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Congregation Emanu El
Executive Staff

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Pamela Silk, *Rabbi*

Samantha Kahn, *Rabbi*

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Myra Lipper, *Program Director*

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Becker Early Childhood Center
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PROGRAMS

Young Toddlers

15 months by September 1st
(Must be walking independently)

9:00 a.m. – 12:00 p.m.
9:00 a.m. – 2:30 p.m.

Monday – Friday,
Monday/Wednesday/Friday
or Tuesday/Thursday

Threes

3 years by September 1st

9:00 a.m. – 12:30 p.m.
9:00 a.m. – 2:30 p.m.

Monday – Friday
or Monday/Wednesday/Friday

Twos

2 years by September 1st

9:00 a.m. – 12:30 p.m.
9:00 a.m. – 2:30 p.m.

Monday – Friday,
Monday/Wednesday/Friday
or Tuesday/Thursday

Pre-K

4 years by September 1st

9:00 a.m. – 12:30 p.m.
9:00 a.m. – 2:30 p.m.

Monday – Friday

Bridge Class

Subject to Availability

5 years by September 1st

9:00 a.m. – 2:30 p.m.

Monday – Friday

Extended Care Available

8 – 8:45

2:30 – 5:30

MISSION

Becker Early Childhood Center provides a diverse environment rich with Jewish tradition and culture where children can grow and learn through experience and play. We encourage young children to grow socially, emotionally, intellectually, creatively, and physically while building a nurturing and safe community for the entire family.

PHILOSOPHY

To nurture children to grow intellectually, spiritually, socially, emotionally, and physically through a developmentally appropriate curriculum and environment that respects each child. We encourage respect of others and the physical environment through the positive values of Judaism. We believe that young children learn through play and need the opportunity to investigate their interests in a meaningful way. Children's growth and development is enhanced by the respectful individualized relationships developed between the teachers and children and teachers and parents.

CURRICULUM

The curriculum is always evolving as it prepares children to meet the challenges of the twenty-first century. The Jewish component of our program encourages children to experience the positive values of Judaism in a synagogue setting at an early age. The goals of the curriculum are to:

- Help children develop a positive sense of Jewish identity.
- Help children develop a feeling of self-worth and self-confidence by providing a safe environment in which the individuality of each child is valued.
- Encourage positive social awareness and interaction.
- Provide a secure climate where each child can develop socially, intellectually, and emotionally.
- Provide opportunities for language acquisition where each child can develop the ability to express ideas and feelings freely.
- Offer opportunities to develop large and small motor skills that are appropriate for each child.
- Guide teachers' development and intentional implementation of learning opportunities consistent with the program objectives.
- Allow for adaptations and modifications to ensure access to the curriculum for all children.
- Be responsive to family home values, beliefs, experiences, and language.

REGISTRATION

Registration for the next school year takes place in February. The process begins with an application to the school. Applications are accepted year-round. Applicant placement on our waiting list is determined by the date the application and non-refundable \$25 payment is received by Admissions. Applicants will begin receiving registration packets as spaces are available.

Priority registration includes children currently enrolled at Becker, their siblings, and Congregation Emanu El members. Enrollment is complete when the **non-refundable registration fee**, the Registration Form, and the Enrollment Agreement are received by the school. The fee holds the child's space for the upcoming school year.

Tuition and Payment

The Director, with the Board of Trustees of Congregation Emanu El, set the tuition and fees for the school each year. To be sure you qualify for our member tuition rate, please contact the Membership & Dues Coordinator. Tuition is based on a complete nine-month school year and must be paid:

- In full by July 31, or
- Nine equal payments commencing July 1 and completed by March 31 or
- Other payment plan as arranged with the Congregation's Membership & Dues Coordinator.

During the school year, no refunds of tuition will be given except under the following circumstances:

- If the family moves out of the Greater Houston area, or
- If both the Director and the parents mutually determine that Becker is not the appropriate placement for the child.

No refunds of tuition will be granted for holidays, vacations, emergency closures or brief illness. It is imperative that parents notify the Director immediately to inform the school of intent to withdraw from the program. Parents will be held responsible for the full balance of tuition once a child has begun the program.

Registration for Extracurricular Classes

The school provides opportunities for children to enroll in afternoon activities or nap time from 12:30 to 2:30 each day. Young Toddlers may enroll in After Lunch Rest and Play from 12:00 to 2:30. Enrollment for extracurricular classes is done on a semester basis. To participate in an extracurricular class, children must be enrolled to 2:30 for that day for the semester. Tuition for After Lunch Rest and Play will be added for the day your child is enrolled in an extracurricular class. Payment for the specific class is made to the company/individual providing the class. Additions, drops, or any other changes to the afternoon schedule must be completed by September 30 for the fall semester and January 30 for the spring semester.

OPTIONAL PROGRAMS

Baby Break

Baby Break is a free program for moms, dads, or caregivers and their young children, ages 4 to 24 months. This program, led by our Parenting Coordinator, is on Wednesdays at 9:00am. Music, arts and crafts, snack, and playtime is provided in our Parenting Center.

Extracurricular Classes

Becker offers many extracurricular classes. Parents have the option of enrolling their children each semester. Some classes are only offered for specific age groups. Class choices include Dance, Computer, Gymnastics, JumpBunch, and All Aboard Music and Math. Payment for the class is made to the company providing the program. Children must be enrolled for After Lunch Rest and Play to participate in these programs. There will be no classes on the days that the school has early dismissal, closing at noon or 12:30.

Extended Day

The Extended Day Program, Stay and Play, provides families with supervised care for our students before and after school hours. Stay and Play operates from 8:00 a.m. to 8:45 a.m. and 2:30 p.m. to 5:30 p.m. on all Becker regular school days. There will be no afternoon program on the days when the school has an early dismissal, closing at noon.

