Dear Parents,

The purpose of this handbook is to introduce you to Temple Beth Avodah Early Learning Center and our philosophy, traditions, and goals. Whether this is your child’s first time at our school, or is a returning student, we want this year to be a positive, happy, and fulfilling experience for both you and your child.

The contents of this handbook will serve as your reference to policies, guidelines, and more. We believe at Temple Beth Avodah Early Learning Center that early education is a true partnership between parents, staff, and students. We encourage parents to ask questions and express ideas and concerns to staff members.

Sincerely,
Heidi Baker, Director

Our Philosophy

Temple Beth Avodah Early Learning Center is dedicated to providing a warm, nurturing and stimulating environment for children; an environment that promotes self-esteem, respect for oneself and others, and a love of learning. Our low teacher-student ratio enables us to focus on the social, intellectual, emotional, and physical needs of each child. The school operates within the framework of a Reform Jewish environment. However, our program does not discriminate in providing services to children and their families on the basis of race, religion, special needs, cultural heritage, political beliefs, marital status, sexual orientation, national origin or disabilities. Toileting status is not an enrollment criteria. Temple Beth Avodah Early Learning Center is licensed by the Department of Early Education & Care located at 1250 Hancock Street, Quincy, MA 02169. They may be contacted at 617.472.2881 for program’s compliance history.

Program Goals

To develop the child’s positive self-image
To provide a strong Judaic atmosphere that fosters Jewish values.
To provide the development of social skills (participating, sharing, and interacting with others)
To encourage the child to make age-appropriate choices within a structured environment
To develop self-care skills and independence (bathroom, dressing, and nutrition)
To provide opportunities about symbols and concepts
To provide opportunities for mastering language and using it to produce desired results
To increase child’s awareness of and curiosity for the world

**Enrollment Procedure**

Parents are invited to visit the school and meet the staff. The Director explains policies, curriculum, schedule, and fees to the parents. The parents are given a brochure, fee schedule and application form. After a child is accepted, parents are given all appropriate forms. Once the child begins school, teachers will communicate daily to parents regarding their child’s adjustment to school. Parents may drop in at any time. Parent and child must visit school prior to starting.

Children usually remain in our preschool for a three to four-year period. At a minimum, children must be turning 15 months to begin school.

In addition, the following procedure is used:

- First preference is given to current Temple Beth Avodah members in good standing and returning students. Members are given priority (not guaranteed space) until November 15th of the year prior to their child’s attendance at the school.
- Preference is then given to siblings of current or former students enrolled in Early Learning Center.
- Enrollment for the early start option will begin on December 15th of the year prior to the child’s attendance at school.
- Children will be placed in classes at the discretion of the Director.
- Formal registration involves completing an application and paying a non-refundable deposit which is applied toward tuition. Completion of the application and payment of the registration fee will secure a place for the child.
School Hours of Operation
Regular School hours are Monday - Thursday from 9:00 a.m. - 12:00 p.m. (1:00 p.m. for the pre-kindergarten class). School closes at Noon on Friday for all classes. Additional hours are available through Early Drop Off, Lunch and Enrichment & Extended Day. We will provide an updated calendar each year.

School Closing Information
We follow the City of Newton school system regarding weather related school closings. If Newton closes due to inclement weather, we will close. If Newton has a delayed opening of one or more hours, we will be delayed by one hour and open at 10:00 a.m. Parents will be notified if school is closed by email and text. We do not make up days due to weather closings.

Payment and Refund Policies
The school payment schedule includes an initial deposit and payment options. A payment contract must be complete for a child to begin school. The initial deposit is non-refundable. If after making further payment, and enrolled child does not commence attending Temple Beth Avodah Early Learning Center, the payment will be returned only if another child fills the slot by May 1st of the year that they are enrolled to enter school. If a child leaves mid-year, a proportional refund of the tuition will be made, from the start of the next month, only if another child fills the available slot. Refunds cannot be made for a child’s temporary absence due to illness, vacations, etc., as the budget is based on enrollment not attendance. Refunds can not be made for unforeseen circumstances beyond our control including but not limited to: Weather, pandemic, epidemic, acts of war Tuition and enrichment tuition payments are payable on the dates due in the printed schedule, or by special arrangement with the financial officer. Failure to make payment by the appropriate deadline will result in suspension from the program.

