

EXTENDED CARE PROGRAM OF ST. JANE SCHOOL

Extended Care Philosophy: The St. Jane Frances de Chantal Extended Care Program will strive to provide a Christ centered, safe, nurturing, and fun childcare environment that serves the needs of our school families. Students will have opportunities for games, art/crafts, homework, movies, and more.

Extended Care Daily Schedule

2:00-2:30	Arrival, Prayer, Snack
2:30-3:00	Playtime
3:00-3:30	Homework / Reading Time
3:30-5:00	Art, Board Games, Other Activities

***Snack:** Dry Food and Water Only. Children must be able to independently open all items.

Hours of operation are from 2:00 p.m. - 5:00 p.m. and the program is NOT offered on Non-School Days or ½ days.

POLICY AND PROCEDURES

The Extended Care Program is an extension of the school day; therefore, all rules and regulations outlined in the St. Jane Parent Handbook apply to Extended Care.

Children **must be registered in advance** so that all essential paperwork is processed and sufficient staff is on hand to monitor the children in the program. Emergency situations must be discussed with the principal before a child can attend without the proper paperwork on file. Each child must have a registration form on file that lists all known allergies or medical conditions, an emergency contact with current home and cell phone numbers.

The registration form requires parents to list the names of the individuals authorized (by the parents) to pick-up their children if the parents are not able to do so themselves. If a name is not on the pick up list, we **cannot** allow your child to go home with that person. **This is an important record and safety measure for the childcare staff, your cooperation is appreciated.**

***Parents/Guardians are asked to be prepared to show photo ID when picking up.**

Location: Extended Care is usually held in the IHM Chapel in the main building. If the Chapel, Extended Care will be provided in a classroom or at another location. At dismissal time, parents go to the chapel and sign their child out from Extended Care.

FOR SAFETY PURPOSES, NO ONE MAY TAKE CHILDREN OUT OF LINE WHEN THEY ARE GOING TO AFTERCARE.

A parent/guardian must come into FFH or the aftercare location and sign out the child(ren).

Children will be allowed to change out of their uniforms. Clothing must be appropriate and within the guidelines of our Student Handbook Casual Clothes guidelines. Sneakers need to be worn to utilize the gym. Students may bring snacks and drinks to Extended Care.

11/2/21

Daily attendance is taken upon the students' arrival. Students must be signed out by a parent/guardian, or an authorized person (from the emergency form). The person picking up the child will be required to show identification before the child is released into his or her care.

Homework: Since there is a scheduled homework period, it is the child's responsibility to acknowledge his or her assignments and to begin to work on them. If there is a need, a child may ask for assistance with homework from our staff. **Please do not assume that all your child's homework is completed.** It is always recommended that you review your child's homework on a daily basis. Studying is very important and should be done at home.

Personal Items: Students should have their personal belongings labeled with their name. School/Extended Care is not responsible for lost or damaged personal property that is brought to School/Extended Care. Students cannot use personal electronic devices during Extended Care.

DISCIPLINE

Problems which occur at Extended Care will be handled on an individual basis. All incidents are documented and reviewed by the principal.

RATES AND PAYMENT POLICIES

The registration fee is \$20.00, the hourly cost of one child is \$6.00, second child is \$5.00, third child \$4.00, none for fourth child. Since fees are the sole support of the Extended Care Program. *It is essential that invoices be paid upon receipt so that continual coverage can be provided.* Extended Care ends at 5:00 p.m., all students must be picked up before 5:30 p.m. **Families will be charged an additional \$5.00 for every 5 minutes after 5:30 p.m.**

All invoices are generated weekly and sent home via your child's Take Home Folder. Please make payments upon receipt of invoice in order to guarantee continued use of Extended Care.

Please Note: If payment is not received after the first billing cycle, it will be marked PAST DUE OR DELINQUENT. Every effort will be made to collect Extended Care Payment. Your account will be suspended after 30 days of non-payment. Your balance will incur a \$50 late fee, it will be rolled into your current FACTS account, and your child will no longer be able to attend Extended Care.

SNOW DAYS OR EMERGENCY SITUATIONS

The Extended Care will not run on ANY snow day cancellations. We will not have staff available these days on such short notice.

***In severe weather or emergency situations** which result in an early dismissal from school, Extended Care **WILL BE CANCELLED.** The school will notify parents. Parents are expected to pick up their children as soon as possible to ensure the safety of the children and our staff.

Thank you for your cooperation.

Ms. Christi Johnstone (class3a@stjaneschool.com)

Mrs. Andrea Cucciuffo (class3b@stjaneschool.com)

Please complete and print clearly. Please include a one-time \$20 application fee payable to St. Jane School and return to office. Thank you.

Student Name:	Class
Address:	Home Phone #
Known Allergies/Medical Conditions:	
Student Name:	Class
Address:	Home Phone #
Known Allergies/Medical Conditions:	
Student Name:	Class
Address:	Home Phone #
Known Allergies/Medical Conditions:	
Student Name:	Class
Address:	Home Phone #
Known Allergies/Medical Conditions:	
RESPONSIBLE PARTY	
Father's Name:	Day time Phone #
Address	Cell Phone #
Mother's Name	Day time Phone #
Address	Cell Phone #

EMERGENCY CONTACT NAME - MANDATORY <i>(other than parent)</i>		
Home Phone		Cell Phone
EMERGENCY CONTACT NAME <i>(other than parent)</i>		
Home Phone		Cell Phone
NAME OF AUTHORIZED TO PICK UP STUDENT <i>(other than parent)</i>		
Home Phone		Cell Phone
NAME OF AUTHORIZED TO PICK UP STUDENT <i>(other than parent)</i>		
Home Phone		Cell Phone

I have read and will fully comply with the Extended Care Operating Procedures. I understand that non payment will result in a \$50 service fee and termination of the Extended Care privileges.

Parent/Guardian Signature:
Please print First and Last Name clearly:

<i>Office Use Only</i>		
<i>(Before accepting the application, please make sure all necessary information is complete)</i>		
Date Received:	Amount:	Cash
		Check #