child's capacity for learning.

The truth is your child will have the best individual care because of a carefully planned daily schedule.

You have dropped your child off for the day and you cannot help but wonder what are they going to do all day? How will the staff know when she is hungry? What if he gets bored with the toys? What will the staff do if he cries? Will she miss me too much? Keeping children in a routine helps them feel secure and ensures that all their needs are being met. So, rest assured, your child is being cared for by trained professionals.

*We will provide you with a monthly calendar. Any updates will be posted on the calendar or telegram as well as pictures of your child's daily activity.

A TYPICAL DAY AT BEGINNERS KOLLEGE CHILDCARE CENTRE

To answer some of the questions you might be thinking regarding what your child will do all day, the activities of a typical day are listed below. Most daycares stick to the schedule with to-the minute precision, making your child feel like part of an assembly line. The teachers at Beginners Kollege Childcare Centre know that children may require more time for some activities and less time for others on any given day. For instance, if the children are captivated in a science project and it is evident that they are learning, the teachers will encourage them to finish their project rather than rushing them on to the next activity. Conversely, if the project takes less time than allotted for, the teachers will move on. Here is an outline of your child's day:

Suggested paragraph instead of the one above; simplified approach perhaps.

The following sections will help ease your mind about what your child will learn and what their daily routine looks like. The teachers at Beginners Kollege Childcare Centre are dedicated to your child's development and recognize that although predictability is healthy, flexibility is often necessary. Therefore, the following daily schedule is only a guide and is adjusted depending on the children needs.

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INFANT/TODDLER (AGE INFANT TO 36 MONTHS) DAILY SCHEDULE

INFANT

- 7:00 -7:30 - Arrival/Breakfast
- 7:30 -7:45 - Free Play
- 7:45 - 8:30 - Wash Hands/ Snack/ Diaper Change
- 8:30 - 9:00 - Circle Time/ Art Time
- 9:00 - 9:15 - Getting ready to go outside (putting on the outdoor stuff)
- 9:15 - 10:45 - Outdoor Play
- 10:45 - 11:00 -Taking off the outdoor stuff/ Wash hands
- 11:00 -11:30 – Lunch
- 11:30 -12:00 - Diaper Change
- 12:00 - 2:30 - Nap Time
- 2:30 - 2:45 - Wash hands
- 2:45 - 3:15 - Snack Time
- 3:15 - 3:45 - Change Diaper
- 3:45 - 4:00 - Free Play
- 4:00 - 4:15 - Getting ready to go to Toddler Room
- 4:15 - 6:00 - Circle Time/ Table Activity/ Free Play/ Dismissal

All times may vary

TODDLER

- 7:00 -8:30 arrival/breakfast/free play
- 8:30-9:30 washroom/diaper change/morning snack
- 9:30-10:00 circle time
- 10:00-10:15 ready to go outside/washroom
- 10:15-11:15 outside
- 11:15-11:45 washroom/table play /letter
- 11:45-12:15 lunch/washroom/diaper change
- 12:15 -2:30 nap
- 2:30-3:30 afternoon snack/washroom/diaper change
- 3:30-4:00 arts
- 4:00-4:30 circle time
- 4:30-6:00 free play.

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INFANT/TODDLER (AGE 0 TO 36 MONTHS) SKILLS & DEVELOPMENT

Our primary focus is to encourage your child's development. The following is a list of areas that your child will work on during a typical day:

Social skills such as sharing, taking turns, listening, participating, and asking for help.

Cognitive skills such as colors, shapes, numbers, matching, sorting and language.

Creativity such as dress up, exploring different types of media, dance, creative movement, music, and art.

Self-help skills such as eating on their own, dressing themselves and toilet training when they're ready.

Special days such as special guest, concerts, community visits, water play and picnics.

A FLEXIBLE DAILY SCHEDULE ALLOWS YOUR CHILD TO LEARN MORE

As mentioned above, this is just a guide to how the day progresses. Children have different needs each day. Allowing them individual needs helps your child learn more. If they are tired or have been sick, they may not have the attention span to complete an entire activity, but your child may benefit from another kind of activity that develops another set of skills. A flexible schedule allows your child to continue to benefit from the varied and diverse curriculum.

WE need the following items for Infant /Toddler Care

* Please label your child's items *

- Sippy Cup
- Lunch and snacks
- Diapers
- Diaper cream
- wipes
- 4 sets of clothes
- 4 sets socks
- Bedding: blanket, fitted sheet 52" *28"
- Outside shoes
- Inside shoes

- Washable marker (10 pack)

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- 3 large tissue boxes

*** Earthquake Emergency Kit**

Please send them in large Ziploc bag with your child's name clearly marked on the outside.

- Silver safety solar blanket (Canadian Tire)
- Small flashlight with batteries
- 1 personal size package of tissue
- A few Band – aids
- Travel size package of wet- wipes
- Personal comfort letter, written by Mom or Dad to reassure their child. Include a family photo.
- 1 small comfort toy (teddy, doll etc. no bigger than a beanie baby)
- Small note pad and pen or pencil
- 3 nutrition bars & Juice boxes that your child likes to eat
- An extra set of clothes.

