



3/19/2018

# Community Education Enrichment Program

Before and after school care  
programs



Smith, Julius E.  
DUVAL COUNTY PUBLIC SCHOOLS

Enrichment Program  
Enrollment Form  
2018-2019

**Print clearly**

Student Name \_\_\_\_\_ Grade \_\_\_\_\_ Student # \_\_\_\_\_

Address \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_

Mom's Name \_\_\_\_\_ Mom's email \_\_\_\_\_

Mom's Home Phone \_\_\_\_\_ Mom's Cell Phone \_\_\_\_\_

Mom's Employment \_\_\_\_\_ Mom's Work Phone \_\_\_\_\_

Dad's Name \_\_\_\_\_ Dad's email \_\_\_\_\_

Dad's Home Phone \_\_\_\_\_ Dad's Cell Phone \_\_\_\_\_

Dad's Employment \_\_\_\_\_ Dad's Work Phone \_\_\_\_\_

List below persons to be contacted in case of illness, accident, or emergency who are authorized to remove your student from the facility in the absence of parent. If none, indicate "None". Should this list change, you must notify the school immediately in writing. Please make sure that all names listed below know that they **MUST** show Identification in order to pick up your student.

Name \_\_\_\_\_ Phone \_\_\_\_\_ Relationship \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_ Relationship \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_ Relationship \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_ Relationship \_\_\_\_\_

Physician \_\_\_\_\_ Phone \_\_\_\_\_

Office Use

Registration Date \_\_\_\_\_

First Payment Received \_\_\_\_\_

Exit from Enri. Pro. \_\_\_\_\_

**HOURS OF OPERATION:** The Enrichment Program operates only on days when school is in session for students. (\*Does not operate in summer months) Students may sign into the program no earlier than 7:00 am. Afternoon programs promptly beginning at the end of the school day to end no later than 6:00pm. This program will be located in the \_\_\_\_\_.

**LATE Drop-Off POLICY/ Late Pick Up:** Program closes promptly when school begins for AM Services and for Pm Services. If a student is not picked up prior to closing there will be a late payment fee assessed. All students must be in place for attendance daily. If they are not in for attendance they will be marked absent and there is no refund for days absent.

**PAYMENTS WILL NOT BE ACCEPTED DURING THE SCHOOL DAY IN THE MAIN OFFICE.**

**PAYMENT POLICY:** District Policy states that students may not remain in the Enrichment Program unless their accounts are paid on a current basis. Upon registration, you will receive a payment schedule to follow for the entire year. Payments MUST be made in person or online. Payments are due **PRIOR** to services being rendered. If payment is not received by the late fee assessment date, your account will be assessed a \$15.00 per family Late Payment Fee; and, after 10 days your student will be terminated from the program until all fees are made current. Your payment schedule is your **OFFICIAL** notice. Not having received a reminder that payments are due does not negate the **Late Fee**. Continual problems with late payments will result in your child not being allowed to remain in the Enrichment Program.

**NOTE: THE ENRICHMENT PROGRAM IS NOT A DROP-IN SERVICE. THERE WILL BE NO DAILY RATES, ALL PAYMENTS WILL BE MONTHLY PAYMENTS. PLEASE WRITE YOUR STUDENT'S NAME ON YOUR PAYMENT TO ENSURE PROPER CREDIT.**

**RETURNED CHECK POLICY:** Returned checks are no longer handled by the school. All returned checks will automatically be turned over to a collection agency contracted by the District School Board who will contact you directly. If restitution is not confirmed by the collection agency, your child will be dropped from the program within 3 days. Once restitution is made, all future payments must be made in the form of cash or money order for the remainder of the school year.

**DISCIPLINE:** Program will follow the Duval County School Board Code of Conduct.

**GENERAL RELEASE OF LIABILITY:** The undersigned hereby releases and forever discharges Community Education, the Duval County School Board, the City of Jacksonville, their officers, agents, servants, and employees from all claims and demands the undersigned now has or hereafter may have on account of or in any way arising from personal injuries known or unknown to the undersigned at the present time and property damages resulting or that results from any occurrence which may happen to my child during the Enrichment Program.

\_\_\_\_\_  
Signature of Parent/Legal Guardian

\_\_\_\_\_  
Date

A policy has been established in Duval County to govern the administration of medicine to students in public schools. The policy states that before medicine can be administered in the school, a statement from the physician concerning the medicine must be on file at the school. Directions taken from the prescription bottle or box will not suffice. Only a written statement from the physician is acceptable. Also, a Medication Release Form, which should be on file at your school. If none is in student file then have them complete the standard DCPS form.