Required School Forms
Prior to the start of school, we must have a face sheet, developmental history, health history, emergency authorization, field trip permission slip, and an emergency telephone number on file for each child. As part of the health history, the State of Massachusetts now requires the
Hib vaccine, varicella (chicken pox) vaccine 1, and lead testing in addition to other immunizations.

**Confidentiality of Family Information**

Information contained in a resident’s record is privileged and confidential. Information contained in children’s birth parents, foster and adoptive parent’s records shall be privileged and confidential. Information pertaining to children and their families is privileged and confidential. No licensee or educator may distribute or release information about a child or his/her family to any unauthorized person or discuss with any unauthorized person information about a child or his/her family without the written consent of the child’s parent.

All EEC child care and placement licensing regulations contain provisions that protect the information contained in children’s records from unauthorized use and from disclosure to anyone not directly involved in implementing the child’s program without written consent of the children’s parents. The intent of these regulations is to protect the privacy of children and families.

Therefore, early education and care and child placement programs and their staff may not distribute, share or discuss information (including photographs and other images) about children and families in their care by any means, whether written or verbal, using any medium, including but not limited to telephone, email or electronic text without the expressed written permission of the child’s parents or pursuant to a court order. Imagines or children, whether or not they are identified by name, as well as personal information related to children and their families, may not be posted on the publicly accessible portions of “Facebook” “My Space” or any other similar online directly, social utility or networking website under any circumstances. However, imagines of children and personal information related to children and families may be shared on the restricted, private portions of such websites only with the express written permission of the child’s parent.

Early education and care and child placement program staff may not discuss children and families in their care with anyone not directly involved in implementing the child’s program, including but not limited to other parents in the program, and may not distribute copies of information in a child’s record.
Absence Policy
Please send a text through Remini or email hbaker@bethavodah.org, if your child will be late or absent. You may also call the Temple number 617-527-0045 extension 110 and leave a message.

Late Pickup Policy
Please make every effort to pick your child up on time, as late pickups upset most children. In addition, our staff may have other responsibilities to attend to, please text, email or call the school to inform us if you are running late so we can make appropriate arrangements.

Clothing Guidelines
We recommend that you send your child to school in comfortable, washable clothing. Cooking, arts and crafts, and outdoor play provide for a great deal of messy fun! Warm winter clothing should include hats, mittens, boots, and snow pants. We are committed to go out every day weather permitting. Please label all belongings. Every child should have a change of clothes at school “just in case”. A complete change of clothing (pants, shirt, underwear, socks) is required and should be kept in the child’s cubby. No drawstring clothing or loose fitting jewelry is allowed.

Food Guidelines
Parents will provide all food for their child at school. We do not allow nuts or nut products, pork or shellfish in school. Parents may also be notified of additional allergies as needed.

Health Care Guidelines
Our staff members care first and foremost about the safety and health of your children. To that end, our staff members monitor the environment daily and immediately remove any potential hazards. Smoking is not permitted in any area used by the children. TBA Early Learning Center has a health care provider available on an on-call basis. In addition, each member of the staff is required to hold a current certificate in basic first aid by the American Red Cross or other equivalent training within six months of employment. A number of staff members hold both first aid and CPR certification for infants and children, and a first aid kit available on site. In the event of any illness or emergency, the teacher will notify the parents, guardians, or emergency numbers cannot be reached, the teacher will consult the family physician and make decisions as necessary for handling the situation. In the event that transportation to the nearest hospital is necessary, 911 will be called for an ambulance.
Health Care Policy
Emergency telephone numbers posted at each telephone.

In the event of any illness or emergency, the teacher will notify the parents, guardian, or emergency numbers which the parents have provided. If the parents and other emergency numbers cannot be reached, the teacher will consult the family physician and make decisions as necessary for handling the situation.

We do not take field trips in our program but if a trip was planned:
The teachers would take emergency release and contact information with them.

Emergencies and Illness at School
All staff members are trained in the Health Care Policy, injury prevention, first aid and CPR. At least two staff members are on the premises at all times during the hours of school operation.

Emergency Measures
Emergency care is any injury which requires treatment beyond minor first aid;
- Contact 911 (Transportation will be done by ambulance)
- Give operator information as listed above.
- Child will be accompanied to the hospital by a staff member who will remain with the child until the parent/parent designate arrives.
- Child’s Emergency Permission Form will be taken to the hospital by the staff member;
- Parent will be notified immediately by a staff member and will be told where child has been transported.
- If parent cannot be reached immediately the staff member will call all the parent designate(s) as listed in the child’s forms.
- Staff member at the hospital with the child will stay in telephone contact with the school.

