



Butte County Office of Education – Expanded Learning Programs

EXPLORE - AFTER SCHOOL PROGRAMS

1859 Bird Street, Oroville, CA 95965

Phone: (530) 532-3051

Fax: (530) 532-5699

2020 – 2021 School Year

Dear Parent/Guardian:

The After School Program is provided free of charge except for an annual, non-refundable, registration fee of \$40 to help offset the cost of program supplies, resources and sports. Your Site Coordinator is more than willing to work with you, should this be an immediate hardship. Payment options are available. If you were to pay for after-school childcare, you could easily spend upwards of \$2,000 a year per child. With the increase in Minimum Wage, we need your child's registration fee more than ever.

Registration fees must be in the form of either cash or money order (payable to BCOE).

To assure your child(ren) a place in the after school program, please do the following:

1. Return completed Registration Form, Parental Permission Form and registration fee (**cash or money orders ONLY**) to the Site Coordinator at the start of the after school program or when your child's site has enrollment.

Assure student safety:

1. In August, make sure your child's regular day teacher knows that he or she is attending the After School Program.
2. Program staff will check the identification of all individuals picking up students from the After School Program. Please make sure that individuals picking up students are permitted to do so and are listed on the registration form. Please note that all elementary school-age students must be signed out by a parent or guardian.

Children are unable to attend the program until all of their paperwork and registration fees have been received. Program is offered every day after school from the final school bell until approximately 6:00 p.m. A site-specific information sheet will be sent home with your child/children the first week of attendance. If you have any questions, please do not hesitate to contact your child's After School Program Site Coordinator or our Senior Administrative Assistant, Tammy Long at 532-3051.

WE LOOK FORWARD TO SEEING YOUR STUDENT(S)!

FROM ALL OF BCOE'S EXPANDED LEARNING PROGRAM STAFF

Butte County Office of Education - 1859 Bird Street, Oroville, Ca. 95965
After-School Program Enrollment Form (2020-2021)

Student Name (Last, first): _____ Birth Date: * ___ / ___ / ___ AS
Home Address: _____ City: _____ State: _____ Zip Code: _____
Mailing Address if different from above: _____ Home Phone: _____
Student's Primary Language: _____ Grade: _____ Gender: ___ F ___ M

So we may better serve your child, please advise us of any allergies or medical needs, Please be specific.
___ My Child does not have allergies and/or medical needs ___ My child DOES have allergies and/or medical needs.

If yes please explain: _____
Parent/Guardian: _____ Home Phone: _____ Work Phone: _____
Home mailing Address (if different than Student): _____
Cell Phone: _____ Relationship to Student: _____
Name of Person to call in case of Emergency: _____ Home Phone _____
Work Phone: _____ Cell Phone: _____ Email: _____
Relationship to Student: _____ Permission to Pick up student? ___ Yes ___ No
Secondary Person to call in case of Emergency: _____ Home Phone _____
Work Phone: _____ Cell Phone: _____ Email: _____
Relationship to Student: _____ Permission to Pick up student? ___ Yes ___ No

Student Background:

___ American Indian ___ Alaska Native ___ Asian ___ White (non Hispanic) ___ Pacific Islander ___ Hispanic ___ Black/African American (non Hispanic)
Does your child have any type of disability? ___ No ___ Yes- Description: _____

Early Release Policy

I understand that the intent of the BCOE After-School Program is to keep my child safe and engaged in meaningful activities after school each day until around 6:00 p.m. Our policy is to release students from one safe environment to another safe environment-specifically, from the Program into the custody of a parent or guardian. If another arrangement needs to be made in an exceptional situation (i.e., dental or doctors appointment, last available bus, special activity or other organized function); please let us know in advance and specify reason for early departure on the sign in/out sheet. I understand and agree to comply with the Early Release Policy.

Parent-Student Handbook:

The Parent-Student Handbook is online at <https://www.bcoe.org/o/bcoe/page/expanded-learning-butte-co> Signing the enrollment form validates that you have read and reviewed the handbook with your student and that you understand the policies and procedures. A hard copy may be obtained from your student's After-School Program Site Coordinator.

Enrollment Policy

As you may already know, most of our sites have a waiting list of those students wanting to attend. In accordance with Assembly Bill 1567, first priority enrollment is given to pupils who are identified by the program as homeless, and to pupils who are identified by the program as being in foster care, and 2nd priority enrollment for programs serving middle and junior high school pupils, to pupils who attend the program daily. Students who attend our program on a regular basis will receive priority participation. Students who do not attend on a regular basis may be in jeopardy of losing their position in the program to a student on the waiting list that can and will attend regularly.

Please check all that apply below and sign your name.

Please check one of the following:
___ My child will walk or ride a bike home from the program. ___ I will pick up my child from the program. ___ Other
We may place articles in local newspapers and/or various media to inform the community about the program.
___ Yes, my child has my permission to be photographed or videotaped (pictures may be used in the newspaper or other media).
___ No., my child does not have my permission to be photographed or videotaped.
On an annual basis students are asked about their attitude toward our program. Their responses are confidential and never reported in association with their name. Before you child can complete the survey, we need your permission.
___ My child has my permission to participate in the survey and the Program.
___ My child does not have my permission to participate in the survey, but may participate in this Program.