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**MEDICATION RELEASE FORM**

"I request that my child, (or legal ward) \_\_\_\_\_ Be given external and/or internal medication as needed during school hours; and I will provide the medication. I understand that such medication will be given only according to directions of a licensed Medical Doctor or Dentist, and a copy of the directions is on file in the school office. Further, I agree to waive any claims or liability that may arise against any school personnel relative to the administration of medication to my child, (legal ward) regardless of the circumstances."

\_\_\_\_\_  
PARENT/GUARDIAN

**Upon your signature you acknowledge that you have read, understood, and agree to abide by \_\_\_\_\_ School Policies.**

# MEDICATION GUIDELINES

## A. Prescription Medication

In accordance with Section 1006.062, Florida Statutes, the following are guidelines for the administration of prescribed medication by school personnel:

1. The principal or a trained designee may administer prescription medication to a student while at school provided that for each prescribed medication, the student's parent or guardian shall provide to the school principal a written statement which shall grant the principal or his designee the permission to assist in the administration of each prescribed medication and which shall explain the necessity for the prescribed medication to be provided during the school day, including when the student is away from school property on official school business. The school principal or the trained school staff designee shall be allowed to assist the student in the administration of such medication.

2. All medication is to be brought to the school by a Parent or Legal Guardian.

3. All prescribed medications to be administered by school personnel shall be **received**, **counted** and **stored** in original containers. When a medication dose is given to a student, it **must be recorded**. If dosage is not recorded, it will be assumed that the student did not receive the required dose. When the medication is not in use, it shall be stored in its original container in a secure fashion **under lock and key** in a location designated by the principal.

3. There shall be no liability for civil damages as a result of the administration of such medication where the person administering such medication acts as an ordinarily reasonable prudent person would have acted under the same or similar circumstances.

## B. Metered Dose Inhalers for Students with Asthma

Section 1002.20, Florida Statutes, authorizes asthmatic students to carry a metered dose inhaler on their person while in school when they have approval from their parents and their physician. The school principal shall be provided a copy of the parent's and physician's written statement of approval.

## C. Nonprescription Medication

For nonprescription medication that is required to be administered at school, the above stated guidelines for prescribed medication will apply.

For nonprescription medication (over-the-counter medicine such as aspirin, cough syrup, Murine), the parent or legal guardian must:

1. Request in person that the medication be administered to the student during school hours.

2. Sign a written request (to be kept on file in the school) that states the type of medication, amount of dosage, and time the medication is to be administered to the student.

## D. Self-Carry Medication

1. Once a "Permission for the Administration of Medication" form is completed by the parent, student and physician indicating the need for the student to self-carry a medication is on file at the school, the student may carry the following medications: albuterol inhaler, epinephrine auto injector, diabetic supplies, and pancreatic enzymes.

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

Revised 6/2016 DISPOSITION- CUMULATIVE RECORD HEALTH FOLDER AT END OF SCHOOL YEAR

**DUVAL COUNTY PUBLIC SCHOOLS  
PERMISSION FOR THE ADMINISTRATION OF  
MEDICATION**

Student \_\_\_\_\_ DOB \_\_\_/\_\_\_/\_\_\_ Allergies \_\_\_\_\_  
Name of Medication \_\_\_\_\_ Dose \_\_\_\_\_ Time \_\_\_\_\_  
Route by mouth inhaled injection other: \_\_\_\_\_  
Reason to be administered \_\_\_\_\_

\_\_\_\_\_  
Special instructions

I grant permission for the principal or principal's designee to assist in the administration of the above named medication for my child (named above). I certify that the prescribed medication is in its **original container** and that it is necessary, according to my physician's instructions, for this medication to be provided during the school day, including when my child is away from school property on official school business. I understand that this **medication will be given only according to the directions on the label as prescribed by the doctor.** Further, I agree to waive any claims of liability that may arise against any school personnel relative to the administration of medication to my child according to these directions. I further understand that, at the end of the school year, it will be my responsibility to pick-up any unused medication by the last day of the school year, otherwise the school will dispose of the medication.

\_\_\_\_/\_\_\_\_/\_\_\_\_  
Date \_\_\_\_\_ Signature of Parent/Legal Guardian \_\_\_\_\_ Parent/Legal Guardian phone # \_\_\_\_\_

I have determined that it is necessary for this medication to be provided during the school day for the above named child. **(If you have determined the child needs to self-carry this medication, please also complete the section at the bottom of this form.)**

\_\_\_\_/\_\_\_\_/\_\_\_\_  
Date \_\_\_\_\_ Signature of Physician \_\_\_\_\_ Physician Phone # \_\_\_\_\_

**DISPOSITION OF MEDICATION**

\_\_\_\_ I will pick up the unused/discontinued medication by the last day of the school year contract  
\_\_\_\_ At the end of the school year contract, I do not wish to pick up the medication. The school has my permission to dispose of the medication.

