

# Starshine Preschool Enrollment

Fill out the attached enrollment form in its entirety so we are in compliance with Missouri state inspection standards. It is important that we have current, up to date, contact information. If you are not already on our Starshine's Remind app, please join now by downloading the Remind app and join Starshine's class with code @starshine1. It is imperative that you are following Starshine on social media to be up to date as well.

## Enrollment

To enroll, there is a non-refundable enrollment fee of \$50.

## Monthly Tuition

For the 2022-2023 school year, Starshine Preschool's monthly tuition will be \$250 per month. Monthly tuition is due the first week of the month.

## Meet the Teacher

Meet the Teacher will *tentatively* be the evening of Tuesday, September 6, 2022. You will bring your first month's tuition, school supplies, and any other required paperwork to this special night. Required paperwork to bring to Meet the Teacher will be included in the Enrollment Packet that you will receive over the summer. This includes a current physical form, up to date immunization records, emergency contact forms, a signed copy of the Notice of Parental Responsibility, etc.

## Start date

The *tentative* first day of the 2022-2023 school year will be Wednesday, September 7, 2022.

## Keep in mind...

- If you are enrolling a three year old, they must be potty trained to be placed in the Threes or PreK classrooms.



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES  
SECTION FOR CHILD CARE REGULATION  
**CHILD CARE ENROLLMENT FORM FOR LICENSE-EXEMPT FACILITIES**

FACILITY/PROVIDER NAME	ADMISSION DATE	DISCHARGE DATE
CHILD'S NAME	GENDER	BIRTHDATE
ADDRESS (STREET, CITY, STATE, ZIP CODE)		

**IDENTIFYING INFORMATION**

MOTHER'S/GUARDIAN'S NAME	HOME TELEPHONE NUMBER
ADDRESS (STREET, CITY, STATE, ZIP CODE) OR CHECK IF SAME AS ABOVE <input type="checkbox"/>	CELL PHONE NUMBER
E-MAIL ADDRESS	
EMPLOYER OR SCHOOL ATTEND	WORK/SCHOOL SCHEDULE
EMPLOYER/SCHOOL ADDRESS (STREET, CITY, STATE, ZIP CODE)	WORK TELEPHONE NUMBER
FATHER'S/GUARDIAN'S NAME	HOME TELEPHONE NUMBER
ADDRESS (STREET, CITY, STATE, ZIP CODE) OR CHECK IF SAME AS ABOVE <input type="checkbox"/>	CELL PHONE NUMBER
E-MAIL ADDRESS	
EMPLOYER OR SCHOOL ATTEND	WORK/SCHOOL SCHEDULE
EMPLOYER/SCHOOL ADDRESS (STREET, CITY, STATE, ZIP CODE)	WORK TELEPHONE NUMBER

**EMERGENCY CONTACT AND PERSONS AUTHORIZED TO TAKE CHILD FROM FACILITY  
(OTHER THAN PARENT) AT LEAST ONE EMERGENCY CONTACT IS REQUIRED.**

NAME	RELATIONSHIP TO CHILD	TELEPHONE NUMBERS (CELL, WORK, HOME)
ADDRESS (STREET, CITY, STATE, ZIP CODE)		
NAME	RELATIONSHIP TO CHILD	TELEPHONE NUMBERS (CELL, WORK, HOME)
ADDRESS (STREET, CITY, STATE, ZIP CODE)		

**AUTHORIZATION FOR EMERGENCY MEDICAL CARE**

I UNDERSTAND THAT I WILL BE NOTIFIED AT ONCE IN CASE OF AN EMERGENCY WITH MY CHILD, AND I WILL MAKE ARRANGEMENTS FOR MEDICAL CARE OF MY CHILD WITH THE PHYSICIAN OR HOSPITAL OF MY CHOICE.

IF I CANNOT BE REACHED TO MAKE NECESSARY ARRANGEMENTS, OR IN A CRITICAL EMERGENCY REQUIRING MEDICAL CARE, I AUTHORIZE

DAY CARE PROVIDER

TO CONTACT THE FOLLOWING:

<b>PHYSICIAN OR CLINIC</b>	
NAME	TELEPHONE NUMBER
<b>PREFERRED HOSPITAL</b>	
NAME	TELEPHONE NUMBER

**ACKNOWLEDGEMENTS**

A	I HAVE BEEN INFORMED OF THE REQUIRED HEALTH AND SAFETY INSPECTIONS AND THE INSPECTION FORMS ARE AVAILABLE FOR REVIEW.	PARENT/GUARDIAN INITIALS
B	WHEN MY CHILD IS ILL, I UNDERSTAND AND AGREE THAT S/HE MAY NOT BE ACCEPTED FOR CARE OR REMAIN IN CARE.	PARENT/GUARDIAN INITIALS
C	I <input type="checkbox"/> DO <input type="checkbox"/> DO NOT GIVE PERMISSION FOR FIELD TRIPS/EXCURSIONS. I UNDERSTAND I WILL BE NOTIFIED IN ADVANCE WHEN THEY ARE PLANNED.	PARENT/GUARDIAN INITIALS
D	I <input type="checkbox"/> DO <input type="checkbox"/> DO NOT GIVE PERMISSION FOR THE FACILITY TO TRANSPORT MY CHILD.	PARENT/GUARDIAN INITIALS
E	I HAVE BEEN NOTIFIED THAT I MAY REQUEST NOTICE AT INITIAL ENROLLMENT OR ANY TIME THERE AFTER WHETHER THERE ARE CHILDREN CURRENTLY ENROLLED IN OR ATTENDING THE FACILITY FOR WHOM AN IMMUNIZATION EXEMPTION HAS BEEN FILED.	PARENT/GUARDIAN INITIALS

**HEALTH REPORT FOR SCHOOL-AGE CHILD****CHILD'S HEALTH HISTORY AND CURRENT HEALTH PROBLEMS**

MY CHILD IS IN GOOD HEALTH, IS ABLE TO PARTICIPATE IN GROUP CARE, HAS NO SPECIAL HEALTH OR MEDICAL REQUIREMENTS.

MY CHILD IS ABLE TO PARTICIPATE IN GROUP CARE BUT HAS SPECIAL HEALTH OR MEDICAL REQUIREMENTS AS LISTED BELOW.

ANY ALLERGIES, SPECIAL MEDICAL CONDITIONS, INCLUDING CHRONIC HEALTH PROBLEMS

ANY SPECIAL MEDICATIONS AND/ OR RESTRICTIONS

PARENT/GUARDIAN SIGNATURE

DATE

FORM TO BE RETAINED FOR ONE YEAR AFTER DISCHARGE.

FILING: FILE FORM IN CHILD'S INDIVIDUAL RECORD.



## Emergency Contact Card

Child's Name \_\_\_\_\_  
Birthdate \_\_\_\_\_ Phone # \_\_\_\_\_  
Address \_\_\_\_\_  
Mother's Name \_\_\_\_\_ Work# \_\_\_\_\_  
Father's Name \_\_\_\_\_ Work# \_\_\_\_\_  
Names of two people to call in an emergency if parents cannot be reached.  
1. \_\_\_\_\_ Phone# \_\_\_\_\_  
2. \_\_\_\_\_ Phone# \_\_\_\_\_  
Child's Physician \_\_\_\_\_ Phone # \_\_\_\_\_  
I hereby give permission to the Starshine Preschool for my child to receive emergency treatment in the event that I cannot be reached.  
Signature \_\_\_\_\_  
Date \_\_\_\_\_

## Emergency Contact Card

Child's Name \_\_\_\_\_  
Birthdate \_\_\_\_\_ Phone # \_\_\_\_\_  
Address \_\_\_\_\_  
Mother's Name \_\_\_\_\_ Work# \_\_\_\_\_  
Father's Name \_\_\_\_\_ Work# \_\_\_\_\_  
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Child's Physician \_\_\_\_\_ Phone # \_\_\_\_\_  
I hereby give permission to the Starshine Preschool for my child to receive emergency treatment in the event that I cannot be reached.  
Signature \_\_\_\_\_  
Date \_\_\_\_\_



MISSOURI DEPARTMENT OF ELEMENTARY AND SECONDARY EDUCATION  
OFFICE OF CHILDHOOD – CHILD CARE COMPLIANCE

**RELIGIOUS ORGANIZATION CHILD CARE FACILITY NOTICE OF PARENTAL RESPONSIBILITY**

LEGAL NAME OF FACILITY StarshinePreschool	DVN 000976627
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PHYSICAL ADDRESS (STREET, CITY, STATE, ZIP CODE) 400 W Maple Avenue, Independence, MO 64050
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FACILITY TELEPHONE NUMBER 816-254-6900	FACILITY E-MAIL ADDRESS Starshinepreschool@hotmail.com
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**INSPECTIONS**

Section 210.211 RSMo exempts this religious organization child care facility from state licensing and supervision by the Department of Elementary and Secondary Education(DESE). It is state inspected only for fire, health, and sanitation requirements as indicated below. Inspections are available on the Show Me Child Care Provider Search and can be accessed at <https://dese.mo.gov/childhood/child-care/find-care>

