



TRAINING WHEELS

ILLNESS POLICY

Dear Parents;

Since we are in the middle of the cold and flu season, We thought it would be a good time to review our illness policy.

If your child comes to school when he/she is not feeling well, he/she will be more vulnerable to infection. It is in the best interest of your child and of others at training wheels to keep your child at home when he/she is ill.

A child needs to be well to be able to participate actively in the program.

1. After a fever, a child's temperature **MUST BE NORMAL** for 24 hours before he/she returns to school. If your child has vomited or had diarrhea he/she can not return to school for at least 24 hours.
2. If your child is well enough to come to school, we will expect him/her to be able to go outdoors (weather permitting).
3. Often, children may ask to come to school even if they are ill. Although your child may be disappointed, please keep them at home if they are sick.
4. If your child becomes ill while at school and you are called, please cooperate by picking up your child **PROMPTLY**. We will not call unless your child needs to be at home.

ADMITTING CHILDREN WITH INFECTIOUS DISEASE'S

Parents or guardians of any child enrolled in TRAINING WHEELS or making application for enrollment must notify us of any medical condition requiring special attention or consideration. Children inflicted with any infectious disease will have to be excluded from TRAINING WHEELS. When the child is free of all infectious diseases a physicians note to that effect must be submitted to the director. The child may then be readmitted.



ADMINISTERING MEDICATION

No medication can be given to a child without written consent and instructions from the doctor. Medicine must be in original bottle with the original prescription in place. Please fill out the medicine form and write it on the sign in sheet. Medicine goes in purple box on the top shelf in the kitchen or the metal box in the refrigerator. **DO NOT** put any medicine in you child's lunch box or cubby.

Please notify us if your child will not be attending school, thank you for your cooperation. We/I the undersigned, agree to the conditions of this illness policy.

Name of child _____

Parent Signature _____