\_\_\_\_\_  
Date \_\_\_\_\_ Signature of Parent/Legal Guardian \_\_\_\_\_

**STUDENTS WHO ARE AUTHORIZED TO SELF CARRY MEDICATION  
(epinephrine, inhalers, diabetic supplies, and pancreatic enzymes)**

My child is required to self-carry this medication during the school day. I understand that this means my child will be self-administering this medication and the school staff is not responsible for monitoring the administration. I understand that I am responsible for ensuring that my child has this medication during the school day, including when the student is away from school property on official school business. I will ensure that the medication my child carries is properly labeled and not expired.

\_\_\_\_/\_\_\_\_/\_\_\_\_  
Date \_\_\_\_\_ Signature of Parent/Legal Guardian \_\_\_\_\_

I understand that I am to self-carry my medication and to determine when I need to use the medication. I will not allow any other student to use my medication. I will notify an adult of any symptoms I experience during the school day.

\_\_\_\_/\_\_\_\_/\_\_\_\_  
Date \_\_\_\_\_ Signature of Student \_\_\_\_\_

It is necessary for this child to self-carry this medication during the school day for the current school year. The child is knowledgeable of when and how to use the medication.

\_\_\_\_/\_\_\_\_/\_\_\_\_  
Date \_\_\_\_\_ Signature of Physician \_\_\_\_\_ Physician Phone # \_\_\_\_\_

## 2018-2019 Enrichment Program Payment Schedule

Based on 180 school days

Fees of \$160.00 per month does not include holidays or planning days (\$60.00 AM and \$100.00 PM)

PAYMENT DUE:	FOR SERVICES DURING:	AM	PM	BOTH	LATE FEE CHARGED
July 2 – Aug 3	AUGUST 13 – SEPTEMBER 10	\$60	\$100	\$160	
August 13	SEPTEMBER 11 – OCTOBER 8	\$60	\$100	\$160	August 20
September 10	OCTOBER 9 – NOVEMBER 6	\$60	\$100	\$160	September 17
October 8	NOVEMBER 7 – DECEMBER 11	\$60	\$100	\$160	October 15
November 6	DECEMBER 12 – JANUARY 25	\$60	\$100	\$160	November 14
January 8	JANUARY 28 – FEBRUARY 26	\$60	\$100	\$160	January 16
February 4	FEBRUARY 27 – APRIL 2	\$60	\$100	\$160	February 11
March 4	APRIL 3 – MAY 3 May 4 and 5 is a weekend	\$60	\$100	\$160	March 11
April 8	MAY 6 – May 31	\$60	\$95	\$155	April 15

Community Education Office:                      ext.    **Tax ID#: 59-6000589**    Hours:

**Payments are to be made prior to services being rendered**

- Your payment is **late** if not received before the start of the payment period and a \$15.00 late fee will be assessed. The Community Education Coordinator reserves the right to terminate services if your payment is not received before the start of the payment period.
- Late pick up will result in \$1.00 being charged each minute after the first 5 minutes.
- There are **NO** daily rates and rates will **NOT BE** prorated from the above schedule.
- There will be **NO** refunds issued for withdrawal from the program before the end of a payment period.
- Duval County policy states that a check cannot exceed \$250. If your fee is more than \$250 you must write two checks. Checks may be made out to \_\_\_\_\_ School. Please include the child's name on the check.
- Online payments can be made to <https://dcps.schoolcashionline.com/>
- **WE DO NOT ISSUE YEAR END STATEMENTS.** Please retain all your receipts for yearend tax purposes.
- **Payments are made during CE program hours only.** School cash online services available.

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Signature of Parent /Guardian

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Date

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Signature of the Enrichment Program Coordinator

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Date

The signing of this document means that you have read and understand the program policies as it pertains to payment, arrival and pick up, as well as the discipline policy.





D U V A L C O U N T Y  
P U B L I C S C H O O L S

**Community Education Enrichment Program  
Policies and Guidelines for Parents**

**8015 Parker School Rd  
Jacksonville, FL 32211**

## ENRICHMENT PROGRAM POLICIES TO EMPHASIZE WITH PARENTS

**POLICY:** “District policy is that students may not remain in the Enrichment Program unless their account balances are paid on a current basis.”

**Attendance:** If a student is absent during the school day, they will not be allowed to attend extended day on the day of the absence. If the student is taken from school early, and is not returned to school before the school day ends, they will not be able to attend extended day. Absenteeism does not constitute a refund.