My child currently participates in the following education programs at school:

___ Migrant Education ___ ESL/LEP ___ Special Education ___ Intensives
___ Child is homeless and /or a Foster youth ___ No ___ Yes
___ Child currently has health insurance coverage: ___ No ___ Yes Type: _____ Number: _____

Signature of Parent or Guardian

Date:

BUTTE COUNTY OFFICE OF EDUCATION
Parent Permission Form
Field Trip/Excursion and Medical Authorization - Minor
Field Trips & Activities

_____ has my permission to participate in the activities listed below.
 (Childs Name)

I fully understand the following:

1. Participation in after school activities is voluntary.
2. I may revoke this authorization at any time by notifying BCOE in writing.
3. Revocation is not effective until receipt is acknowledged by BCOE.

As stated in California Education Code Section 35330:

“All persons making the field trip or excursion shall be deemed to have waived all claims against the district or the State of California for any injury, illness, or death occurring during or by reason of the field trip or excursion.”

<u>Activity - Destination</u>	<u>Location</u>	<u>Departure Date/Time</u>
_____	_____	_____
_____	_____	<u>Return Date/Time</u>

Consent to Transport

In Accordance with Education Code 35350, my signature gives permission to transport (if applicable)

School Employees Volunteers Other: _____

Consent to Treat

In the event of illness or injury, I do hereby consent to whatever X-ray examination, anesthetic, medical, surgical or dental diagnosis or treatment and hospital care are considered necessary in the best judgment of the attending physicians or dentist and performed by or under the supervision of a member of the medical staff of the hospital or facility furnishing medical or dental services.

A special note to parents/guardians in accordance with Education Code §49423:

- Check here if there are no special problems that the staff should be aware of and no medications are required on the trip.
- All medications must be registered on this form with a physician's written instructions on dispensing.

All prescriptions, excepting those which must be kept on the student's person for emergency use, must be kept and distributed by the staff.

Check here if no blood transfusions or blood products are to be given. **Initial:** _____

If your son or daughter has a special medical problem, please attach a description of that problem to this sheet.

The undersigned agrees to defend, indemnify and hold harmless the Butte County Office of Education, its Board of Trustees, officers, agents, and employees, individually and collectively, from and against all costs, losses, claims, demands, suits, actions, payments and judgments, including legal and attorney fees, arising from personal or bodily injuries, property damage or otherwise, however caused, brought or recovered against any of the above that may arise for any reason from or during or be alleged to be caused to the undersigned's person.

Signature of Parent or Legal Guardian

Date

Address where parent will be during field trip

Phone where parent can be reached during field trip

 Health Insurance Company/MEDI-CAL

 Policy Number



BUTTE COUNTY OFFICE OF EDUCATION
AFTER SCHOOL PROGRAM
"EMPOWER YOUTH"
1859 Bird Street, Oroville, CA 95965
Phone: (530) 532-5686 – Fax: (530) 532-5699



EVERYBODY HAS RESPONSIBILITIES

Students' Responsibilities

- Attend the program regularly, except when in accordance with the established "Early Release Policy"
- Do the work assigned in class as homework during the Homework Hour
- Be attentive when After School Program staff is talking/giving instructions
- Follow all regular school day rules and behavior guidelines
- Always communicate with the After School Program staff when an issue arises
- Always be safe, be respectful, be responsible

Parent's Responsibilities

- Assure your child attends the program regularly, except when in accordance with the established "Early Release Policy"
- Review your child's completed homework
- Be on time to pick up your child (6:00 p.m.)
- Call the After School Program Site Coordinator when your child will be absent from the program
- Always communicate with the After School Program staff when an issue arises
- Always be safe, respectful, and responsible; never use foul or threatening language

Discipline Plan

In order to ensure a quality learning experience for your child and all the students at the After School Program, we have developed the following discipline plan. We feel that each student in the After School Program is entitled to a safe and respectful school environment. We believe that all our students and parents can behave in a manner appropriate to school, and that each student and parent can be held accountable for behavior that disrupts or inhibits the educational process.

The general rules for behavior are as follows:

- Treat others as you would want to be treated
- Treat others with respect
- Follow staff directions
- Use appropriate language
- Use equipment and materials properly
- Stay in assigned area
- No rough play
- When in doubt, ask staff

The After School Program works very hard to recognize outstanding, respectful behavior and has established a rewards system for those who contribute positively to the program.

DISCIPLINE

Discipline will be administered and maintained in a positive manner, which is youth-oriented and contributes to a child's development. **After School Program students will be required to follow established regular day school rules.** The regular day Principal works closely with the Site Coordinator to establish consequences for misbehavior. Parent and or student behavior that is disruptive, harmful, or causes injury to others may result in the following disciplinary actions:

- **FIRST OCCURRENCE** – *Verbal Warning/Incident Report*
- **SECOND OCCURRENCE** – *Incident Report/A time-out will be assigned*
- **THIRD OCCURRENCE** – *Incident Report/A conference will be scheduled with the child, parent(s,) and staff. Possible suspension ranging from one day to two weeks.*
- **FOURTH OCCURRENCE** – *Continued offenses may result in the child's suspension or dismissal from the program.*

PARENT COOPERATION AND INVOLVEMENT IS APPRECIATED!

We have read this document and will do all within our power to be responsible for our actions to assure that the After-School Program is a safe place for all students and After-School Program staff.

Student's Signature

Date

Parent's Signature

Date

Parent's Signature

Date