NAME OF AGENCY AND TYPE OF INSPECTION	ADDRESS	TELEPHONE NUMBER	INSPECTION	DATE
Office of Childhood - Child Care Compliance	6800 E 63rd Street, Suite 600, Raytown, MO 64133	816-350-5463	PENDING <input type="checkbox"/> APPROVED <input checked="" type="checkbox"/> NOT APPROVED <input type="checkbox"/>	4/21/22
Fire Marshal's Office (Fire Safety Inspection)	P.O. Box 844 Jefferson City, MO 65102	573-544-6517	PENDING <input type="checkbox"/> APPROVED <input checked="" type="checkbox"/> NOT APPROVED <input type="checkbox"/>	12/14/21
Local Health Office or DHSS (Sanitation Inspection)	233 N Memorial Drive, Independence, MO 64050	816-325-7180	PENDING <input type="checkbox"/> APPROVED <input checked="" type="checkbox"/> NOT APPROVED <input type="checkbox"/>	11/9/21

**STANDARD STAFF/CHILD RATIOS ESTABLISHED BY THIS FACILITY**

AGE RANGE	NUMBER OF STAFF	NUMBER OF CHILDREN	STAFF/CHILD RATIOS FOR LICENSED CENTERS	AGE RANGE	NUMBER OF STAFF	NUMBER OF CHILDREN
Under 2 years of age	1 staff member for every	4	Under 2 years of age	1 staff member for every	4	
2 to 4 years of age	1 staff member for every	2 years: 8; 3-4 years:10	2 years of age	1 staff member for every	8	
5 years of age and older	1 staff member for every	10	3 and 4 years of age	1 staff member for every	10	
<b>TOTAL NUMBER OF CHILDREN ENROLLED BY THIS FACILITY:</b>			5 years of age and older	1 staff member for every	16	

**BACKGROUND CHECK REQUIREMENTS**

Section 210.254 RSMo requires notification that background checks have been conducted under the provisions of section 210.1080 RSMo. Section 210.1080 RSMo specifies criminal background checks for child care staff members. The requirements for religious organizations operating a child care facility are as follows

- Facilities operated by a religious organization that receive federal funds for providing care for children must have qualifying background screening results for child care staff members as defined in 210.1080.1(1) RSMo.
- Facilities operated by a religious organization and that do not receive federal funds for providing care for children are not required to have qualifying background screening results for all child care staff members pursuant to 210.1080.9 RSMo.
- Child care staff members of facilities operated by a religious organization that receive federal funds for providing care for children, with disqualifying background screening results are prohibited from being on the premises during child care hours.
- Facilities operated by a religious organization that receive federal funds for providing care for children, must request criminal background checks for child care staff members every 5 years, as defined in 210.1080.1(1) RSMo.

BACKGROUND CHECKS HAVE BEEN CONDUCTED AS REQUIRED BY SECTION 210.1080 RSMO.

Yes  No

**FACILITY DISCIPLINE AND EDUCATIONAL PHILOSOPHY/POLICIES**

THE DISCIPLINARY PHILOSOPHY AND POLICIES OF THIS FACILITY ARE:  
Starshine Preschool uses positive reinforcement and redirection by using principles from Conscious Discipline. Physical punishment is not used. Discipline is designed to protect the safety of everyone and promotes a positive relationship between caregiver and child as well as between child and child.

THE EDUCATION PHILOSOPHY AND POLICIES OF THIS FACILITY ARE:  
Starshine Preschool offers experiences in physical, social, emotional, intellectual and spiritual settings. Active learning occurs in developmentally appropriate environments to stimulate creativity and curiosity.

**REQUIRED SIGNATURES**

Section 210.254, RSMo requires the facility to furnish two copies of this document to a parent(s) upon enrollment of a child. Parents acknowledge by signature that they have read and accepted the information contained in this document. One copy of this signed document is given to the parent(s); the other copy is retained in the child's record at the facility.