**PAYMENT:** Payments are due as scheduled. **First payment must be made in person by the parent to the Coordinator/designee of the Enrichment Program office during the hours of operation of the program.** A late fee will be added to payments received after the late fee charged date (See handbook for late fee application). Cash payments must be for the exact amount. Please remain with the individual taking payment until your receipt has been written. **Automatic bill pay may be used after first payment made in person.**

**NOTE:** Programs approved by the Duval County Public Schools are required to receive payment prior to services being rendered. A late fee must be added to payments received after the due date. Payment notices may be issued to remind parents. However, the payment schedule is the official notice. Not having received an additional notice will not negate a late fee. When a child is registered in the program, parents are to be given a payment schedule for the entire school year. The schedule of payments should be posted in a conspicuous place as a regular reminder. Continual problems with late payments may result in a child not being allowed to remain in or return to the program.

**CHECKS:** Checks are acceptable as payments. Checks should be made payable to the school providing the service. It is district policy not to accept post-dated checks or to hold a check for any amount of time. If a check is returned for non-payment, the EDP may refuse to accept checks for future payments. Future payments would then be made with a CASHIER’S check, money order or cash. The CheckRedi collection procedure is at the principal’s discretion.

**HOURS:** Children may not arrive earlier than 7:00 A.M., and must be picked up by 6:00 P.M. Non-compliance with this policy may result in dismissal from the program.

**WARNINGS:** **Discipline** warnings will be given to children who disobey instructors or the Student Code of Conduct. **Guidelines are to be followed with no exceptions.**

**PROPERTY:** Children are responsible for their own belongings. Names should be written on all belongings.

**PICK-UP:** Children will be allowed to leave with parents who have written consent from parents only. **We will not accept notification by telephone. Designated persons must use pick-up cards. All Enrichment Program students being picked up must be signed out in a designated supervised location. Those individuals signing students out must be prepared to present proper identification. Only those persons authorized in writing on the Extended Day registration form will be allowed to remove students from the program.**

## **ARRIVAL & DISMISSAL PROCEDURES**

For accountability purposes, and to insure the safety of all children enrolled in the Enrichment Program, the following procedures must be followed.

Enrichment Program hours begin at 7:00 A.M. and end at 6:00 P.M. If the student arrives prior to 7:00 A.M. or departs after 6:00 P.M., the parent must be notified the first time. For violations occurring thereafter, the parent will be assessed \$1.00 per every minute. However, do not begin charging this until 5 minutes after 6:00 P.M. **This fee is due by the close of the next school day. If three (3) violations occur, or if the parent refuses to pay the late fees, the student should be removed for the program.** Please note that the school clock is used as a point of reference when determining fees.

**\* DEPARTMENT OF CHILDREN AND FAMILIES WILL BE NOTIFIED OF STUDENTS ARRIVING PRIOR TO 7 A.M. OR BEING PICKED UP AFTER 7 P.M. IF VIOLATIONS PERSIST.**

All Enrichment Program students being picked up must be signed out in a designated supervised location. **Those individuals signing students out must be prepared to present proper identification. Only those persons authorized in writing on the Enrichment program registration form will be allowed to remove students from the program.**

Parents experiencing unavoidable emergency situations can always contact the Enrichment Program by calling and speaking with the Enrichment Program Coordinator or their designee.

Please be advised that all decisions are at the discretion of the Administrator.

## DISCIPLINE POLICIES

Discipline policies shall be tailored to meet the needs of the specific program. Positive reinforcement principles will be used in dealing with students. If problems persist and affect the safety and educational enrichment of other students in the program, the Enrichment Program reserves the right to suspend and/or expel a student from the program.

Input from parents concerning problems at home, which may affect a student's behavior, is welcomed. Parents are encouraged to discuss matters, which affect the enrichment atmosphere, of the program.

A **Behavior Communication** (see following pages) may be used first in place of a Discipline Warning to communicate a problem you may be experiencing with a student. This would be given to inform the parent of not only improper behavior, but may also be used to send home a positive report.

**Discipline Warnings** for disciplinary reasons will be given to students as follows:

**First and Second Warnings** – Must be signed by parent/guardian and returned.

**Third Warning** – Must be signed and returned. The student will serve a one-week suspension from the program. Payment must still be made for this time in order to hold the student's place in the program.

**Fourth Warning** – The student will not be allowed to return to the Enrichment Program. All refunds are at the discretion of the Community Education Coordinator, or the School Principal.

Failure to comply with the above standards by parent or student may result in the dismissal of the student from the Extended Day Program.

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Signature of Parent /Guardian

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Date

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Signature of the Enrichment Program Coordinator

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Date

The signing of this document means that you have read and understand the program policies as it pertains to payment, arrival and pick up, as well as the discipline policy.