Drop-in Option

Becker offers parents the option to drop-in for After Lunch Rest and Play and/or Stay and Play on an as needed basis. Stay and Play has very limited availability. Please notify us in advance, a minimum of 24 hours, to drop-in for Stay and Play. The charges for this option are on the Schedule of Fees. These fees may be paid at the front desk or will be billed to your monthly billing statement.

Summer Camp

Becker offers a summer camp program. The summer is divided into sessions and children may attend one or all of these sessions as desired. Enrollment for the summer may be for any or all session(s) and must be paid in full by the date indicated on the summer contract. Only children enrolled for the regular school year will be accepted for the summer program.

These sessions differ from the usual school curriculum but still follow a theme, and include water play, movement activities, as well as visits from many talented people in the arts and sciences. Tuition and fees are in addition to those for the nine month school year.

Inter-Session

This program offers extended care to families whose child(ren) are enrolled in our Extended Care Program during many of our school breaks for an additional fee. Enrollment is dependent on teacher and space availability. The number of days available is determined by the length of the break. A child must be signed up for a minimum of one week and payment is required in advance. There are no daily drop-ins. After Summer Camp, the school is closed until the Fall Semester begins in late August.

STUDENT FORMS

The following forms, available on our website, must be completed and returned before school begins:

- Background Information Form
- Medical/Emergency Information Form including the Immunization Record
- Permission/Photo/Allergy Release
- Signature Page from Handbook
- Requests for extracurricular activities at additional charges to parents
- Email and phone contact information

No child will be admitted to class unless all forms are up-to-date and on file with the school office, prior to the beginning of the school year or on the day of enrollment.

If any information changes during the year (such as current address, phone numbers, email, or emergency names) please notify the school office immediately at 713-535-6400 or judyl@emanuelhouston.org.

ARRIVAL AND DISMISSAL

Children arrive between 8:45 a.m. and 9:00 a.m. Children arriving at school prior to 8:45 a.m. attend the Rise & Shine Program, for an additional fee. Daily activities begin at 9:00 a.m. Late arrival may be upsetting to your child and disruptive to the class.

Please remember to sign your child in and out in the book by the front door of the classroom. Arrival time is a good opportunity to speak briefly with your child's teachers and inform them of any changes that may have an effect on your child's day (awakening late, sleeplessness, etc.) Sharing such information enables teachers to be responsive to your child's needs and special interests.

All children enrolled in our programs must be brought to and picked up from their classroom by a parent or other designated adult. ***An adult must accompany children on the elevator. Never leave your child unattended in the classroom, school building, or on the playground.***

A child will not be released to anyone other than the parent or guardian or someone designated in writing by parents. If there is an unusual situation, we must have instructions IN WRITING from the parents, stating the name of the person who will pick up your child. Persons designated will be asked to show picture identification. Written instructions must be presented each day that a child is to be picked up by someone other than the usual person.

Late Pick-Up Policy

Dismissal time is 12:20 – 12:30 or 2:20 – 2:30 p.m.

Parents are to be at the classroom no later than 5 minutes after dismissal time. There will be one late warning per semester. If a parent calls to inform the school of the late situation, they will be charged at the hourly rate of \$10.00. Minimum charge will be one hour. **If a parent does not call the school, they will be charged at the rate of \$1.00 per minute.** Parents may pay at the front desk in cash or check for late fees, or the charges will be added to the monthly billing statement.

We understand that emergencies arise. Please call and notify the school if you are going to be late. This enables us to prepare your child and let him or her know that you will be here soon.

Drop-Off & Pick-Up

The following information is provided in an effort to assist you in dropping off and picking up your children safely.

Enter the parking lot on the west side and exit through the east. If you plan on parking on the upper levels of the garage, please enter on the east side.

1. Please be patient when waiting for a space.
2. The parking garage is a **cell phone-free zone** while driving or walking.
3. As always, **USE EXTREME CAUTION** in the garage and please **drive slowly and carefully.**
4. **All children must be escorted in and out of the building by an adult.**
5. While walking children into and out of the building, please hold their hands.
6. Please park your car in the designated spaces when dropping off or picking up your children.

If you have a sleeping or ill child in your car, please park close to the school entrance and notify the police officer. Someone will watch your car while you bring or pick up your other child or children.

Weather Emergencies

Severe weather may cause an emergency closing of the school. In case of flooding or other inclement weather, please check the radio station KTRH 740, one of the local television stations, or our website, www.beckerschool.org. If HISD cancels school due to a weather emergency, we will do the same.

During an emergency school closing, we will use Constant Contact, our email system, to email you of the closing as well as a phone calling system. Please be sure to give us the best emails as well as two phone numbers where we can leave messages (a form was included in the Fall Packet). If necessary, teachers and staff will initiate parent notification.

If there is an emergency pick-up situation, please let us know if someone other than yourself will be picking up your child. Your understanding and cooperation are appreciated during emergency conditions.

Emergency Drills

We practice, on a monthly basis, emergency drills; specifically fire and weather drills.

HEALTH POLICY

Each child must have a current immunization record and medical form on file in our office before he or she may participate in any program. (See list at the back of this handbook, Appendix 1.)

A physician must have examined each child within six months prior to the beginning of the school year. The examining doctor must sign the form. If your child is under-immunized because of a medical condition (documented by a licensed health professional) or a family belief, please provide documentation or a waiver supporting this decision.

The medical form provides space to include information about individuals that the school can contact in the event that we are unable to reach the parent/guardian regarding a sick child or in an emergency. Please list people that you know can be reached, and let them know that they have your permission to handle an emergency or to pick up your child if they are contacted.

Allergies

Please notify the office and your child's teachers of any allergies that your child has, as well as the severity of the allergy. It is essential that the teachers know if there are any foods that your child cannot have. The teachers will ask you for an action plan. Please ask the receptionist for the Allergy Action Plan form. In addition, please give us permission to post your child's name and allergy on the form enclosed in your packet.