Procedures for using and maintaining first aid equipment.
A first-aid kit is located in the common bathroom between the preschool classrooms. The location of the kits will be posted. The Director is responsible for the upkeep of the first aid kit. The Director will check and re-stock the first aid kit each month.
First aid kit will include: adhesive tape, band aids, gauze pads, gauze roller bandage, disposable non-latex gloves, instant cold pack, scissors, tweezers, thermometer, and CPR mouth guard.

Plan for evacuation in emergency (posted at each exit)
Each classroom teacher will maintain daily attendance records. The attendance list is posted in the classroom on a removable clipboard. When the center is evacuated, the teacher will take the attendance with them outside. The teachers will take attendance immediately.

The Director is responsible for evacuation drills to be held at different times of the day and practiced with all groups of children and staff every month using alternating exits. The Director will maintain documentation of the date, time, number of children and effectiveness of each drill. This will be posted in the Director’s office. A diagram of escape routes is posted in each classroom.

In the event that the building is deemed unsafe we will go to Memorial Spaulding School on Brookline Street.

Plan for mildly ill children
A child exhibiting any signs of illness will be carefully monitored to see if a fever is present. The following procedures will be used if a child appears ill:
a. The child will be isolated from the group;
b. The staff will immediately notify the parent of the child’s condition and request that he/she pick up the child
c. A staff member will stay with the child making him/her as comfortable as possible until he/she is picked up. Teachers will provide any food, drink, rest, play, materials, and activities as appropriate.

Plan for administering medication

Each person who administers prescription or non-prescription medication to a child must be trained to verify and to document that the right child receives the proper dosage of the correct medication designated for that particular child and given at the correct time(s), and by the proper method. Each person who administers medication (other than topical medication)
must demonstrate competency in the administration of medication before being authorized by the licensee to administer any medication.
a. One staff member with training in medication administration will be present when children are in care.
b. Each person who administers any medication, other than oral or topical medications and epinephrine auto-injectors, must be trained by a licensed health care practitioner and must demonstrate annually to the satisfaction of the trainer, competency in the administration of such medications.
c. Every staff member will be trained to recognize side effects of medication.
d. Medication, whether prescription or nonprescription, with the exception of topical nonprescription medication may be administered to a child only with written parental authorization and written order of a physician (for prescription medication, this may include the label on the medication). And the original prescription bottle indicating the dosage, time, and date to be administered, as well as the name of the specific child
e. All medication administered to a child, including but not limited to oral and topical medications of any kind, either prescription or non-prescription, must be provided by the child’s parent.
f. All prescription medications must be in their original containers with the prescriptions label on the container. Over-the-counter medications must be in the original manufacturer’s packaging.
g. All medications will be administered according to the directions on the label unless otherwise instructed in writing by the child’s physician.
h. Unless otherwise specified in a child’s individual health care plan, all medications will be stored out of the reach of children. Those medications found in United States Drug Enforcement Administration (DEA) Schedules II through V must be kept in a secured and locked place at all times. Prescription medications requiring refrigeration shall be stored in out of reach of children.
i. All emergency medications will be available when needed.
j. Medications will be disposed of in a legal way in accordance with the department of health.
k. When possible, all unused, discontinued or outdated prescription medications will be returned to the parent and documented in the child’s record. When it is not possible to return the medications, they will be disposed of in a legal way.
l. No educator shall administer the first dose of any medication to a child, except under extraordinary circumstances and with parental consent.
m. Each time medication is administered, the staff member must document in the child’s record the name of the medication, the dosage, the time and the method of administration, and who administered the medication.

n. The staff member must inform the child’s parent(s) at the end of the day whenever a topical medication is applied to a diaper rash.

o All medications require written parental consent. All medications require consent from a health care practitioner except for topical non-prescription that is not applied to open wounds or broken skin. All medications must be documented with the child’s name, dosage, date, staff signature.

**Individual Health Care Plans**

An individualized Health Care Plan will be developed for all children who have been diagnosed by a licensed health care practitioner as having a chronic medical condition with or without medication.

