



Project SHARE After School Program

Shasta Health, Academic, Recreation and Enrichment
Making a difference...After school-every day!



Project SHARE requires **NON-REFUNDABLE** registration fee **AND** material fee per student.
For information regarding fees and fee assistance, contact your Site Facilitator.

School 17/18 _____

Packet received on: _____

Parent Fees:

Amount Paid: \$ _____ Date: _____

Notes: _____

Student Information

First Name: _____

Last Name: _____

Home Phone: _____

Date of Birth: _____

Grade: ** _____ (In year applying for)

Gender: Male ___ Female ___

Special Education: Yes ___ No ___ Unspecified ___

IEP/ Special Needs: Yes ___ No ___ Unspecified ___

IN CASE OF EMERGENCY **FIRST CONTACTS**

Custodial parents/guardians will be notified first in a emergency or for a discipline issue. Please list an alternate choice if custodial parent/guardian cannot be reached.
Add this person as approved to pick up child on next page.

NAME _____

PHONE # _____

WORK # _____

CELL # _____

Foster Youth: Yes ___ No ___ Homeless: Yes ___ No ___

Free/Reduced Lunch: Yes ___ No ___ Unspecified ___

Primary Language: English ___ Spanish ___ Other ___

Please remember to update all contact information as it becomes necessary. Thank you.

Custodial Parent/Guardian (1):

First Name: _____

Last Name: _____

Relationship: _____

Home Phone: _____

Work Phone: _____

Other Phone: _____

Email: _____

Street Address: _____

City: _____

State: _____

Zip: _____

Custodial Parent/Guardian (2):

First Name: _____

Last Name: _____

Relationship: _____

Home Phone: _____

Work Phone: _____

Other Phone: _____

Email: _____

Street Address: _____

City: _____

State: _____

Zip: _____

Transportation / Pick-Up Info

Permission to **Walk Home** : Yes No Time: _____ **M T W Th F** **Ride Bus** (where available): Yes No

Child May Be Picked Up By (1)
 Name _____
 Relationship _____
 Phone _____

Child May Be Picked Up By (2)
 Name _____
 Relationship _____
 Phone _____

Child May Be Picked Up By (3)
 Name _____
 Relationship _____
 Phone: _____

Child May Be Picked Up By (4)
 Name _____
 Relationship _____
 Phone: _____

Child may NOT Be picked up by : (1)
 Name _____
 Relationship: _____
 Phone #: _____
 Required documentation on file? Yes ___ No ___

Child may NOT Be picked up by: (2)
 Name _____
 Relationship: _____
 Phone #: _____
 Required documentation on file? Yes ___ No ___

Medical/ Miscellaneous Information

Primary Doctor: _____
 Telephone: _____

Primary Dentist: _____
 Telephone: _____

Does your student have a behavior plan? Yes ___ No ___ If yes, please attach a copy.

IMAGE RELEASE : I grant Project SHARE permission to photograph/record/use photos of my student, and use such images, at no compensation, for promotional and/or educational purposes, and for unlimited print and/or on and/or on educational websites promoted by Project SHARE, and to promote Project SHARE, and the partnerships between schools and Shasta County Office of Education. **Please initial:** _____

MOVIE RELEASE : I grant permission for my child to watch rated PG movies during Project SHARE. **Please initial:** _____

Any **Allergies**? Yes ___ No ___ If Yes, please explain: _____

Any **Special Alerts/Restrictions**? Yes ___ No ___ If Yes, please explain: _____

Any **Medications**? Yes ___ No ___ Name of Medication: _____
 If Yes, will child be required to take medication during after school hours? Yes ___ No ___ Is required documentation on file? Yes ___ No ___

I hereby authorize the staff of Project SHARE to secure and sign for emergency medical care for my child at my expense, when necessary.