Illness and Injury

The health and safety of your child is our primary consideration. **PLEASE DO NOT BRING YOUR CHILD TO SCHOOL IF HE OR SHE IS NOT FEELING WELL ENOUGH TO PARTICIPATE IN REGULAR ACTIVITIES.** If your child has a temperature above normal, a rash, discharge from the eyes or ears, a fresh cold, sore throat, cough, or gastrointestinal distress; please keep your child home.

The following is an excerpt from the Department of Human Resources Minimum Standards.

§746.301

What type of illness would prohibit a child from being admitted for care?

*Subchapter R, Health Practices
Division 3, Illness and Injury
09/01/03*

*Unless you are licensed to provide get-well care, **you must not admit an ill child for care if one or more of the following exists:***

- 1. The illness prevents the child from participating comfortably in child-care center activities including outdoor play;*
- 2. The illness results in a greater need for care than caregivers can provide without compromising the health, safety, and supervision of the other children in care;*
- 3. The child has one of the following, unless medical evaluation by a health-care professional indicates that you can include the child in the child-care center's activities.*

- (A) Oral temperature of 100.4 degrees or greater, accompanied by behavior changes or other signs of symptoms of illness.
- (B) Rectal temperature of 101.4 degrees or greater, accompanied by behavior or other signs or symptoms of illness; or
- (C) Armpit temperature of 99.4 degrees or greater, accompanied by behavior or other signs or symptoms of illness; or
- (D) Symptoms and signs of possible severe illness such as lethargy, abnormal breathing, uncontrolled diarrhea, two or more vomiting episodes in 24 hours, rash with fever, mouth sores with drooling, behavior changes or other signs that the child may be severely ill; or

4. A health-care professional has diagnosed the child with a communicable disease, and the child does not have medical documentation to indicate that the child is no longer contagious.

For the protection of all, children with colds (runny noses and coughs) are to be kept at home for **two or three days**, the time during which they are the most contagious. **A child must be free of fever without medication, vomiting, or diarrhea for a 24-hour period before returning to school.** A note from the child's doctor may be requested when a child returns to school after a contagious illness, or if he or she has a frequent runny nose.

If a child becomes ill while at school, he or she will be isolated from the rest of the group and parents will be notified IMMEDIATELY. If we are unable to reach either parent, the emergency numbers listed on the child's information form will be called. It is essential that parents (or those authorized by parents) will pick up the sick child without delay.

Please notify us immediately if your child has developed, or comes in contact with, any communicable illness (please refer to the list below). Parents are notified when there is a case of a communicable disease or illness in the class.

Disease Control Measures

The following conditions require exclusion from school attendance, per guidelines adopted by the Texas Department of Health, effective November 3, 2009. Exclusion shall continue until the readmission criteria for the conditions are met. The conditions and readmission criteria are as follows:

- (1) **amebiasis--exclude until treatment is initiated;**
- (2) **campylobacteriosis--exclude until after diarrhea and fever subside;**
- (3) **chickenpox--exclude until the lesions become dry;**
- (4) **common cold--exclude until fever subsides;**
- (5) **conjunctivitis, bacterial and/or viral--exclude until written permission and/or permit is issued by a physician or local health authority;**
- (6) **fever--exclude until fever subsides without use of fever suppressing medications;**
- (7) **fifth disease (erythema infectiosum)--exclude until fever subsides;**
- (8) **gastroenteritis--exclude until diarrhea subsides without the use of diarrhea suppressing medications;**
- (9) **giardiasis--exclude until diarrhea subsides;**
- (10) **head lice (pediculosis)--exclude until one medicated shampoo or lotion treatment has been given;**
- (11) **hepatitis A--exclude until one week after onset of illness;**
- (12) **infections (wounds, skin, and soft tissue)--exclude until drainage from wounds or skin and soft**

tissue infections is contained and maintained in a clean dry bandage; restrict from situations that could result in the infected area becoming exposed, wet, soiled, or otherwise compromised;

- (13) infectious mononucleosis--exclude until physician decides or fever subsides;
 - (14) influenza--exclude until fever subsides;
 - (15) measles (rubeola)--exclude until four days after rash onset or in the case of an outbreak, unimmunized children should also be excluded for at least two weeks after last rash onset occurs;
 - (16) meningitis, bacterial--exclude until written permission and/or permit is issued by a physician or local health authority;
 - (17) meningitis, viral--exclude until fever subsides;
 - (18) mumps--exclude until nine days after the onset of swelling;
 - (19) pertussis (whooping cough)--exclude until completion of five days of antibiotic therapy;
 - (20) ringworm--exclude until treatment has begun;
 - (21) rubella (German measles)--exclude until seven days after rash onset or in the case of an outbreak, unimmunized children should be excluded for at least three weeks after last rash onset occurs;
 - (22) salmonellosis--exclude until diarrhea and fever subside;
 - (23) scabies--exclude until treatment has begun;
 - (24) shigellosis--exclude until diarrhea and fever subside;
 - (25) streptococcal sore throat and scarlet fever--exclude until 24 hours from time antibiotic treatment was begun and fever subsided; and
 - (26) tuberculosis, pulmonary--exclude until antibiotic treatment has begun and a physician's certificate or health permit obtained.
- (b) The school administrator shall exclude from attendance any child having or suspected of having a communicable disease designated by the Commissioner of Health (commissioner) as cause for exclusion until one of the criteria listed in subsection (c) of this section is fulfilled.
- (c) Any child excluded for reason of communicable disease may be readmitted, as determined by the health authority, by:
- (1) submitting a certificate of the attending physician, advanced practice nurse, or physician assistant attesting that the child does not currently have signs or symptoms of a communicable disease or to the disease's non-communicability in a school setting;
 - (2) submitting a permit for readmission issued by a local health authority; or
 - (3) meeting readmission criteria as established by the commissioner.