The plan will describe the chronic condition, its symptoms, any medical treatment that may be necessary while the child is in the program, the potential side effects of the treatment, and the potential consequences to the child’s health if the treatment is not administered. If required, routine scheduled medication or treatment will be administered to the designated child by a staff member who has been properly trained to do, in accordance with written parental consent or instruction and a licensed health care practitioner’s authorization. If a situation exists where an unanticipated administration of medication is deemed necessary, a reasonable attempt will be made to contact the parents of the child. If the parents cannot be reached in advance of the administration of the medication, it will be done as soon as possible after medication or treatment is given. All medication or treatment administration whether scheduled or not, will be documented in the child’s medication and treatment log. Written parental consent is valid for one year and must be renewed annually.
Abuse or Neglect
It is Massachusetts State Law and our policy that all staff members are required to report any suspected neglect or abuse of a child. If a parent is suspected of abuse or neglect, the staff will document all observations in writing.

The staff member will inform the Director, and she will call Department of Children and Families and file a report. The Director will notify the Department of Education and Care.

The Director will document any abuse/neglect by staff members and notify the Department of Early Education and Care. The Director will notify the Department of Children and Families. The Director will suspend the teacher and investigate the allegation and inform the Board of Directors, after the investigation is complete, appropriate action will be taken, i.e. reinstatement or termination.

Injury Prevention Plan
Our staff members care first and foremost about the safety and health of your children. To that end, staff members monitor the environment daily and immediately remove any potential hazards. Smoking is not permitted in any area used by the children during the hours that children are in attendance.

Temple Beth Avodah Early Learning Center has a health care provider available on an on-call basis. In addition, each member of the staff is required to hold a current certification in basic first-aid by the American Red Cross or other equivalent training within six months of employment. A number of staff members hold both First-Aid and CPR certification for infant and children, and there is a first-aid kit in the bathroom between Rainbow and Moonbeam classrooms.

The Director will coordinate with the facility Manager for the removal and repair of hazards. The Director will maintain and monitor a central injury log in her office.

All toxic substances and hazardous materials will be stored in locked cabinets out of the reach of children.

Any injury will be reported in an injury report to the parent. The parent will sign the form and a copy will remain in the child’s file. The injury report will be filled out as soon as possible.
after the incident occurs. EEC will be informed by the director if a serious injury, in-patient hospitalization, or death of a child occurs while child is in the program’s care.

**Emergency Preparedness**

School will be closed if there is no heat or water in the building. Each classroom is equipped with a phone and each staff member has a cell phone. Each classroom teacher will maintain daily attendance records. The attendance list is posted in the classroom on a removable clipboard. When the center is evacuated, the teacher will take the attendance with them outside. The teachers will take attendance immediately. The director will perform a walk through to insure there are no children left in the building. The Director is responsible for evacuation drills to be held at different times of the day and practiced with all groups of children and staff at least every month. The Director will maintain documentation of the date, time, and effectiveness of each drill. This will be posted in the Director’s office.

Staff will have their attendance clipboard, children’s emergency cards and cell phone with them whenever they leave the classroom.

Staff will use their telephones to communicate with authorities and parents.

In the event that the building is deemed unsafe we will go to Memorial Spaulding School on Brookline Street.

**Sleep Policy**

We will provide quiet activities after lunch and a quiet area for children. Most of the children in our program are here for 3 hours. There will be an area available for children who stay for lunch to nap if needed. All children in our program under 2.9 years are picked up by 1:00. Presently we do not accept infants into our program.

**Infectious Disease**

A child is considered to be ill if the child has a fever, flu symptoms, diarrhea, persistent cough, an undiagnosed rash, eye infection, stomach upset, or vomiting within the last 24 hours. Children exhibiting these symptoms must stay home for 24 hours before returning to school. If a child becomes ill at school, we will follow the procedures in the health care guidelines
section below. Parents will be notified when a child becomes ill and must make arrangements for the child to be taken home. In terms of communicable diseases or conditions (chicken pox, conjunctivitis, strep throat, etc.) a child must be symptom free before returning to school. We ask that you observe these guidelines to prevent us from a cycle of illness and infection. Children with the following symptoms or illnesses should be kept at home until the illness has cleared up:

a. Fever   When a child has a fever of 100 or more, he/she should stay home until the fever has been normal for 24 hours.
b. Runny nose   If the mucous from a child’s nose is discolored, this may be a sign of infection. The child’s physician should be consulted before the child returns to school.
c. Vomiting
d. Diarrhea
e. Impetigo and Conjunctivitis   These are very contagious conditions and must be treated with an antibiotic before the child may return to school.
f. Strep Throat   A child with Strep must stay home until he/she has been on an antibiotic for 24 hours.
g. Chicken pox, mumps, etc.   A child who has been exposed to a contagious disease may attend school during the incubation period. The school must be informed if a child contracts the illness so that other families can be told. A child with the illness must stay home until all contagion has passed
h. Head Lice and Pinworm   A child with lice may not return to school until his/her hair has been treated and the eggs have been combed out. A child with pinworms must be treated by a doctor, and he/she may not return to school until the pinworms are gone.

The child may return to the center when (s)he has been fever-free, vomit-free, diarrhea-free for a full 24 hours; and/or has been on a prescribed medication for 24 hours; and/or upon diagnosis by a physician, physician’s assistant or nurse practitioner and is considered to pose no serious health risk to others. The parent must give the school notice of what the diagnosis was and how the condition is being treated.

Our infectious disease policy may be adjusted at any time for the most current guidelines regarding any outbreak of an infectious disease.
Plan for managing infectious disease
Special care will be taken each day to observe the children for signs of possible infectious disease. Note will be made of sneezing, runny noses, coughing, and other outward signs of illness.

All equipment used by an ill child will be carefully washed with the bleach solution to disinfect it before it is used by other children.

Parents will be notified in accordance with the Department of Public Health recommendations when children have been exposed to any communicable disease or condition. Parents will be notified by email and written notice. Communicable diseases will be reported to the board of health.

Our staff will follow the recommendations of the Department of Public Health regarding the use of insect repellents.

Plan for infection control
All staff and children will wash hands at the following times: before snack and lunch, before and after diapering, after using the bathroom, when coming in contact with any bodily fluids, and before and after using the water or sensory tables.

All equipment used by an ill child will be carefully washed with the bleach solution to disinfect it before it is used by other children. Children catch respiratory viruses (cold viruses) easily, particularly at Early Learning Center where they are in contact with many other children. If a child has symptoms such as a runny nose or coughing, it may be necessary for him/her to rest at home for one or two days. If a child appears ill (cranky or lethargic) he/she should stay home until the child’s physician has been consulted.

Hand Washing Policy
Children and staff will wash their hands at the following times:

- Before and after snack
- Diapering
- When coming in contact with any bodily fluids
- Before and after using the water table or sensory tables
Toileting Policy
Children are taken to the bathroom before snack and lunch. Children are allowed to use the bathroom whenever necessary. Children are required to wash their hands with soap and water before snack and lunch, and after bathroom use. If a child soils clothing, a staff member will wash their hands with soap. The dirty clothing will be removed and placed in a plastic bag to be sent home. The staff member helps to clean and dress the child. Teacher and child will wash hands with soap. The staff will work together with the child’s parents to develop a system of toileting. Children will be trained in accordance with the request of parents and consistent with their physical and emotional abilities. Children who are not yet trained need to bring in diapers and wipes. Diapers will be changed when necessary. Please have at least three diapers and a container of wipes in your child’s cubby.

Child Guidance Plan

Temple Beth Avodah Early Learning Center’s child guidance plan is to use positive reinforcement with the children. We provide a variety of responses to undesirable behavior, which may include: ignoring, redirection, loss of privileges or access to certain activities. We will involve parents in addressing the problem including consideration of a referral for a variety of social, medical, or mental health services when appropriate. If a child misbehaves and is in danger of hurting him/herself or others, he/she will be removed from the situation and offered another choice. Our child guidance plan is based on an understanding of the needs and development of each child. The goal of our behavior is to maximize the growth and development of the children and to protect all of the children.