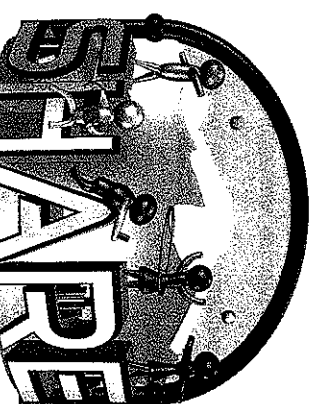
 Parent/ Guardian Signature _____
 Date

I have received the Parent Handbook for the After School program. I agree to adhere to the program expectations.

 Parent/ Guardian Signature _____
 Date

PARENT GUIDE

FOR THE PROJECT SHARE AFTER SCHOOL PROGRAM



- Academic Enrichment including homework assistance, tutoring, interventions, and computers
- Health Enrichment including prevention, nutrition, and exercise
- Recreation Enrichment including sports, crafts, and clubs
- Students will be offered a healthy snack each day of the program

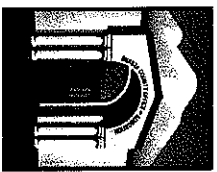
HEALTH • ACADEMICS • RECREATION • ENRICHMENTS

PROJECT SHARE MISSION

TO ENGAGE CHILDREN IN ENRICHMENT ACTIVITIES WHICH POSITIVELY AFFECT THEIR ACADEMIC, SOCIO-EMOTIONAL AND PHYSICAL DEVELOPMENT.

PROJECT SHARE VISION

A SAFE, STRUCTURED AND CARING AFTER SCHOOL ENVIRONMENT FOR STUDENTS IN SHASTA COUNTY, SUPPORTED BY THE COLLABORATIVE EFFORTS OF FAMILIES, STUDENTS, COMMUNITY MEMBERS AND LOCAL AGENCIES.



SHASTA
COUNTY OFFICE OF
EDUCATION

Project SHARE Office

1644 Magnolia Avenue

Redding, CA 96001

Phone: (530) 245-7830

Fax: (530) 225-0331

REGISTRATION & PROGRAM FEES

The Project SHARE program charges a NON-REFUNDABLE registration fee per child. Fees are due upon registration and registration forms submitted without the fee will not be considered complete. The registration fee is due each time a child is registered for the program. Therefore, if a student is released from the program due to poor attendance, continuous behavior problems or multiple late parent pickup, the registration fee must be paid in order to re-register your child in the program 30 days after the removal, if space allows.

The Project SHARE program charges a monthly program fee per child. This fee assists us in ensuring that your child has access to high quality academic support and engaging enrichment activities.

In accordance with AB2615, All fees for Foster Youth and Homeless Youth are waived.

Project SHARE is committed to ensuring that ANY child that wants to attend program has the opportunity to do so. Therefore, fee waivers or assistance may be available. Contact your Site Facilitator for more information.

For your records, our Federal Tax Identification # is 94-6002463.

PROCEDURES

HOURS OF OPERATION

The program operates every school day from dismissal until 6pm. Please make arrangements to ensure that your child is picked up no later than 6pm. Late fees may apply if you are late picking up your child and may result in removal from the program.

LATE PICK UP

If a parent/guardian is continuously late picking up their child, Project SHARE staff will provide a verbal reminder that the program ends at 6:00 p.m. and a statement of charges for the overtime fee to the parent. Payment arrangements for the overtime charges must be made prior to the student returning to program. Excessive late pick-ups can/may result in removal from the program.

EARLY RELEASE POLICY AND SIGN OUT

A child may be released from the After School Program to individuals approved on the child's registration form. All individuals will be asked to show a current photo ID Card before a child will be released into their custody. According to the programs early release policy, students may only be release prior to closing based on the following conditions:

- 1) A parent/guardian indicates an Authorized Early Release Code on the Student Attendance Sheet
- 2) The Site Liaison approves the Early Release by signing the appropriate section on the Student Attendance Sheet.