Medication

“Medications shall be administered to a child only on the written, dated, and signed request of a licensed physician. The original label must be on the container with the physician’s name, child’s name, and instructions. All non-prescription medication shall be labeled with the child’s name and dated.”

-Department of Human Resources Minimum Standards

Parents are encouraged to schedule the administration of a student’s medication in such a manner that medication brought to school will be kept to a minimum. (For example, the physician may be able to prescribe the medication before/after school and at bedtime.)

Medicine (prescription or non-prescription) may be administered by the receptionist or administrative assistant upon request of a parent. The request must be on a Medication Form which is obtained at the reception desk. This form must be filled in completely, signed, and submitted with the medication to the

receptionist. **Please give the medicine to the receptionist at the front desk.** The receptionist or administrative assistant will verify that the right child receives the right medication in the right dose at the right time by the right method, using the five rights checklist. This checklist will be signed and dated each time medicine is administered. Parents or a designated adult must pick up the medicine from the receptionist.

It is the responsibility of the parent to verify that all medication brought to Becker Early Childhood Center is not expired and does not include ingredients that have been recalled. Any medication left at the school after the school year ends will be disposed of properly.

All medication (prescription or non-prescription) must be in its original container and properly labeled. A properly labeled prescription medication is one with a pharmacy label stating the student's name, the name of the medication, and the date the prescription was filled. Non-prescription medication must be in its original container and labeled with the student's name. This includes items such as Benadryl, insect repellent, sunscreen, diaper rash cream, etc.

Students may not carry or administer any medication to themselves. This includes cough drops, vitamins, etc.

Minor Mishaps

In the event of a minor mishap such as a bump, scrape, or bite, the child's teacher will complete a minor mishap form. This form describes the accident and what actions were taken. This form is signed by the teacher, the director, and the parent or guardian. Parents may keep a copy, and one is filed in the child's file.

SCREENINGS

Hearing, vision, speech, and language screenings are conducted once per school year on children that are three, four and five years old, by September 1st, by an outside team of trained professionals. The results are shared with the parents and teachers, and recommendations for further examinations will be made if the need for such is indicated. When a referral is recommended, the director calls or meets with the parents and provides appropriate resources. Forms for a hearing or vision referral must be returned to the school office. In addition, teachers will screen each child using the developmental screening, Ages and Stages Questionnaires as a baseline of information. This screening will occur during the first three months of school. These results will be shared with the parents during Fall Parent Teacher Conferences. If you would like more details on the screening or referral process, please contact the director.

FOOD

PLEASE LABEL LUNCH BOX, THERMOS, PLASTIC CONTAINERS and FOOD.

Daily, please send a well-balanced, nutritious lunch and a drink with your child. Please see Appendix 2 for the Texas Department of Family and Protective Services recommendation of daily food needs for children. **As a Jewish school we do not allow shellfish or pork products.** It is helpful if you portion and pre-cut your child's food in the way he or she is accustomed. We encourage the children's independence in feeding themselves. Uneaten portions of lunch will be returned in the lunch box, if possible and desired, so that you will be aware of your child's dislikes or changing appetite.

Due to severe allergies, some classrooms are peanut or nut sensitive. Information about the needs of your child's class will be given to you. If the class is nut sensitive, please respect the classroom needs

when you send your child's lunch and by checking with your child's teacher when you bring a snack to share.

Carbonated drinks are not permitted at any time. In the interest of safety, please do not send your child's lunch in glass containers. If your child is younger than four years old, please do not send the following: hot dogs – whole or sliced into rounds, whole grapes, nuts, popcorn, raw peas, large hard pretzels, spoonfuls of peanut butter, chunks of raw carrots, or meat larger than can be swallowed whole.

Catered lunches are an option for students for an additional charge. At the beginning of each semester, parents will be advised of selections available. If you choose to order catered lunches, payment is made to Congregation Emanu El on a semester basis.

Snacks

Nutritious morning snacks will be provided for each child. The school serves snacks that are nut free. **If your child has a food allergy, please note this on the Health Form and Registration Card and be sure the teacher is aware of the allergy.** Children enjoy hosting snack. A monthly sign-up sheet for snacks is posted outside of each classroom so that parents may volunteer to send snacks on a particular day. It will be a special day for your child and a treat for the entire class. Please contribute healthy snacks (low in sugar, without artificial sweeteners) and check with the teacher to verify that no child in the class has an allergy to the snack you may be planning to provide. Please save treats such as cookies and cupcakes for special occasions. Suggested snacks include fresh fruit, fresh vegetables, cheese, yogurt, bagels, rice cakes, whole grain crackers, and muffins. The school provides juice or water and snack on days that no one brings snack.

Birthdays

Celebrating a birthday at school is an exciting experience! You are always welcome to bring a special treat for your child's birthday. Sugary birthday treats, such as cupcakes, will be served at lunchtime. Please make arrangements with your child's teacher in advance. Invitations to home birthday parties will be distributed only when the entire class is invited.

SHABBAT

Our Kabbalat Shabbat on Friday morning is a highlight of each week, both in the classroom and at a group assembly. Children feel extra special when it is their turn to be the class IMMA (mother) and ABBA (father). Threes, Pre-K, and Bridge classes meet in the Chapel at 9:30 a.m. Young Toddlers and Twos classes meet in the Chapel at 10:00 a.m. Parents are always welcome to join us for Kabbalat.

Tzedakah (the giving of charity) is an important part of our Shabbat tradition. Every child is encouraged to bring a few pennies, or specific items, to help others. Each Friday morning, giving and sharing with others less fortunate is discussed and we collect tzedakah. Four times a year we collect items, such as toys or books to donate to a specific group in need. These drives help the children gain an understanding of giving and sharing and the importance of tzedakah.

