

# WCCUSD EXPANDED LEARNING PROGRAM 2018-2019

Wilson Elementary School

I/we give my child permission to participate in the Expanded Learning Program.

Student's Name Grade Room/Student Id Date of Birth

Parent or Guardian's Name (Please print) Signature Today's Date

Parent or Guardian's Name (Please print) Signature Today's Date

Home Address City Zip

Home Phone Work Phone Cell Phone

In case of emergency please contact:

Name Relationship Phone

Does your child have health coverage? ☐ Yes ☐ No

Medical Insurance Name Policy Number

Important Medical History Medication Student is Taking List any Allergies

Name of Child's Doctor Telephone

\*In case of an emergency involving my child, I/we give permission for the Expanded Learning Program staff to seek emergency medical treatment for my child and to act as guardian in permitting medical treatment if unable to reach me/us.

I/we understand that all emergency and/or medical costs are my responsibility.

Signature of Parent

or Guardian

Date

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*\*I/we understand the West Contra Costa Unified School District assume no responsibility or liability for injuries/illnesses of my/our child. I/we further understand that I/we hold the West Contra Costa Unified School District, their officers, agents, employees, and volunteers harmless from any and all liability or claims which may arise out of my/our child's participation in the Expanded Learning Program.*

X \_\_\_\_\_ / \_\_\_\_\_  
*Signature of Parents or Guardian Date*

I/we give permission for the Expanded Learning Program Staff to review my/our child's school data (test scores, report cards and other measures), for the purpose of assessing the academic effectiveness of the Expanded Learning Program. I/we also give permission for Expanded Learning Program staff to monitor progress and to give my/our child evaluation surveys to determine if services are helpful for my/our child.

X \_\_\_\_\_ / \_\_\_\_\_  
*Signature of Parents or Guardian Date*

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## GENERAL RELEASE

For Community Access Cablevision, Photographs, Videotaping, Interview Comments,  
and Posting on the Internet

TO: Parents and Guardians

FROM: Expanded Learning Program

Occasionally, the School District and organizations/associations connected with the district would like to use the name, photograph(s), video recording, and/or interview comments of students for educational and promotional purposes, including district-generated news articles and brochures. On occasion, the school also receives requests from the news media to photograph, film, or interview students while covering school events and activities. Such images and comments are used for news purposes only and not for commercial purposes.

As part of each school's parent/community information program, your school, the district may also wish to place students' pictures, schoolwork, and/or names on the district or school's website. Legitimate news media personnel or School District personnel do all photography, video recording, student comments, and posting on the Internet. In order to use such material, parental consent is necessary for any student under eighteen (18) years of age.

### 2018-2019 SCHOOL YEAR

Please fill out this form and return to your school.

Please indicate below if you give permission for your child's name, image, or comments to be used:

For School District publications and educational organizations connected to the district ☐ YES ☐ NO

By the news media, including newspapers, radio and television ☐ YES ☐ NO

On the district/company and/or school website ☐ YES ☐ NO

I understand that the school and the district have no control over further distribution of a photo or image once it appears in a school or district publication or website. By signing below, I hereby release the West Contra Costa Unified School District from any damages or injuries claimed by the student or parent related to production or distribution of the photo or image.

Student Name: \_\_\_\_\_

School: \_\_\_\_\_ Grade: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_



# WCCUSD EXPANDED LEARNING PROGRAM 2018-2019

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As parents/guardian, I/we understand that the Expanded Learning Program will begin immediately after school is out and will end at 6 p.m. In order to be released to go home from the program, **students MUST be signed out by one of the below-named parents/guardians, emergency contact, or by one of the individuals listed below.**

☐ I/we give my/our child, \_\_\_\_\_, permission to walk home or use public transportation unsupervised to return home.

---OR---

☐ I/we will pick up my/our child, \_\_\_\_\_, from the program.

I/we give permission to the following individuals to pick up my child:.

| Name | Relationship | Phone Number |
|------|--------------|--------------|
|------|--------------|--------------|

|      |              |              |
|------|--------------|--------------|
| Name | Relationship | Phone Number |
|------|--------------|--------------|

|      |              |              |
|------|--------------|--------------|
| Name | Relationship | Phone Number |
|------|--------------|--------------|

X \_\_\_\_\_ / \_\_\_\_\_  
Signature of Parents or Guardian Date

\*REMEMBER: Please pick up your child on time. The Expanded Learning Program at each site starts at school dismissal and continues until 6:00 p.m. Any time after 6:00 p.m. will be considered late. Each late pick up will be documented and after 3 late pickups, your child may be dismissed from the program. If your child is not picked up on time the Expanded Learning Program Staff will have no choice but to contact law enforcement or other authorities to pick him/her up.

**\*\*Individual's must bring valid photo identification with them when signing out students. No one under the age of 18 may sign a student out.**

If I/we arrive later than the dismissal time or if I am unable to pick up my/our child after the Expanded Learning Program, my child has permission to follow the procedure marked below:

☐ I/we give my/our child, \_\_\_\_\_, permission to walk home or use public transportation unsupervised to return home.

