



Infant Orientation

Here are some important information and reminders...

Please put your child's name on everything that comes to Creative Early Learning Center. Shoes, jackets, bottles, blankets, crib sheets, extra clothes, etc.

Creative Early Learning Center PROVIDES:

- ◊ Formula, cereal, fruits and vegetables (see attached form)
- ◊ Whole milk after your child is off formula/breast milk
- ◊ All food after your child is off baby food. You will work closely with your child's Teachers when you are *introducing new food to your child.*
- ◊ Sippy cups

Parents PROVIDE:

- ◊ Diapers
- ◊ Wipes
- ◊ Diaper Cream
- ◊ Teething gel (if needed)
- ◊ Bottles of **prepared** formula/breast milk with name and date on bottle
– *if breastmilk, also put the date that milk was expressed.*
- ◊ Baby food (if not using food provided by Creative Early Learning Center)
- ◊ Extra formula (if not using formula provided by Creative Early Learning Center)
- ◊ Binkie if child uses one
- ◊ 2 wearable blankets (12 months and under); or 2 receiving blankets (12 months and older)
- ◊ 2 set of extra clothes
- ◊ 2 bibs (all children use all the bibs provided by the parents)



FEEDING, SLEEPING & DIAPERING SCHEDULES

EARLY LEARNING CENTER

Date: _____

Please take a moment to fill out the following form. Creative Early Learning Center will use this information to provide a caring and loving environment away from home for your child.

Child's Name: _____

Date of Birth: _____

Child's Weight at Birth: _____

Current Weight: _____

FEEDING: Is there anything Creative Early Learning Center should know about your child's feeding schedule or eating habits that would help us in caring for your baby?

	YES	NO	ALLERGIES
Warm Bottle			
Cup			
Warm Food			
Finger Foods			
Self-Feeder			
High Chair			
Spoon			

FEEDINGS	TIME	KINDS OF FOOD	AMOUNTS

SLEEPING: Is there anything Creative Early Learning Center should know about your child's sleeping habits? Is there a specific item with which your child likes to sleep? Does your child like to be rocked to sleep or just laid in the bed?

SLEEPING CONTINUED...

PARENTS SLEEPING INSTRUCTIONS	WHAT TIME?	HOW LONG?
Back or Tummy?		
Pacifier?		
Special Needs?		
Other		

DIAPERING: If there anything that you could share with Creative Early Learning Center about your child's diapering needs which could help us make your little one more comfortable?

PARENTS DIAPERING INSTRUCTIONS:
What lotions, ointments, etc. will you supply for Creative Early Learning Center to use on your child if...
WET:
BM:
RASH:

OVERALL: Is there anything additional that we could do to assist your child's comfort, growth, and well-being while they are here at Creative Early Learning Center?

Parent's Signature: _____ Date: _____

Please check the FINGER FOODS that you would like your child to eat.

Child's Name: _____

Date: _____

<input checked="" type="checkbox"/>	VEGETABLES
<input type="checkbox"/>	asparagus tips
<input type="checkbox"/>	avocado, ripe
<input type="checkbox"/>	black beans
<input type="checkbox"/>	broccoli tips
<input type="checkbox"/>	carrot sticks, cooked
<input type="checkbox"/>	cauliflower
<input type="checkbox"/>	celery, no strands
<input type="checkbox"/>	cherry tomato, cut
<input type="checkbox"/>	corn
<input type="checkbox"/>	cucumbers
<input type="checkbox"/>	green beans
<input type="checkbox"/>	lettuce, cut
<input type="checkbox"/>	mushrooms
<input type="checkbox"/>	peas
<input type="checkbox"/>	pickles
<input type="checkbox"/>	potatoes, mashed
<input type="checkbox"/>	sweet potato
<input type="checkbox"/>	tater tots
<input type="checkbox"/>	tomatoes, peeled
<input type="checkbox"/>	ADD OTHER VEGETABLES
<input type="checkbox"/>	
<input type="checkbox"/>	

<input type="checkbox"/>	FRUIT
<input type="checkbox"/>	apples, peeled
<input type="checkbox"/>	applesauce
<input type="checkbox"/>	banana
<input type="checkbox"/>	blueberries
<input type="checkbox"/>	cantaloupe
<input type="checkbox"/>	dried fruits
<input type="checkbox"/>	fruit cocktail
<input type="checkbox"/>	fruit popsicle
<input type="checkbox"/>	grapes, cut
<input type="checkbox"/>	mandarin oranges
<input type="checkbox"/>	navel oranges, peeled, sectioned
<input type="checkbox"/>	peaches
<input type="checkbox"/>	pears
<input type="checkbox"/>	pineapple
<input type="checkbox"/>	strawberries
<input type="checkbox"/>	sweet cherries, pitted
<input type="checkbox"/>	watermelon, pitted
<input type="checkbox"/>	ADD OTHER FRUITS
<input type="checkbox"/>	
<input type="checkbox"/>	