SPECIAL NOTICE

There are holidays during the year that Becker Early Childhood Center does not observe. Although they have been secularized in our culture, we do not celebrate Halloween or Valentine's Day. We do not dress up in costumes on Halloween or pass out cards or candy on Valentine's Day. As always, we appreciate your cooperation in helping us maintain the Jewish character of our school in regard to these holidays. We do celebrate all of the Jewish holidays, which provide the children other times to dress up, exchange cards, and give and receive candy.

Animals

For health and safety reasons, please keep your pets at home.

CLOTHING

Part of each day, weather permitting, is spent outdoors playing. Please dress your child in appropriate play clothes that are comfortable and easy for young hands to fasten, and take on and off. Many activities are messy, fancy or special clothes are best left for other times. **Tennis shoes or other close-toed shoes with backs and buckle strap closure around the ankle are preferred; sandals with buckle strap closures at the top of the foot and ankle are acceptable.** Crocs, flip-flops, and ballet slippers (except during dance classes) are not allowed.

- Each child must have one (1) complete change of clothing (including socks and shoes) that is kept in his or her cubby.
- Children are encouraged to wear Becker t-shirts on Shabbat.
- Children must have a sweater or jacket during the winter months, an extra may be kept in their cubby.

PLEASE MARK ALL CLOTHING WITH YOUR CHILD'S NAME.

Toileting and Diapering

Parents are responsible for furnishing a supply of diapers and wipes for any child that has not completed toilet learning. Each child's supplies are kept separate, and parents are notified when it is time to replenish them. In an effort to be as sanitary as possible, teachers wear latex gloves when diapering, and changing paper is used to cover the changing table. Diapers are disposed of in a diaper genie. There is no place where soiled cloth diapers can be hygienically kept until dismissal time. For this reason, disposable diapers are required. **All children entering Pre-K must be using the toilet independently.**

FIELD TRIPS FOR 3s, Pre-K, and Bridge

Field trips are an important part of your child's education. During the school year, the older children will go on one or more field trips. The staff will make every effort to schedule field trips during school hours; however, some field trips may require your child to come earlier, stay later, or attend on a different day than his or her regularly scheduled school day.

Advance notice of field trips will be sent home with permission slips. No child may participate unless the teacher has the signed permission slip prior to the departure. Children must wear their Becker shirt for all field trips.

Siblings are not permitted to go on field trips. Your voluntary participation as a driver/chaperone will be appreciated by everyone, especially your own child. A field trip will be canceled if there is not enough adult participation. Please remember that as a field trip chaperone, your full attention is needed to supervise the children. Stay with the class group; when driving go directly to the location and return to the school afterwards. Please keep your phone for emergencies only when you are with the children, both when you are driving and during the field trip experience.

TEXAS CAR SEAT AND BOOSTER BELT LAWS MUST BE OBSERVED. ALL CHILDREN MUST BE BUCKELED IN A CAR SEAT.

Drivers must provide the school with a copy of their valid driver's license and insurance. Adults accompanying students on a field trip may not smoke at any time during the activity. Nannies, or other adults, may only drive and supervise the child of the family for whom they work.

RELEASING STUDENT INFORMATION

Information contained in student records will only be released to the parents/legal guardian and school personnel, except under the following conditions:

- Student information is requested by the court, relating to matters of litigation, may be obtained by issuance of a subpoena to the Director.
- A signed release form from the parents is given to a designated person/agency and to us.
- Parents must be current in their payments before academic records can be sent to another school.

Non-Custodial Parent

Becker Early Childhood Center abides by the provisions of the Buckley Amendment with respect to the rights of non-custodial parents. In the absence of a court order to the contrary, the school will provide the non-custodial parent with access to the academic records and to other school-related information regarding the child. If there is a court order specifying that there is to be no information given, it is the responsibility of the custodial parent to provide the school with an official copy of the court order.

DISCIPLINE MANAGEMENT PROCEDURE

Helping children to develop self-discipline and to conduct themselves in an acceptable and positive manner is a major behavioral objective of the school. Certain rules and regulations are a necessity in any group and serve as guidelines to acceptable behavior.

Each teacher develops classroom rules that the students are learning to follow. Using a positive discipline approach, children may be redirected, given choices or guided in problem solving and conflict resolution by their teachers. We focus on problem-solving skills, helping the children solve problems with their peers and develop positive relationships. Developmental levels and characteristics of the children are kept in mind when working with the children. Teachers handle most of the discipline problems that occur in their classes. The teachers provide the children with clear expectations and reinforce appropriate behaviors. Parents are informed and consulted regarding their child by written note, telephone, and/or conferences. Communication and cooperation between parents and teachers is essential for each child. Corporal punishment is not allowed at Becker Early Childhood Center.

CONFIDENTIALITY

Employees will, to the best of their ability, ensure confidentiality and privacy in regard to history, records, and discussions about the students and families served by Becker Early Childhood Center. Confidential information such as student conference forms and medical records are kept in the registrar's files and are not shared with anyone besides the child's teachers and the director without written permission from a parent (a signed Permission to Release Form). Licensing requires student records to be kept at the child-care center and must be available during hours of operation. The records must be kept for at least three months after the child's last day in school.

Psychological and speech evaluations that are shared with the school are kept in locked files in the Director's office. The information from the evaluations is shared with the child's teachers only when

requested by the parents. The information from these reports is never shared with anyone outside of the school.

Employees will not discuss or disclose any information about a student with anyone within or outside of the school, unless authorized by the Director, and a release form has been signed by the parent. *No student will be discussed with any parent other than that student's.*

COMMUNICATION

Ongoing communication between the home and school provides a better understanding of each child's needs, development, and progress, ensuring optimal success for every child. We encourage you, the parents, to bring your child to school and come into the classroom when dropping off and picking up your child. This helps develop and maintain the relationship between parents and teachers, which provides for continual communication in the best interest of your child.