PARENT(S)	DATE
PRINCIPAL OPERATING OFFICER/FACILITY DIRECTOR <i>Adriana Lopez</i>	DATE 7/12/22
INDIVIDUAL RESPONSIBLE FOR THE RELIGIOUS ORGANIZATION – PASTOR, MINISTER, PRIEST, ETC. <i>John C. [Signature]</i>	DATE 7/13/22

The Department of Elementary and Secondary Education does not discriminate on the basis of race, color, religion, gender, gender identity, sexual orientation, national origin, age, veteran status, mental or physical disability, or any other basis prohibited by statute in its programs and activities. Inquiries related to department programs and to the location of services, activities, and facilities that are accessible by persons with disabilities may be directed to the Jefferson State Office Building, Director of Civil Rights Compliance and MOA Coordinator (Title VI/Title VII/Title IX/504/ADA/ADAAA/Age Act/GINA/USDA Title VI), 5th Floor, 205 Jefferson Street, P. O. Box 480, Jefferson City, MO 65102-0480; telephone number 573-526-4757 or TTY 800-735-2966; email [civilrights@dese.mo.gov](mailto:civilrights@dese.mo.gov).

# Parental Student Screening Form

Filling out this form helps staff at Starshine Preschool get a better understanding of your child's emotional and developmental standing. This information helps us prepare and set your child up for success.

Child's Name: \_\_\_\_\_

Child's age: \_\_\_\_\_ Child's DOB: \_\_\_\_\_

Please list any allergies your child has:

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Please list any medication your child may need while in our care:

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Check all statements that are true/may be true for your child:

- Is not potty trained
- Seems to have speech/language delays
- Has lots of energy
- Has short attention span
- Seems clumsy when walking or running
- Needs assistance to manipulate small objects

If necessary, elaborate on the above statements:

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OPTIONAL: Have there been any big, life changes that may play into any behavior we may see from your child? (ex; divorce, birth of a child, death in the family, relocation, etc)

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INDEPENDENCE FIRST UNITED METHODIST CHURCH/  
STARSHINE PRESCHOOL

400 W. Maple Avenue -- Independence, MO 64050  
816-254-6900

PERMISSION TO USE PHOTOGRAPH

I authorize Independence First United Methodist Church or Starshine Preschool to use photographs of my child/ren for promotional purposes in any type of media, including it's website. The photographs may not be used for profit without my express permission. I understand that I will not be paid or rewarded for providing this authorization.

\_\_\_\_\_  
Parent's Name (Please print)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent's Signature

\_\_\_\_\_  
Child's Name





## 2022-2023 Calendar

### **September**

6th - Meet the Teacher Night

7<sup>th</sup> - FIRST DAY OF SCHOOL

29th- Grandparents Day  
(3-5 yr olds; 11:30-12:30)

### **October**

4th-6th - Fire Prevention week (fire truck visit)

13 or 20- Pumpkin Patch

? - Fall Pictures

### **November**

8th - No School/Election Day

22nd- Thanksgiving Feast

23rd/24th- Thanksgiving Break

### **December**

13<sup>th</sup>- Christmas Program (3-5 yr olds)

14th - Gingerbread Day

15<sup>th</sup>-Christmas Parties

20th- 3rd- Christmas Break

### **January**

4<sup>th</sup>- New Year Celebration

12th or 19th- KC Zoomobile

26th- Pastries with Parents

### **February**

2nd- Groundhogs day/Pj Day

14th- Valentines Parties

### **March**

Feb 28th- 2nd Dr. Seuss Spirit Week

9th - Spring Picnic

14th-16th - Spring Break

? - Spring Pictures

### **April**

6th- Easter Egg Hunt

27th- Pre-k field trip

### **May**

2nd-4th- Teacher Appreciation Week

16th- Spring Program

17th- Last day of school

# School Supply List 2022-2023

## Toddlers:

- 1 pack of Baby Wipes
- 1 box Crayola Washable Markers
- 1 Bottle Foaming Hand Soap
- 1 roll Paper Towels
- 4 small/2 large boxes of Kleenexes
- Labeled Diaper Bag/Backpack
- 1 Labeled spill-proof Tumbler
- Labeled package of Diapers/Pullups
- Labeled change of clothes
- 1 small Blanket for nap

## Threes:

- 1 pack Baby Wipes
- 1 roll Paper Towels
- 1 pair of Fiskar scissors
- 2 Elmer Glue Sticks
- 1 bottle of white glue
- 1 box Crayola washable markers
- 1 boxes Crayola crayons
- 1 Bottle Foaming Hand Soap
- 1 labeled Backpack
- 1 Labeled spill-proof Tumbler
- Labeled change of pants, t-shirt, underwear, socks (should be potty trained)
- 1 small Blanket for nap

## Mixed Pre-K/Pre-K:

- 1 pack Baby Wipes
- 1 roll Paper Towels
- 1 pair of Fiskar scissors
- 2 Glue Sticks
- 1 bottle of clear glue
- 2 boxes Crayola washable markers
- 1 box Crayola crayons
- 1 Bottle Foaming Hand Soap
- 1 labeled Backpack
- 1 Labeled spill-proof Tumbler
- Labeled change of clothes/underwear
- 1 small Blanket for nap