<input type="checkbox"/>	DAIRY
<input type="checkbox"/>	american cheese
<input type="checkbox"/>	boiled egg
<input type="checkbox"/>	chocolate pudding
<input type="checkbox"/>	cottage cheese
<input type="checkbox"/>	cream cheese
<input type="checkbox"/>	mozzarella
<input type="checkbox"/>	vanilla pudding
<input type="checkbox"/>	yogurt
<input type="checkbox"/>	ADD OTHER DAIRY
<input type="checkbox"/>	
<input type="checkbox"/>	

<input type="checkbox"/>	MEATS
<input type="checkbox"/>	boneless pork riblet
<input type="checkbox"/>	chicken
<input type="checkbox"/>	corn dogs
<input type="checkbox"/>	ham lunch meat
<input type="checkbox"/>	ham
<input type="checkbox"/>	hamburger
<input type="checkbox"/>	meatballs
<input type="checkbox"/>	sausage
<input type="checkbox"/>	turkey
<input type="checkbox"/>	turkey lunch meat
<input type="checkbox"/>	ADD OTHER MEATS
<input type="checkbox"/>	
<input type="checkbox"/>	

<input type="checkbox"/>	GRAINS
<input type="checkbox"/>	bran muffin
<input type="checkbox"/>	cereal, dry or w/milk
<input type="checkbox"/>	flour tortilla
<input type="checkbox"/>	fruit bars
<input type="checkbox"/>	goldfish crackers
<input type="checkbox"/>	graham crackers
<input type="checkbox"/>	macaroni, plain & wheat
<input type="checkbox"/>	oatmeal raisin cookie
<input type="checkbox"/>	pancakes
<input type="checkbox"/>	pretzels, low salt
<input type="checkbox"/>	rice
<input type="checkbox"/>	ritz crackers
<input type="checkbox"/>	rice crispy treat
<input type="checkbox"/>	saltines
<input type="checkbox"/>	sandwich, cut up
<input type="checkbox"/>	spaghetti, cooked
<input type="checkbox"/>	spinach noodles
<input type="checkbox"/>	toast, cut into 1/2 -
<input type="checkbox"/>	waffles
<input type="checkbox"/>	wheat crackers
<input type="checkbox"/>	ADD OTHER GRAINS
<input type="checkbox"/>	
<input type="checkbox"/>	

<input type="checkbox"/>	CONDIMENTS
<input type="checkbox"/>	italian dressing
<input type="checkbox"/>	ketchup
<input type="checkbox"/>	mild salsa
<input type="checkbox"/>	ranch dressing
<input type="checkbox"/>	
<input type="checkbox"/>	

<input type="checkbox"/>	OTHER
<input type="checkbox"/>	fish sticks
<input type="checkbox"/>	
<input type="checkbox"/>	ADD OTHER
<input type="checkbox"/>	
<input type="checkbox"/>	

Sign When Updated..

Signature: _____
Date: _____

Signature: _____
Date: _____

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1/10/2017

EFFECTIVE IMMEDIATELY

For

Families of Infants under 12 Months

It recently has become a state law for child care centers that Infants under 12 months of age can no longer have a blanket in their crib.

As stated in the ODJFS Child Care Licensing Laws:

5101:2-12-20 Sleeping and napping requirements for a licensed child care center.

"No blankets shall be in the crib for infants under twelve months old. A one-piece sleeper or wearable blanket is permitted".

Please bring in a wearable or swaddle blanket for your child by Monday, 1/16/17 if you wish for your Infant that is under 12 months to have a covering while they rest here at the Center.

Thank you for your cooperation in this matter.

Creative Early Learning Center Management



Diaper Changing Form

To the parent/guardian of _____,

Our policy is that we change your child every two hours, unless he/she has a bowel movement. In that case we change his/her diaper immediately. Per recent State of Ohio Child Care Licensing Rules, it is required that you state how many diaper checks/changes you want for your child each day. Please make sure that you supply the necessary diapers and wipes for your child so that we can accommodate your wishes.

I would like my child's diaper changed every _____ hours,

Additional Information:

Parent/guardian signature _____

Date _____

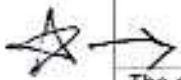
Ohio Department of Job and Family Services
**SLEEP POSITION WAIVER STATEMENT
 FOR CHILD CARE**

Safe Sleep Practices

Sudden Infant Death Syndrome (SIDS) is the sudden and unexplained death of an infant under one year of age. Doctors don't know what causes SIDS, but they have found some things that can make babies safer. The American Academy of Pediatrics and the National Institute of Child Health and Human Development state that one of the most important things that can help reduce the risk of SIDS is to put healthy babies on their backs to sleep. State regulations require child care centers, family child care, and in-home aides to place all infants to sleep on their back. A few babies have health or medical conditions that might require them to sleep in an alternative position. At the advice of the infant's physician, the child care program may be authorized to use an alternative sleep position for the infant due to health or medical conditions. If an infant is to be placed in the crib in any other positions than on their back, this form must be completed by the child's physician and signed by the parent.