Contact Information: Phone: 713-535-6400 Fax: 713-535-6493
Email: becdir@emanuelhouston.org

We will keep our lines of communication open with you by:

- Inviting you and your child to an Orientation before school begins to meet the teachers and see the classroom.
- Inviting you to Back to School Night.
- Scheduling Parent-Teacher Conferences during the school year.
- Calling to inform you of any unusual behaviors or specific incidents concerning your child.
- Emailing our school newsletter, **Becker Buzz**, and other notices home to keep you abreast of what is happening at school.
- Emailing updates and information regarding school activities and events through Constant Contact.
- Sending daily notes (My Day) to parents of students in Young Toddlers and Twos' Classes.
- Offering parent programs that give insight to our programming and your child's development.
- Providing a **Peek at Next Week** each week.
- Updating the calendar and other information on our website www.beckerschool.org.

We hope that you will keep the lines of communication open by:

- Notifying us of any event or changes at home that might have an effect on your child.
- Notifying us as soon as your child contracts or is exposed to a communicable disease.
- Notifying us immediately of any changes of address, phone, or emergency contact persons/numbers.
- Becoming actively involved in our Becker Parent Teacher Organization.
- Advising us of any resource people for young children or any special event in Houston that would enhance our program.
- Reading written notices sent from school.
- Contacting your teachers or the director if you have any concerns.

The last day of each week, your child's teacher will email you a **Peek at Next Week** highlighting the activities for the coming week and providing information regarding programs and activities that might require something brought from home. Please check your email for the **Peek at Next Week**. In addition,

you may request a hard copy of the *Peek* to be placed in your child's cubby along with letters and flyers, which are sent home on a regular basis. If you do not receive a *Peek*, please call the office.

Assessment

Teachers receive training yearly on assessment. The age level teams meet to discuss how information gathered from assessments can improve or update the curriculum.

The children at Becker are assessed by the teachers two times a year using a developmental checklist in preparation for Parent Teacher Conferences. At that time, information gained from ongoing teacher observation, samples of the children's work, and the developmental checklists is shared with the parents reviewing the child's strengths and weaknesses, areas of interest and needs. Standardized testing is not performed. Please feel free to ask your teachers about the purposes, values and uses of assessment in our program.

Parent-Teacher Conferences

Parent Teacher Conferences occur twice a year, once during the fall semester and the second during the spring semester. Your child's teacher will schedule two parent conferences to discuss your child's progress. These conferences are arranged at convenient times for all parties. They provide opportunities to understand the uniqueness of your child and give you an in-depth view of your child as part of a group. We encourage you to bring your questions, continued observations, and goals to the conference. This is an essential give-and-take experience benefiting the child, parents, and teachers.

To prepare for conferences, teachers compile their ongoing observations and samples of your child's work, prepare developmental milestone checklists for each child, and review information you have provided to them about your observations. Information shared as well as the written report is confidential, shared only with the individual child's parents.

The teachers will also call parents to inform them if any unusual behavior occurs. Parents are requested to inform the school of any unusual events or changes in the home (new baby, illness, trips, or visitors) so that teachers can better understand and support your child. Teachers are always available to conference by telephone or in person as needed.

Children's Product Safety

New licensing standards require that we certify that there are no unsafe children's products in use or accessible to children in the child-care center at any time. Our staff regularly checks the items used by children at the facility to ensure the safety of the children, including reviewing the Consumer Product Safety Commission's (CPSC) lists of recalled children's items. You can access a listing of unsafe children's products through the CPSC Internet website (www.cpsc.gov) or through the DFPS Internet website (www.dfps.state.tx.us).

VOLUNTEER OPPORTUNITIES

We invite you to volunteer and become involved in our school community. The Becker Parent Teacher Organization supports our school by providing volunteers and fundraising. All parents are invited to participate in the meetings and to volunteer. Meetings are held on the third Tuesday of every month at 7:15pm at Congregation Emanu El. There are many opportunities to volunteer, from bringing snack to driving on a field trip, or being a room parent to helping with one of the many events the organization arranges for the children. In addition, both the library and garden need on-going volunteers. Please let your child's teacher know if you are interested in either of those activities. Information is provided in the Becker Buzz and at our Welcome New Family events.

COMMITMENT

The success of our program and the optimal development of each child are dependent upon a shared commitment between staff and parents. We make every effort to individualize each child's learning experience at Becker. When needed, we work with you and any specialists with whom your child is working to create a plan for your child. Together we can provide an educational experience where home and school cooperate for the best interests of the child. Please contact the director if you ever have a concern or conflict with the class requirements for your child and your family values. We welcome your involvement in your child's early learning experience. There are many ways to become engaged. We invite you to volunteer and become involved in our school community. We welcome your comments and suggestions. Please feel free to call the school to speak to your child's teacher or the Director. The teacher or Director will return your call as promptly as possible.

If you would like information regarding minimum standards or the most recent Licensing report, please contact the Director. Our Licensing office may be reached at 713 940-5283 or www.dfps.state.tx.us.

Working together we can provide your child with a wonderful early learning experience.

