

Enrichment Program
Enrollment Form - Standard 1
2017-2018

AM Services \$ 60.00 PM Services \$100.00 Both \$160.00

Student #			
Student Name		Grade	
Address			ZIP []
Home Phone			
Mom's Name	Mom's email:		
Mom's Home Phone	Mom's Cell		
Mom's Employment	Mom's Work		
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			
Relationship		Phone	
Name		Phone	
Relationship			
Name		Phone	
Relationship			
Name		Phone	
Relationship			
Physician		Phone	

First Payment Received: Yes No

Student's 2nd Period Teacher

Exit date

Enroll date

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Enrichment Program Policy Agreement Form

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 **6:00**pm. 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 within 5 days of the **DUE DATE**, your account will be assessed a \$15.00 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 or Bi- Weekly for situational use. 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.



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.”

Student Name

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Signature of Parent/Guardian

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Date

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