To Be Completed by the Infant's Parent/Guardian

Name of Infant		Date of Birth
Name of Primary Care Physician		
Name of Practice		
Address		
Phone	Fax (optional)	Email (optional)
Signature of Caretaker/Parent (authorizing this instruction)		Date



To Be Completed by the Infant's Primary Physician

The above named infant has the following health or medical condition that necessitates an alternative sleep position

Describe the appropriate sleep position for the above named infant

Additional instructions

Signature of Physician

Date

This above instruction is effective from (date) to (date)

CACFP INFANT MEALS – PARENT PREFERENCE LETTER

TO: Parents and Guardians of Infants under one year of age

FROM:

Name of Center or Provider	Creative Early Learning Center, Inc. II
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TOPIC: Who will provide food for your infant's meals?

Due to participation on the Child and Adult Care Food Program (CACFP), all children enrolled at this child care center or family child care (FCC) home receive meals free of charge. The CACFP is a child nutrition program of the United States Department of Agriculture. Child care centers and family child care homes are reimbursed a meal rate to help with the cost of serving nutritious meals to enrolled children. These centers and FCC homes can be reimbursed daily for up to two meals and one snack served to each enrolled child, including infants. Emergency Shelters can be reimbursed for up to three meals. The meals must meet CACFP meal pattern requirements for children and infants.

To meet CACFP requirements, the center or FCC home is required to offer formula and other required infant food to all enrolled infants. The iron fortified infant formula we will provide for infants until they turn one year of age is:

Center or provider to insert the NAME OF FORMULA that they will provide	Members Mark Advantage or Parent's Choice Advantage
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A parent or guardian may decline the formula offered by the center or home and supply the infant's formula themselves. However, when an infant turns one year of age, the center or FCC home will begin to provide milk and the other required food items to meet the meal pattern requirements for toddler age children.

To assist us in your infant formula and food preferences, please complete preferences below by checking one item each in the formula and solid food section.

PARENT OR GUARDIAN: PLEASE CHECK YOUR PREFERENCES FOR FORMULA AND FOOD

Formula or Breast Milk: (check one)

- I want the center or FCC home provider to provide formula for my infant
- I will bring iron fortified infant formula for my infant
- I will bring expressed breast milk for my infant
- I will come to the center or FCC home to breast feed my infant

Parent/Guardian: List Name of Formula You Will Provide

Solid Food: (check one)

- I want the center or FCC home to provide solid food for my infant when he/she is developmentally ready for it
- I will bring solid food for my infant when he/she is developmentally ready for it

***Note: If your feeding preferences change, the center or provider will ask you to complete a new form.**

INFANT'S NAME:	INFANT'S BIRTHDATE:
PARENT/GUARDIAN SIGNATURE:	DATE:

In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, sex, disability, age, or reprisal or retaliation for prior civil rights activity in any program or activity conducted or funded by USDA. Persons with disabilities who require alternative means of communication for program information (e.g. Braille, large print, audiotape, American Sign Language, etc.), should contact the Agency (State or local) where they applied for benefits. Individuals who are deaf, hard of hearing or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English. To file a program complaint of discrimination, complete the USDA Program Discrimination Complaint Form, (AD-3027) found online at: http://www.usda.gov/complaint_filing_cust.html, and at any USDA office, or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by: (1) mail: U.S. Department of Agriculture, Office of the Assistant Secretary for Civil Rights, 1400 Independence Avenue, SW, Washington, D.C. 20250-9410; (2) fax: (202) 690-7442; or (3) email: program.intake@usda.us

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Garanimals®

2-pack play yard sheets

200 thread count 100% cotton
fits a 24 in x 38 in play yard-mattress

Garanimals® 2-pack play yard sheets



Garanimals®

2-pack play yard sheets

Fits a 24 in x 38 in (61 cm x 96.5 cm) play yard-mattress

Product Features

- 100% Cotton for baby's comfort
- Pre-shrunk, colorfast

Características del producto

- 100% algodón para la comodidad del bebé
- Pre-encogido, de colores resistentes

Care Instructions

- Recommended washing before use
- Machine wash warm. Use only non-chlorine bleach if needed
- Tumble dry low, remove promptly
- Warm iron, if desired

Instrucciones de cuidado

- El lavarse recomendado antes de usar
- La colada de la máquina caliente, utilice solamente la no-clorina blanquea si está necesitado
- El punto bajo seco de la colada, quite puntualmente
- Caliente el hierro, si está deseado



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ENTANGLEMENT NEVER
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UNLESS IT FITS
SECURELY ON CRIB
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WM28029181-0115

*Creative Early Learning Center
uses these sheets on our cribs.*