Recommended Immunization Schedule for Persons Aged 0 Through 6 Years—United States • 2011

For those who fall behind or start late, see the catch-up schedule

Vaccine ▼	Age ►	Birth	1 month	2 months	4 months	6 months	12 months	15 months	18 months	19–23 months	2–3 years	4–6 years
Hepatitis B ¹		HepB	HepB			HepB						
Rotavirus ²			RV	RV	RV ²							
Diphtheria, Tetanus, Pertussis ³			DTaP	DTaP	DTaP	see footnote ³	DTaP					DTaP
<i>Haemophilus influenzae</i> type b ⁴			Hib	Hib	Hib ⁴	Hib						
Pneumococcal ⁵			PCV	PCV	PCV	PCV					PPSV	
Inactivated Poliovirus ⁶			IPV	IPV		IPV						IPV
Influenza ⁷						Influenza (Yearly)						
Measles, Mumps, Rubella ⁸							MMR			see footnote ⁸		MMR
Varicella ⁹							Varicella			see footnote ⁹		Varicella
Hepatitis A ¹⁰							HepA (2 doses)					HepA Series
Meningococcal ¹¹												MCV4

Range of recommended ages for all children

Range of recommended ages for certain high-risk groups

This schedule includes recommendations in effect as of December 21, 2010. Any dose not administered at the recommended age should be administered at a subsequent visit, when indicated and feasible. The use of a combination vaccine generally is preferred over separate injections of its equivalent component vaccines. Considerations should include provider assessment, patient preference, and the potential for adverse events. Providers should consult the relevant Advisory Committee on Immunization Practices statement for detailed recommendations: <http://www.cdc.gov/vaccines/pubs/acip-list.htm>. Clinically significant adverse events that follow immunization should be reported to the Vaccine Adverse Event Reporting System (VAERS) at <http://www.vaers.hhs.gov> or by telephone, 800-822-7967. Use of trade names and commercial sources is for identification only and does not imply endorsement by the U.S. Department of Health and Human Services.

1. Hepatitis B vaccine (HepB). (Minimum age: birth)

At birth:

- Administer monovalent HepB to all newborns before hospital discharge.
- If mother is hepatitis B surface antigen (HBsAg)-positive, administer HepB and 0.5 mL of hepatitis B immune globulin (HBIG) within 12 hours of birth.
- If mother's HBsAg status is unknown, administer HepB within 12 hours of birth. Determine mother's HBsAg status as soon as possible and, if HBsAg-positive, administer HBIG (no later than age 1 week).

Doses following the birth dose:

- The second dose should be administered at age 1 or 2 months. Monovalent HepB should be used for doses administered before age 6 weeks.
- Infants born to HBsAg-positive mothers should be tested for HBsAg and antibody to HBsAg 1 to 2 months after completion of at least 3 doses of the HepB series, at age 9 through 18 months (generally at the next well-child visit).
- Administration of 4 doses of HepB to infants is permissible when a combination vaccine containing HepB is administered after the birth dose.
- Infants who did not receive a birth dose should receive 3 doses of HepB on a schedule of 0, 1, and 6 months.
- The final (3rd or 4th) dose in the HepB series should be administered no earlier than age 24 weeks.

2. Rotavirus vaccine (RV). (Minimum age: 6 weeks)

- Administer the first dose at age 6 through 14 weeks (maximum age: 14 weeks 6 days). Vaccination should not be initiated for infants aged 15 weeks 0 days or older.
- The maximum age for the final dose in the series is 8 months 0 days
- If Rotarix is administered at ages 2 and 4 months, a dose at 6 months is not indicated.

3. Diphtheria and tetanus toxoids and acellular pertussis vaccine (DTaP). (Minimum age: 6 weeks)

- The fourth dose may be administered as early as age 12 months, provided at least 6 months have elapsed since the third dose.

4. *Haemophilus influenzae* type b conjugate vaccine (Hib). (Minimum age: 6 weeks)

- If PRP-OMP (PedvaxHIB or Comvax [HepB-Hib]) is administered at ages 2 and 4 months, a dose at age 6 months is not indicated.
- Hiberix should not be used for doses at ages 2, 4, or 6 months for the primary series but can be used as the final dose in children aged 12 months through 4 years.

5. Pneumococcal vaccine. (Minimum age: 6 weeks for pneumococcal conjugate vaccine [PCV]; 2 years for pneumococcal polysaccharide vaccine [PPSV])

- PCV is recommended for all children aged younger than 5 years. Administer 1 dose of PCV to all healthy children aged 24 through 59 months who are not completely vaccinated for their age.
- A PCV series begun with 7-valent PCV (PCV7) should be completed with 13-valent PCV (PCV13).
- A single supplemental dose of PCV13 is recommended for all children aged 14 through 59 months who have received an age-appropriate series of PCV7.
- A single supplemental dose of PCV13 is recommended for all children aged 60 through 71 months with underlying medical conditions who have received an age-appropriate series of PCV7.

- The supplemental dose of PCV13 should be administered at least 8 weeks after the previous dose of PCV7. See *MMWR* 2010;59(No. RR-11).

- Administer PPSV at least 8 weeks after last dose of PCV to children aged 2 years or older with certain underlying medical conditions, including a cochlear implant.

6. Inactivated poliovirus vaccine (IPV). (Minimum age: 6 weeks)

- If 4 or more doses are administered prior to age 4 years an additional dose should be administered at age 4 through 6 years.
- The final dose in the series should be administered on or after the fourth birthday and at least 6 months following the previous dose.

7. Influenza vaccine (seasonal). (Minimum age: 6 months for trivalent inactivated influenza vaccine [TIV]; 2 years for live, attenuated influenza vaccine [LAIV])

- For healthy children aged 2 years and older (i.e., those who do not have underlying medical conditions that predispose them to influenza complications), either LAIV or TIV may be used, except LAIV should not be given to children aged 2 through 4 years who have had wheezing in the past 12 months.
- Administer 2 doses (separated by at least 4 weeks) to children aged 6 months through 8 years who are receiving seasonal influenza vaccine for the first time or who were vaccinated for the first time during the previous influenza season but only received 1 dose.
- Children aged 6 months through 8 years who received no doses of monovalent 2009 H1N1 vaccine should receive 2 doses of 2010–2011 seasonal influenza vaccine. See *MMWR* 2010;59(No. RR-8):33–34.