Authorized Early Release Codes:

- Early Release Code 1: Parallel Program
 - Examples include: attending an academic or enrichment program (e.g., Intervention, SES, Sports, Dance, etc.)
- Early Release Code 2: Family Emergency
 - Examples include: death in the family, catastrophic incidents, etc.
- Early Release Code 3: Family Need
 - Family Event/Affair: family reunion, special occasions, Open House, etc.
- Early Release Code 4: Medical Appointment
 - Examples include: medical, dental and other appointments related to student's physical, social and/or emotional needs.
- Early Release Code 5: Weather Conditions
 - Examples include: heavy rain, fog, snow, storms, daylight savings
- 0 Children who are given permission by their parent/guardian to walk home before closing, or those whose parents/guardians walk them home and pick them up before closing when Daylight Savings is in effect or weather conditions warrant it.
- Early Release Code 6: Medical Emergency
 - Examples include: emergency medical or dental care necessary for student
- Early Release Code: 7: Other Conditions
 - Examples include: a situation that arises which can be reasonably assessed by the Site Facilitator related to student injury, illness and/or behavior issues
- 0 Program staff will notify parent/guardian
- Early Release Code 8: Transportation Needs
 - Examples include: last available transportation for student

ANY OTHER REASONS FOR EARLY RELEASE ARE NOT AUTHORIZED

Unauthorized instances or unacceptable patterns of unauthorized early departures are cause for evaluation for dismissal from the Project SHARE Program. Any adult picking up a child must sign-out with the Project SHARE staff person in charge.

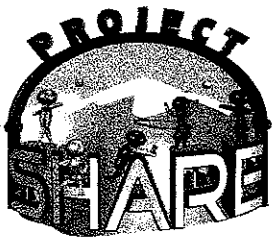
STAFFING

QUALIFICATIONS

All staff must meet the minimum qualifications to be employed by Shasta County Office of Education, including fingerprint, physical and background checks. In addition, staff counted in ratio must be No Child Left Behind (NCLB) qualified.

STAFF TO STUDENT RATIOS

All Project SHARE sites are staffed at a minimum of a 1:20 staff-to-student ratio. Additional staff include Area Coordinators, Project Coordinators, Enrichment Instructors, and Intervention Teachers.



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EARLY RELEASE AND LATE ARRIVAL POLICY

The Project SHARE After School Program is made possible through the State of California After School Education and Safety (ASES) grant funds. As a funding requirement, students are expected to attend the program following every regular and minimum school day until at least 6:00p.m. In order to gain the most benefit from the program, students are encouraged to attend regularly until at least 6:00p.m. every day.

Conditions:

A child may be released early from the After School Program prior to closing based on the following conditions:

- 1) A parent/guardian indicates an Authorized Early Release Code on the Student Attendance Sheet and 2) the Site Liaison approves the Early Release by signing the appropriate section on the Student Attendance Sheet.

Authorized Early Release Codes:

Early Release Code 1: Parallel Program

- Examples include: attending an academic or enrichment program (e.g., Intervention, SES, Sports, Dance, etc.)

Early Release Code 2: Family Emergency

- Examples include: death in the family, catastrophic incidents, etc.

Early Release Code 3: Family Need

- Family Event/Affair: family reunion, special occasions, Open House, etc.

Early Release Code 4: Medical Appointment

- Examples include: medical, dental and other appointments related to student's physical, social and/or emotional needs.

Early Release Code 5: Weather Conditions

- Examples include: heavy rain, fog, snow, storms, daylight savings
 - Children who are given permission by their parent/guardian to walk home before closing, or those whose parents/guardians walk them home and pick them up before closing when Daylight Savings is in effect or weather conditions warrant it.

Early Release Code 6: Medical Emergency

- Examples include: emergency medical or dental care necessary for student

Early Release Code 7: Other Conditions

- Examples include: a situation that arises which can be reasonably assessed by the Site Facilitator related to student injury, illness and/or behavior issues
 - Program staff will notify parent/guardian

Early Release Code 8: Transportation Needs

- Examples include: last available transportation for student

*****ANY OTHER REASONS FOR EARLY RELEASE ARE NOT AUTHORIZED*****

Unauthorized instances or unacceptable patterns of unauthorized early departures are cause for evaluation for dismissal from the Project SHARE Program.

By signing below, I acknowledge and understand the attendance requirements and Early Release Policy of the Project SHARE After School Program. I understand failure to comply with the attendance and early release standards may result in dismissal of my student(s) from the Project SHARE Program.