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Parent Contract

Payment Agreement

Fees are payable on the 1st of each month. To complete registration process and secure your child's spot, post-dated cheques are required for six months of year.

_____ Post-dated cheques are payable on the 1st of each month from _____ to _____. Monthly fee is \$ _____.

_____ Post-dated cheques are payable on the 1st of each month from _____ to _____. Monthly fee is \$ _____.

No exemption in fees will be allowed due to illness or family vacations. NSF charges are \$25.00.

Full Tim or Part Time. Days _____.

Tax Receipt issue to: _____.

(Please initial) _____

Security Deposit

_____ (Equal to one month of fees) and will be used to cover the space and your payment. The deposit will be cashed and held in account with us to be used towards your last month's fees. It will be accepted with one complete month of notice. Mid-month notices will not be accepted.

Please initial) _____

Fees and Withdrawal policy

Enrolment is expected for Six month of year **by Six post-dated cheque twice a year**. Initialing below means the enrollment policy has been explained.

Withdrawals must be dated the 1st of the month. Notice to withdraw must be received by Beginners Kollege administration in writing, 30 days prior to date of withdrawal.

In lieu of notice, a full month's fees are payable to Beginners Kollege.

(Please initial) _____

Application Fee

Remit an application fee of \$75 to Beginners Kollege. The application fee guarantees a space at Beginners Kollege. The application fee is forwarded to your account each year, It is non-refundable.

(Please initial) _____

Subsidy

Beginners Kollege accepts government subsidies for families that qualify.

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Daycare fee is _____, subsidy pays, _____ and parent Portion is _____.

(Please initial) _____

SIGNATURE OF PARENT OR GUARDIAN PROVIDING INFORMATION		
SIGNATURE of Parent / Guardian	PRINT NAME	DATE
SIGNATURE of Parent / Guardian	PRINT NAME	DATE

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FULL NAME OF CHILD		Place photo here Current student Picture Required
USUAL NAME OF CHILD (if different)		
STARTING DATE		

PERSONAL INFORMATION		
CHILD'S DATE OF BIRTH) (DD/MM/YYYY)	GENDER <input type="checkbox"/> Male <input type="checkbox"/> Female	FACILITY USE ONLY WITHDRAWAL DATE
ADDRESS		
POSTAL CODE	TELEPHONE () -	
PARENT OR GUARDIAN (Full name) Birthday (/ /)	PARENT OR GUARDIAN (Full name) Birthday (/ /)(DD/MM/YYYY)	
ADDRESS (if different above)	ADDRESS (if different above)	
TELEPHONE ()	TELEPHONE ()	
WORK ADDRESS/ALTERNATE LOCATION	WORK ADDRESS/ALTERNATE LOCATION	
Occupation	Occupation	
CELL PHONE/PAGER ()	CELL PHONE/PAGER ()	
HOURS AT THIS LOCATION	HOURS AT THIS LOCATION	
Email Address	Email Address	
Check one: <input type="checkbox"/> Married <input type="checkbox"/> Single; <input type="checkbox"/> Divorced; <input type="checkbox"/> Other _____ *Custody Information: Protection order or Custody Agreement must be on file		
Siblings: Name _____ Birthday(DD/MM/YYYY) (/ /) Name _____ Birthday(DD/MM/YYYY) (/ /) Name _____ Birthday(DD/MM/YYYY) (/ /)		

EMERGENCY HEALTH INFORMATION	
CARE CARD NUMBER	Private Insurance Medical Plan/Private Insurance-Subscriber's Name:

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FAMILY DOCTOR/CLINIC NAME	DOCTOR/CLINIC TELEPHONE ()
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CONSENT FOR EMERGENCY CARE
I authorize the staff at the childcare center to call a medical practitioner or ambulance/transport child to emergency medical care, in the case of accident or illness of my child(ren), if the parent cannot immediately be reached Yes <input type="checkbox"/> No <input type="checkbox"/>
(Please initial) _____

ALTERNATE PERSONS(S) AUTHORIZED TO PICK UP CHILD (other than parent/guardian listed above, include emergency pickup)				
Name	Relationship	Telephone	Authorized to pickup	Authorized to call in an Emergency

CHILD'S IMMUNIZATION STATUS
Is your child up to date on immunizations? Yes <input type="checkbox"/> No <input type="checkbox"/> Not immunized <input type="checkbox"/>
COMMENTS

HEALTH INFORMATION (attach a separate sheet, if necessary)
REGULAR MEDICATION(S) AND REASONS FOR (please list)
ALLERGIES AND TREATMENT OF (please list)
INJURY(S), ILLNESS(ES) OR OPERATIONS YOUR CHILD HAS AND INCLUDE DATE(S)
<ol style="list-style-type: none"> 1. Please describe any concern(s)/ issues regarding your child's health (seizures, asthma, vision, hearing, etc.) 2. Please describe any concern you may have regarding your child's development (i.e. behavior, vision, hearing, speech, language, mobility, etc.) 3. Describe any specific care instruction regarding 1) and/or 2) above
OTHER HEALTH CARE PROFESSIONALS INVOLVED IN YOUR CHILD'S LIFE (e.g. occupational therapist / physical therapist)