8. Measles, mumps, and rubella vaccine (MMR). (Minimum age: 12 months)

- The second dose may be administered before age 4 years, provided at least 4 weeks have elapsed since the first dose.

9. Varicella vaccine. (Minimum age: 12 months)

- The second dose may be administered before age 4 years, provided at least 3 months have elapsed since the first dose.
- For children aged 12 months through 12 years the recommended minimum interval between doses is 3 months. However, if the second dose was administered at least 4 weeks after the first dose, it can be accepted as valid.

10. Hepatitis A vaccine (HepA). (Minimum age: 12 months)

- Administer 2 doses at least 6 months apart.
- HepA is recommended for children aged older than 23 months who live in areas where vaccination programs target older children, who are at increased risk for infection, or for whom immunity against hepatitis A is desired.

11. Meningococcal conjugate vaccine, quadrivalent (MCV4). (Minimum age: 2 years)

- Administer 2 doses of MCV4 at least 8 weeks apart to children aged 2 through 10 years with persistent complement component deficiency and anatomic or functional asplenia, and 1 dose every 5 years thereafter.
- Persons with human immunodeficiency virus (HIV) infection who are vaccinated with MCV4 should receive 2 doses at least 8 weeks apart.
- Administer 1 dose of MCV4 to children aged 2 through 10 years who travel to countries with highly endemic or epidemic disease and during outbreaks caused by a vaccine serogroup.
- Administer MCV4 to children at continued risk for meningococcal disease who were previously vaccinated with MCV4 or meningococcal polysaccharide vaccine after 3 years if the first dose was administered at age 2 through 6 years.

The Recommended Immunization Schedules for Persons Aged 0 Through 18 Years are approved by the Advisory Committee on Immunization Practices (<http://www.cdc.gov/vaccines/recs/acip>), the American Academy of Pediatrics (<http://www.aap.org>), and the American Academy of Family Physicians (<http://www.aafp.org>).

Department of Health and Human Services • Centers for Disease Control and Prevention

§746.3305 How do I know what a child’s daily food needs are?

*Subchapter Q, Nutrition and Food Service
December 2010*

- The daily food needs for children 12 months through two years are included in the following chart:

Food Groups	Number of Servings To Meet 1/3 Daily Needs	Number of Servings To Meet 1/2 Daily Needs	Serving Size
Milk	1 and 1/3	2	4 oz. Milk or 1/2 oz. Cheese or 4 oz. Yogurt
Meat/ Meat Alternative	1	1 and 1/2	1/2 to 1 oz. Cooked lean meat or 1/2 to 1 Egg or 1/4 c. cooked beans
Vegetables and Fruit	1 and 1/3 +	2 +	2 to 3 Tb. Cooked vegetables or 2 to 3 Tb. Canned fruit or 1/4 Small fresh fruit or 1/4 c. Juice
Whole Grains	1 and 1/3 +	2 +	1/2 Slice Bread or 1/4 c. Cooked Cereal or 1/4 c. Pasta or Rice or 1 or 2 Crackers

- (b) The daily food needs for children three years through five years are included in the following chart:

Food Groups	Number of Servings To Meet 1/3 Daily Requirement	Number of Servings To Meet 1/2 Daily Requirement	Serving Size
Milk	2/3 of One Serving	1	3/4 c. 1% Milk or 1 1/2 oz. Cheese or 3/4 c. Yogurt
Meat/ Meat Alternative	2/3 of One Serving	1	1/2 oz. Cooked lean meat or 3/4 Egg or 1/4 c. Cooked beans
Vegetable	1	1 and 1/2	1/2 c. Raw or cooked vegetable or 1/2 c. Raw leafy vegetable
Fruit	2/3 of One Serving	1	1/2 c. Canned or chopped fruit or 1 Piece fruit or melon wedge or 1/2 c. Juice
Whole Grains	2	3	1/2 Slice Bread or 1/4 c. Cooked cereal 1/2 oz. Ready to eat cereal or 1/4 c. Cooked pasta or rice or 3 to 5 Crackers

(c) The daily food needs for children six years and older are included in the following chart:

Food Groups	Number of Servings To Meet 1/3 Daily Requirement	Number of Servings To Meet 1/2 Daily Requirement	Serving size
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Milk	2/3 to 1	1 to 1 and 1/2	1c. 1% Milk or 1 & 1/2 oz. Natural cheese or 1 c. Yogurt
Meat/ Meat Alternative	2/3 to 1	1	2 oz. Cooked lean meat, poultry, or fish or 1/2 c. Cooked beans or 1/2 c. Tofu or 2 Tb. Peanut butter
Vegetables	1 to 1 and 2/3	2	1/2 c. Raw or cooked vegetables or 1/2 c. Raw leafy vegetable
Fruit	2/3 to 1 and 1/3	1 to 2	1/2 c. Canned or chopped fruit or 1 medium piece fruit or 3/4 c. Juice
Whole Grains	2 to 3 and 2/3	3 to 5+	1 slice bread or 1/2 c. Cooked cereal or 3/4 oz. Ready to eat cereal or 1/2 c. Cooked pasta or rice or 4-6 crackers

(d) You must serve enough food to allow children second servings from the vegetable, fruit, grain, and milk groups.

(e) If your child-care center is participating in the Child and Adult Care Food Program (CACFP) administered by the Texas Department of Agriculture, you may elect to meet those requirements rather than those specified in this section.

- *The American Academy of Pediatrics (AAP) recommends that children ages two and older should be served skim or 1% milk.*

- *Offer a variety of fresh or frozen fruits and vegetables.*
- *To help ensure that grains are whole-grain, look closely at the ingredient list to make sure the first ingredient listed is “whole grain.”*
- *Having food available to provide a second serving to a child who requests it helps to ensure the child’s daily nutritional needs are met.*