The following practices are strictly prohibited:

- Spanking or other corporal punishment of children.
- Subjecting children to cruel or severe punishment such as humiliation, verbal or physical abuse, neglect, or abusive treatment including any type of physical hitting inflicting in any manner upon the body, shaking, threats or derogatory remarks.
- Depriving children of outdoor time, meals or snacks, force feeding children, or otherwise making them eat against their will, or in any way using food as a consequence.
- Disciplining of a child for soiling, wetting, or not using the toilet; forcing a child to remain in soiled clothing or to remain on the toilet or using any other unusual or excessive practices for toileting.
● Confining a child to a swing, highchair, crib, playpen or any other piece of equipment for an extended period of time in lieu of supervision.
● Excessive time-out. Time out may not exceed one minute for each year of the child’s age and must take place within an educator’s view

Transition Plan
Children will be given warnings when the activities shift from one to another. A transitional activity will be used with consistency in each classroom. Examples are; a 5 minute warning, or a bell, or song.

Teachers will use a variety of transitional activities for preparing for snack or outdoor time including songs or games so that children can be called in small groups.

Teachers will prepare children for transitions to the classroom. An orientation is held before the start of school in September. Parents or guardians accompany their children to these activities to meet the teachers and become familiar with their classrooms and other students. A letter is sent home before the start of school welcoming each child and reviewing the schedule and classroom routines.

If a child begins school at another time of the year, the parents will visit the classroom with their child before they begin school.

All of our classes run from September until June. Children are in the class for a whole school year. They transition to the next class the following fall. Each class discusses that they will be in a new class in the fall.

Our pre-kindergarten completes a unit on Kindergarten in the spring. There is much discussion on this important transition. Information is sent home to parents helping to guide their children in the process.
**Termination Policy**

Every effort will be made so that each child can succeed in our program. Every part of a child’s day is a learning experience. We will use termination as a policy only when all other possibilities have been exhausted. We will meet with parents to form an individual plan for each child. If there is no other alternative, the following policy will be in effect: If a child displays overly disruptive behavior, has severe separation problems, is in danger of hurting him/herself or others, continually infringes on the rights of other children or staff, or has a need that requires additional intense staff training, a written notice will be given to the parent(s). At this point, parents and teachers will meet to discuss the behavior. The teachers will create a plan with the parent(s) to ease the transition for the child. The Director will inform parents of the availability of information and referral for other services and appropriate developmental placement. The teacher will prepare the child for termination from the program in a manner consistent with the child’s ability of understanding.

**Referral Plan**

Staff will inform the Director of concerns about a child. The teacher will observe and record the child’s behavior. The teacher will arrange a meeting with the parent(s) to discuss the concern. The teacher will include in writing all the methods that they have incorporated including sticker charts, room arrangement changes, etc. The Director and the teacher will make appropriate referrals. A list of dental, vision, and hearing screenings is also made available. A written statement will be provided to the parent(s) including reason for referral with written parental consent. The Director will inform the parent of the availability of services. The Director will inform parents of Early Intervention programs for children less than 3 years. Temple Beth Avodah Early Learning Center will follow up referral(s), with written parental consent by contacting the appropriate agency. The child’s teacher will document the concerns and action taken on behalf of the child, including the parent conference, signed and dated parental authorizations and results of the referral. A written plan will be documented in the child’s folder regarding when, where and by who services are provided. The Director and teachers will follow up with the referral source including consultation and assistance in meeting the child’s needs. If services are denied for any reason, the Early Learning Center will review the child’s progress every 3 months to determine in another referral is necessary. Records can only be transferred with written consent of the child’s parent(s) or guardian(s). A list of referral resources for children in need of special services is available in the Director’s office.
Lay and Professional Leadership
Temple Beth Avodah Early Learning Center is the gateway into lifelong learning at the synagogue. Early childhood activities including Shabbat children’s services are often the first introduction to our community.

The Synagogue is governed by a board of directors. The education vice president is responsible for overseeing the preschool committee. The vice president acts as a liaison between the preschool and the executive board.

The Early Learning Center Parent Council is led by one or two parents. The parent council is open to any parents in the program.

Examples of lay and professional leadership working together include mitzvah day, all preschool fundraiser, community, and social events. We also work closely with the social action committee to incorporate synagogue projects into the program like Jewish Family Table.

Communication with Parents
Parents may visit the program unannounced at any time. Parent input into the program is encouraged.

Parents will receive:
Weekly email newsletter
Monthly calendar
Direct information sent home about each holiday
Torah Alive parent piece
Appropriate Links to URJ or other educational websites
Policy Handbook
Parent coffees
Monthly parent council meetings
Parent Orientation Meeting
Parent/ Teacher Conference
Written Progress Reports
Remini blogs and photos
Journey binder
Emails, Phone and Zoom calls with teachers.