Parent/Guardian Name (PRINT):	
Student Name (PRINT):	
Parent/Guardian Signature:	
Date of Signature:	

For questions or for a copy of Educational Code EC Section 8483(a)(1), which supports this policy, please contact the Project SHARE After School Program office at (530) 245-7830.



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Tom Armelino
Board of Education
Kathy Barry
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Steve MacFarland
Laura Manuel
Denny Mills
Elizabeth "Buffy" Tanner

PARENT/GUARDIAN SUNSCREEN PERMISSIONS

School Year: _____
Name of Child: _____ Birth Date: _____
School Name: _____

Participation in our program requires physical activity - indoor and outdoor. Students may be outside for up to 60 minutes at a time engaged in directed activities anytime during the year, weather permitting. Maintaining a safe environment, including **SUN SAFETY**, is a priority for our organization and as such, our Board has adopted Policy 5141.7.

If you have concerns about sun exposure and/or your student has known sun sensitivities (prone to sunburn), you are required to notify our program. As a parent/guardian you will be required to provide sunscreen that meets minimum SPF15- 30 and is DEET FREE. It is also your responsibility to know that the product provided does not cause allergic reactions when applied to your student. You may also provide protective clothing to minimize sun exposure.

Program Assurances

Staff will be provided training related to Sun Safety.
Staff will assure that your child is allowed time to apply sunscreen.
***Please note that staff is not required to apply the sunscreen.*

If you have questions about the information provided, contact the after school program director to evaluate your student's participation. Additional information about sunscreen is available online or on our website.

As the parent/guardian of the above child, I recognize that too much sunlight may increase my child's risk of getting skin cancer.

- I understand that it is my responsibility to provide sunscreen that meets product requirements if I wish for my student to apply sunscreen prior to outdoor activity.
- I have provided sunscreen for use on my student. The product is SPF 15 or higher and does not contain DEET or other mosquito repellent. I have clearly labeled the product with my child's name.

Parent/Guardian Full Name (Print): _____

Parent/Guardian Signature: _____ Date: _____

GENERAL GUIDELINES FOR USING SUNSCREEN

Parent/Guardian Responsibilities:

- Parent/Guardian is to sign the permission slip regarding concerns about sun safety.



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- Parent/Guardian will provide sunscreen of SPF 15 or higher and the container will be clearly labeled in permanent marker with the child's name.
- The product shall not contain DEET or other mosquito repellent.
- Parent/Guardian will have made sure the child has used the sunscreen prior to bringing it to school to assure there is no allergic reaction.

Staff Responsibilities:

- Avoid long periods of sun exposure. Sit or play in the shade whenever possible, especially when your shadow is shorter than you are tall.
- Be aware of how much time you are in the sun. Remember, it takes only 15 minutes for a child's skin to sunburn.
- Using sunscreen does not permit the child to be in the sun longer. Sunscreens should be used to prevent sunburn.
- Allow student to apply sunscreen prior to going outside during the hours 10:00 AM- 4:00 PM even on cloudy days. The sun's energy is greatest when it travels through less atmosphere at midday.
- Staff will only allow student to use the sunscreen the parent/guardian has provided.

Guidelines for Applying Sunscreen (Sunscreen is applied by the student and according to the instructions provided by the manufacturer). These are general guidelines:

- Apply sunscreen 30 minutes before going outside.
- Apply sunscreen evenly to all uncovered skin including the ears and lips but avoid the eyelids.
- Apply as much sunscreen as you would lotion to dry skin.
- Sunscreen should be reapplied every 2 hours or every 1-½ hours for broad spectrum sunscreen (contains a UVA and UVB protection factor).
- Sunscreen should be reapplied after swimming, towel drying, or excessive sweating.
- If irritation or rash appears, discontinue use. Notify parents.
- Sunscreen products with DEET shall not be used. Sunscreens often are applied repeatedly because they can be washed off. DEET is not water-soluble and will last up to 8 hours. Repeated applications may increase the potential toxic effects of DEET.