Wm. Holliday Elementary School
E.S.P. Guidelines
2019-2020

YOUR CHILD WILL ONLY BE ABLE TO ATTEND ESP ON THE DAY(S) YOU HAVE SPECIFIED. THE ESP STAFF NEEDS TO KNOW THE WEEK BEFORE THE DAYS YOUR CHILD WILL ATTEND.

❖ ALL STUDENTS MUST BE SIGNED IN AND OUT BY AN ADULT when entering or leaving the program. Our ultimate concern is the safety of every student in the program. Please accommodate us by calling for children in the cafeteria, signing the roster, and noting the time of drop off and/or pick up. Students will not be released into the care of another individual, unless noted on the registration form and with proper identification.

❖ The program hours are 6:30 a.m. – 8:10 a.m. and Dismissal - 6:00 p.m.

❖ The program will close early due to inclement weather. The program director or one of the staff members will notify parent/guardian if this should occur.

❖ Parents arriving after 6:00 p.m. will be charged an additional fee of $25.00 per student per quarter hour (or portion of a quarter hour). After 3 late pickups, the child will no longer be eligible for the program.

❖ Students participating in the program will be provided with expectations for daily behavior. Gross disobedience will not be tolerated and will result in removal from the program with loss of all fees. This decision rests solely with the program director. Students will receive 3 “write ups”. Upon the occurrence of the third “write up”, the student will be dismissed from the program.

❖ Students receiving the service will enter/exit the school building ONLY through the entrance to the cafeteria. THESE DOORS WILL BE LOCKED AT ALL TIMES.

❖ Participants in the program will be given assistance with homework assignments. This is not an option, but a part of the program. (K-5)

❖ Activities will be developmentally appropriate and geared toward group structured activities such as, but not limited to: arts & crafts, table games, puzzles, quiet time, and reading. Coordinators are given discretion to adapt activities to meet the needs and interests of the participants.

❖ At 8:10 a.m. all participants will be dismissed to join the other students.

❖ Children in the after school program will receive a snack.

❖ The program will not maintain liability for valuable items brought to school.

❖ Students who become ill while at the program will need to be picked up promptly upon notification. The staff is equipped to handle minor surface abrasions only. No medications will be dispensed. In

A registration fee in the amount of $20.00 MUST accompany this form.
($10.00 for each additional child)
the event a student misses one or more days in the program due to illness, a refund will **not** be available.

- Students are responsible for picking up/putting away toys, crayons, etc., before they leave.
- **All fees** are due on **Friday** for the following week. If payment is not received by 6:00 p.m. Monday, a $15.00 late fee will be charged. **The child will not be permitted to attend the program until fees are paid.** Checks should be made payable to Wm Holliday School.

### EXTENDED SCHOOL PROGRAM FEES

#### K - 5

<table>
<thead>
<tr>
<th>Weekly Rates</th>
<th>4 or 5 days per week</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>am &amp; pm pm only am only</td>
</tr>
<tr>
<td>1st child</td>
<td>$70.00 $50.00 $25.00</td>
</tr>
<tr>
<td>each additional child</td>
<td>$55.00 $35.00 $20.00</td>
</tr>
</tbody>
</table>

#### PreK Only

<table>
<thead>
<tr>
<th>Weekly Rates</th>
<th>1, 2, 3, 4, or 5 days per week</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>am &amp; pm pm only am only</td>
</tr>
<tr>
<td>1st child</td>
<td>$70.00 $50.00 $25.00</td>
</tr>
<tr>
<td>each additional child</td>
<td>$55.00 $35.00 $20.00</td>
</tr>
</tbody>
</table>

**Due to staffing requirements for children under 5 years of age, the ESP fees will remain the same for PreK regardless of how many days per week you choose to use the program.**

How to reach E.S.P. - 233-7588 ext 177

A registration fee in the amount of $20.00 **MUST** accompany this form.

($10.00 for each additional child)
Wm. Holliday Elementary School
Extended School Program (E.S.P)

Registration Form

A separate registration form MUST be filled out for each child.

K – 5 - YOUR CHILD WILL ONLY BE ABLE TO ATTEND ESP ON THE DAY(S) YOU HAVE SPECIFIED.

Student Name _____________________________ Grade ______________

Attending (PLEASE CIRCLE) AM ONLY PM ONLY AM & PM

_____ Attending 4-5 days per week (PreK Fees are the same regardless of the number of days used per week.)

_____ Attending 1, 2, or 3 days per week Circle days attending M T W Th F

Student’s Grade/Teacher ____________________________

Custodial Parents/Guardians __________________________________________________________

List BOTH parents, if both parents have equal guardianship.

Home Phone ____________________________

Work Phone ____________________________ (Mother) Cell Phone __________________________

Work Phone ____________________________ (Father) Cell Phone __________________________

Street Address (Home) ____________________________

Emergency Contacts/People authorized to pick up my child from E.S.P.

Children will not be released to anyone not listed on this form.

Note: You MUST have at least 3 emergency contacts listed.

Please list any additional emergency contacts on a separate sheet of paper.

Please advise all emergency contacts that they will be required to show identification before the child will be released.

Name ____________________________ Phone __________________________

Name ____________________________ Phone __________________________

Name ____________________________ Phone __________________________

EMERGENCY MEDICAL INFORMATION:

List any special health conditions of student: (seizure disorder, allergies, asthmatic, etc.)

_______________________________________________________________________________________

If you or the emergency contact cannot be reached in an emergency and if, in the judgment of the program authorities, immediate medical and/or hospital attention is needed, including ambulance service, do you authorized responsible school authorities to send your child (properly accompanied) to an available hospital or physician and accept the fees involved? YES _______ NO _______

I have read the attached “E.S.P. GUIDELINES” and agree to the terms outlined in these guidelines.

Parent/Guardian Signature ____________________________ Date __________________

A registration fee in the amount of $20.00 MUST accompany this form.

($10.00 for each additional child)
WILLIAM HOLLIDAY EXTENDED SCHOOL PROGRAM
AFTER-HOURS PROCEDURE

In the event that a parent has not picked up their child from E.S.P. by 6:00 p.m., and the parent has failed to contact the program by phone to explain the emergency situation, the emergency contacts will be called. If the emergency contacts cannot be reached, or are unable to pick up the child in a relatively short period of time, the Police Department will be called to take charge of the child. This may involve the Police taking the child to the Fairview Heights Police Department.

I have read the above procedure

________________________
Parent Signature

________________________
Date

A registration fee in the amount of $20.00 MUST accompany this form.
($10.00 for each additional child)