**\*As parents/guardian, I/we understand that I/we hold West Contra Costa Unified School District, and their officers, agents, and employees harmless from any and all liability or claims which may arise out of or in connection with the Expanded Learning Program pick up policy.**

X \_\_\_\_\_ / \_\_\_\_\_  
Signature of Parents or Guardian Date



# WCCUSD EXPANDED LEARNING PROGRAM 2018-2019

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The ASES Grant requires that programs remain open until 6 pm and for at least 15 hours per week. Children may, however, leave the program early under certain conditions. See below for the legislation and examples of acceptable early release circumstances.

## Legislation

*California Ed Code 8483. (a) (1) Every after school component of a program established pursuant to this article shall commence immediately upon the conclusion of the regular school day, and operate a minimum of 15 hours per week, and at least until 6 p.m. on every regular school day. Every after school component of the program shall establish a policy regarding reasonable early daily release of pupils from the program. For those programs or school sites operating in a community where the early release policy does not meet the unique needs of that community or school, or both, documented evidence may be submitted to the department for an exception and requires approval of an alternative plan. (2) It is the intent of the Legislature that elementary school pupils participate in the full day of the program every day during which pupils participate and that pupils in middle school or junior high school attend a minimum of nine hours a week and three days a week to accomplish program goals.*

Parents who enroll their children in the Expanded Learning Program based on the commitment to stay for the duration of the program day, may request an occasional /seasonal exception to the established attendance requirement. A child may be released early from the Expanded Learning Program prior to 6:00 p.m. for the following reasons:

1. Attending a parallel program (other programs at school or community centers such as sports/cheerleading, dance, scouts, etc.)
2. Family Emergencies.
3. Medical/Dental Appointments.
4. Child accidents/illness that occur during the program time (program staff will call parent or guardian).
5. Seasonal Concerns (students that walk home).
6. Safety
7. Kindergarten (must be in program a minimum of 3 hours, daily)

When a child is released early from the program, the parent will record the date and time of departure of the child and the reason. Parents/guardians or program staff (where applicable) will sign child out.

If a student will be leaving program early parent/guardian must fill out the Early Release form, the duration of the early release (dates it will be in effect), as well as the days affected and what time the child will be leaving all need to be indicated. **[Example: Baseball practice/April 3-June 8/Tues and Thursday/4:15.]**

The Early Release Request Form is available from the Expanded Learning Program Site Supervisor.

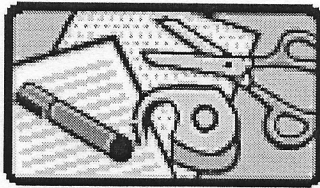
Please sign below as acknowledgement that you have received this policy and have read and understand it.

X

\_\_\_\_\_  
Signature of Parents or Guardian

\_\_\_\_\_  
Date

# SUPPORT YOUR AFTER SCHOOL PROGRAM



## We need your support!

We are asking for donations of **materials** and **volunteer time** from our parents and community.

If you can donate any of the materials listed and/or volunteer your time for tutoring or other jobs please contact the After School Program Coordinator.

## WE ALWAYS NEED:

### Basic:

- Pencils
- Crayons
- Erasers
- Scissors (kid safe)
- Tape (clear, masking)
- Glue Sticks
- Staplers
- Electric pencil sharpeners
- Rulers
- Paper (lined, printer, construction)

## THANK YOU SO MUCH FOR YOUR SUPPORT!



## ACKNOWLEDGEMENT OF FAMILY HANDBOOK AND EXPECTATIONS

Please return this page to the after school Site Coordinator indicating that you have received, read, and understand the after school program policy and procedures. By signing this document, you are acknowledging:

Please initial:

\_\_\_\_\_ I understand that my child(ren) must attend the after school program and be properly signed out by an authorized adult by 6pm Monday through Friday for the entire duration of the program (except with prior approval of the early release form) and I further understand that in the event they need to be absent, I will call ahead of time and I will send a note within 24 hours.

\_\_\_\_\_ I understand that if I am unable to adhere to the BACR attendance policy that my student may be dropped from the program.

\_\_\_\_\_ I understand that it is my responsibility to make sure my child is prepared with materials to complete their homework, sent to school with a book or supplemental activity and, that it is my responsibility to check that my student finished their homework, that it is correct and, turned in daily.

\_\_\_\_\_ I will help the after school program with behavioral interventions, if needed, to help our students make better and positive decisions.

\_\_\_\_\_ I will follow the adult code of conduct expectations.

\_\_\_\_\_ I understand BACR's release of liability.

\_\_\_\_\_ I understand all other policies and procedures laid out in this handbook.

**Print First and Last Parent/Guardian Name:**

\_\_\_\_\_

Parent/Guardian Signature

(Please note that you will be signing on behalf of all parents/guardians): \_\_\_\_\_

Date: \_\_\_\_\_

Student Names:

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

5. \_\_\_\_\_