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ANY OTHER INFORMATION I SHOULD KNOW
<p>Telephone Permission I/We give permission to Beginners Kollege Child Care Centre to contact me/us at my/our home, work and personal phone if needed.</p> <p style="text-align: right;">(Please initial) _____</p>
<p>Photo/Video Permission Throughout the year, we take photos or videos of our student at work, playing on field trips and at the special events. I/We understand that Beginners Kollege Child Care Centre will take photographs/videos during school time and fieldtrips. These pictures may be posted on Beginners Kollege Child Care websites.</p> <p style="text-align: right;">(Please initial) _____</p>
<p>Playground Permission Throughout the year, the program consists of going for walks and visit Harris park. I/We give permission for my child to go on neighborhood walks and visit the park as well use the playground equipment.</p> <p style="text-align: right;">(Please initial) _____</p>
<p>Field Trips and outings I give permission for my child to participate in spontaneous field trips and outings. Beginners Kollege will obtain permission in advance from parents for major Field trips.</p> <p style="text-align: right;">(Please initial) _____</p>
<p>Conduct: If a child's behavior becomes dangerous to him/herself, other children, or staff, Beginners Kollege has the right to terminate the contract, without notice, with a refund for days unattended. .</p> <p style="text-align: right;">(Please initial) _____</p>
<p>I/We acknowledge the importance of keeping Beginners Kollege informed of changes in address, phone, numbers, work contacts and emails.</p> <p style="text-align: right;">(Please initial) _____</p>

SIGNATURE OF PARENT OR GUARDIAN PROVIDING INFORMATION		
SIGNATURE of Parent / Guardian	PRINT NAME	DATE
SIGNATURE of Parent / Guardian	PRINT NAME	DATE

NOTE: This information may be reviewed by Fraser Health Authority Licensing staff as per legislation.

FACILITY USE ONLY (<i>Facility has provided a copy of the following</i>)		
1. Prepayment policy	Yes <input type="checkbox"/>	No <input type="checkbox"/>
2. Behavioral Guidance	Yes <input type="checkbox"/>	No <input type="checkbox"/>

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ADDITIONAL INFORMATION ABOUT YOUR CHILD (OPTIONAL)

GROUP EXPERIENCES		
WHAT IS/ARE YOUR CHILD'S FAVOURITE TOY(S) / ACTIVITIES		
HAS YOUR CHILD HAD PREVIOUS PLAY GROUP EXPERIENCE? Yes <input type="checkbox"/> No <input type="checkbox"/>		
HOW DOES YOUR CHILD BEHAVE TOWARD OTHER CHILDREN? (E.G. SEEKS OTHERS OUT, FEELS SHY)		
EMOTIONAL		
HOW DOES YOUR CHILD REACT WHEN LEFT WITH UNFAMILIAR PEOPLE AND/OR IN UNFAMILIAR SITUATIONS?		
DOES YOUR CHILD HAVE ANY PARTICULAR FEARS? PLEASE DESCRIBE		
WHAT SUGGESTIONS DO YOU HAVE THAT WOULD HELP STAFF MAKE YOUR CHILD'S TRANSITION INTO THIS PROGRAM EASIER?		
FAMILY AND GENERAL HOUSEHOLD INFORMATION		
PLEASE LIST THE NAMES OF THE SIGNIFICANT PEOPLE IN YOUR CHILD'S LIFE (E.G. SIBLINGS, GRANDPARENTS, ETC)		
PRIMARY LANGUAGE SPOKEN IN THE HOME	OTHER LANGUAGE	
NAME OF ENGLISH-SPEAKING PERSON (IF NEEDED)	TELEPHONE	
EATING AND NUTRITION		
LIST YOUR CHILD'S FAVOURITE FOOD		
LIST ANY DISLIKED FOOD		
PLEASE DESCRIBE ANY PARTICULAR EATING PATTERNS		
ARE THERE ANY RELIGIOUS OR ETHNIC OBSERVANCES RELATED TO FOODS?		
SLEEPING		
NAP TIME	HOW LONG TO SETTLE	TIME OF WAKING
BEDTIME	HOW LONG TO SETTLE	TIME OF WAKING
DOES YOUR CHILD TAKE A FAVOURITE COMFORTER (E.G. BLANKET OR TOY) TO BED? Yes <input type="checkbox"/> No <input type="checkbox"/> IF YES, DESCRIBE AND TELL US IF IT IS "NAME"		
WHAT IS YOUR CHILD'S MOOD UPON WAKENING?		
TOILETING		
IS YOUR CHILD TOILET TRAINED? Yes <input type="checkbox"/> No <input type="checkbox"/> PARTIALLY <input type="checkbox"/>		
PLEASE INDICATE CHILD'S FREQUENCY OR PATTERNS FOR BOWEL MOVEMENTS		
DESCRIBE ASSISTANCE NEEDED FOR TOILETING		
WHAT "SPECIAL" WORD DOES YOUR CHILD USE FOR?	URINATION:	BOWEL MOVEMENTS:
_____	_____	_____