Month	Theme	Color	Shape	Dates
Sept.	I'm special/ Friends	Yellow	Square	6th- Meet the Teacher 7th- First Day 29th- G-parents Day
Oct.	Five Senses/ Body Parts	Orange	Circle	4th-6th- Fire Prevention Week 9th- Lisa Birthday 17th- Staff Meeting ?- Pumpkin Patch 27th- Fall Parties 30th- Jessica Birthday
Nov.	Health and Nutrition/ Thanksgiving	Brown	Triangle	8th- No School ?- Fall Picture Day 22nd- TG Feast 23rd-24th- BREAK
Dec.	Christmas	Red	Star	13th- Christmas Program 14th- Gingerbread Day 15th- Christmas Parties 20th-29th- BREAK
Jan.	Animals	Black & White	Rectangle	4th- New Year Celebration 10th- Staff Meeting ?- KC Zoomobile 26th- Pastries w/ Parents
Feb.	Community Helpers	Pink	Hearts	2nd- Groundhogs Day/PJ Day 11th- Rian's Birthday 14th- Valentines Parties 24th- Michelle's Birthday
March	Ocean Dr. Seuss Easter	Purple	Diamonds	28th-2nd- Dr. Seuss Spirit Week 2nd- Stephanie's Birthday 9th- Spring Picnic ?- Spring Pictures 14th-16th- Spring Break 27th- Staff Meeting
April	Weather Space	Blue	Oval	6th- Easter Egg Hunt 27th- PreK Field Trip
May	Out in the garden	Green	Review	2nd-4th- Teacher Appreciation Week 16th- Spring Program 17th- Last Day of School 18th- Teacher Work Day

## 2022-2023 Bible Curriculum

### Unit Theme – Care and Listen

- Week 1 - A Good Samaritan Cares
- Week 2 - Jesus cares about a Samaritan Woman
- Week 3 - Mary Listens to Jesus
- Week 4 - Zacchaeus listens to Jesus
- Week 5 - Cornelius listens to Peter

### Unit Theme- Listening to God

- Week 6 - The walls of Jericho Fall
- Week 7 - Jonah and the big fish
- Week 8 - God leads Moses
- Week 9 - God gives Moses the Ten Commandments
- Week 10 - Joseph's special coat

### Unit Theme- God gives Jesus

- Week 11 - Baby Jesus is promised
- Week 12 - Baby Jesus' first bed
- THANKSGIVING BREAK
- Week 13 - Baby Jesus' birth
- Week 14 - Baby Jesus' first visitors

### Unit Theme- Daniel

- Week 15 - Teacher's choice
- CHRISTMAS BREAK
- Week 16 - Daniel obeys God
- Week 17 - Daniel and the lion's den

### Unit Theme- David

- Week 18 - David the Shepherd
- Week 19 - David becomes a king
- Week 20 - David and Goliath
- Week 21 - David and Jonathan
- Week 22 - David and Mephibosheth

### Unit Theme- God is with Noah

- Week 23 - God helps Noah obey
- Week 24 - God Protects Noah
- Week 25 - God's promise to Noah

### Unit Theme- Jesus is my Savior

- Week 26 - I can praise Jesus
- SPRING BREAK
- Week 27 - Jesus is alive
- Week 28 - Jesus' friends see him
- Week 29 - Jesus lives in Heaven

### Unit Theme- God created the World

- Week 30 - God created sky and land
- Week 31 - God created the plants
- Week 32 - God created animals/people
- Week 33 - Bible story review/Teacher choice

## STAYING IN THE KNOW

### HOW TO STAY CONNECTED

The list provided below will show you all the different ways to stay connected with Starshine Preschool!



FACEBOOK-  
[www.facebook.com/starshine.preschool/](http://www.facebook.com/starshine.preschool/)

Find pictures and fun!



REMIND app- Notifications of upcoming events and reminders

Text @starshine1 to 81010 to receive reminders straight to your phone or email



EMAIL- [starshinepreschool@hotmail.com](mailto:starshinepreschool@hotmail.com)

Email directly to Starshine director



TELEPHONE - 816-254-6900



Tuition payments can be paid through Paypal for a small fee

[Starshinepreschool@hotmail.com](mailto:Starshinepreschool@hotmail.com)

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Email directly to Starshine director



TELEPHONE - 816-254-6900



Tuition payments can be paid through Paypal for a small fee

[Starshinepreschool@hotmail.com](mailto:Starshinepreschool@hotmail.com)