



OUR LADY OF VICTORY SCHOOL

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EXTENSION CARE APPLICATION FOR SCHOOL YEAR 2008-2009

APPLICATION DATE: _____

REQUESTED START DATE: _____

Total Amount due at Registration: \$25.00 per family Date Registration Received: _____
Minimum Days Fee: _____ Date Min. Day Fee Received: _____
Monthly Fee : _____

CHILD INFORMATION:

Child's Name: _____ Grade _____ Birth date _____
Child's Name: _____ Grade _____ Birth date _____
Child's Name: _____ Grade _____ Birth date _____
Child's Name: _____ Grade _____ Birth date _____

Extension Care Schedule:

1st Child: _____ Morning Care: Yes _____ No _____
1st Child: _____ After School Care: Yes _____ No _____ Number of Days _____
After School must designate specific days: Circle Days Attending M T W TH F
2nd Child: _____ Morning Care: Yes _____ No _____
2nd Child: _____ After School Care: Yes _____ No _____ Number of Days _____
After School must designate specific days: Circle Days Attending M T W TH F
3rd Child: _____ Morning Care: Yes _____ No _____
3rd Child: _____ After School Care: Yes _____ No _____ Number of Days _____
After School must designate specific days: Circle Days Attending M T W TH F

Mother's/Guardian's Name _____ Home Phone _____
Address _____ Cell Phone _____
City _____ Zip _____ Work Phone _____
Employer's Name: _____
Father's /Guardian's Name _____ Home Phone _____
Address _____ Cell Phone _____
City _____ Zip _____ Work Phone _____
Employer's Name: _____
Relative /Friend's Name _____ Home Phone _____
Address _____ Cell Phone _____

Medical Information:

Physicians Name _____ Ph: _____
Address: _____ City _____ State: _____
My Child has the following condition(s) and/or takes the following information(s)
Explanation _____
If an emergency should arise which requires medical attention and we as Parents/Guardians cannot be reached, you are authorized to take whatever steps are necessary to protect the health of these Child/Children, at my expense.
Parent/Guardian Initials _____

Extension Care rates are monthly rates. Payments are due on the 5th of each month. Any payments received after the 15th is considered late. A \$10 late fee will be charged to all accounts that are received after the 15th of the month. There is no prorating for any month. There is a \$20 charge for any bounced checks. All holidays were taken into consideration when fees were determined. We do not offer provisions for drop-in's. Children in Extension Care must be registered. Two weeks notice needs to be given if it is necessary to change the number of days your child/ren will be in Extension Care

POLICIES AND PROCEDURES

I have read, initialed, and understand the EXTENSION CARE PROGRAM POLICIES AND PROCEDURES on the back of this application and agree to abide by them. I affirm to the best of my knowledge the above statements and information are true.

PARENT/GUARDIAN SIGNATURE _____ **DATE** _____

EXTENSION CARE RATES FOR SCHOOL YEAR 2008-2009**AFTER SCHOOL CARE - FEES ARE MONTHLY RATES**

EXTENSION CARE CLOSES AT 6:00PM. ANY CHILD PICKED UP AFTER 6PM WILL BE CHARGED \$20 FROM 6:01PM -6:15PM, AN ADDITIONAL \$20 WILL BE CHARGED FROM 6:16PM -6:30PM. AN ADDITIONAL \$25 DOLLARS WILL BE CHARGED FOR EVERY ADDITIONAL 15 MINUTES AFTER THE 6:30 HOUR.

<u>DAYS</u>	<u>ONE CHILD</u>	<u>TWO CHILDREN</u>	<u>THREE OR MORE CHILDREN</u>
4-5	\$125	\$166	\$175
3	\$106	\$140	\$155
1-2	\$ 85	\$117	\$130

MORNING CARE

Morning rates do not fluctuate based on the number of mornings a child attends during a week.

<u>ONE CHILD</u>	<u>TWO CHILDREN</u>	<u>THREE OR MORE CHILDREN</u>
\$25	\$35	\$40

MINIMUM DAYS ONLY

No hot lunch is provided on these days. You must send your child with a cold lunch.

Charged yearly and must be paid in advance – no refunds

<u>ONE CHILD</u>	<u>TWO CHILDREN</u>	<u>THREE OR MORE CHILDREN</u>
\$125	\$175	\$225

A separate Emergency Card must be filled out for extension care from the school form.

A separate Sign out Authorization form must be filled out for extension care from the school form

POLICIES AND PROCEDURES:**1. _____ (Int'l's) FEES**

Payments are to be made by check or money order only. If payment is not received by the 15th of the month a \$20.00 late fee will be assessed. In the event the 15th falls on a weekend or holiday, payment must be received or postmarked before the 15th. Any fees not current two consecutive months in a row will result in services terminated. Your child/ren will be dropped from the program. If a child is dropped from the program for non-payment, a re-enrollment fee of \$35.00 will be charged along with any unpaid fees. No credit is given for non-attendance. In an attempt to maintain our fees, we charge for additional services provided by the office listed below. These fees are non-refundable.

2. SIGN IN/OUT

_____ (Int'l's)

Your child must be signed in and out each day by the designated ADULT(S) or other responsible designee(s) listed on the child's emergency card. An Extension Care employee will sign your child in when he/she makes the transition from the regular school program to the Extension Care Program. Parent(s)/Guardians(s) must sign their child/ren "IN" before the morning program and "OUT" when they pick up their children from the program using their first and last name. (STATE LAW) Your child must check in with the program immediately after dismissal from school so accurate attendance can be taken. Only the persons listed on the application and/ the emergency card will be allowed to take the child from the Extension Care Program, and they must show picture identification.

3. LATE PICK-UP

_____ (Int'l's)

Parents picking up their child/ren will be charged \$20 per 15-minute increments or any portion thereof, which will be added to your monthly fees. If we have not been contacted within 30 minutes of closing time, we will make attempts to notify someone on the emergency card. If no one can be reached to pick up the child, Child Protective Services and/or the authorities and ask them to pick up your child.

4. Dropping Child/ren from the Program

_____ (Int'l's)

If your plan to drop your child from the program, you need to notify the Office in writing two weeks in advance in order to avoid having to pay the whole month's fees. Fees can be pro-rated if two weeks notice is given. If no advance notice is given, total monthly fees will be due.

5. Absences

_____ (Int'l's)

If your child will be absent from the program, parents must call the office and let them know your child is expected in extension care that day. This will prevent the extension care staff from looking / calling for your child. No credit is given for non-attendance.

6. Schedule Changes

_____ (Int'l's)

You are obligated to pay for any hours contracted. Changes for the upcoming month must be made in writing to the office with a two week notice. The safety and welfare of your child depends on good communication with the Extension Care staff and Office. You may obtain a schedule change form from our office.

7. Termination of Service

_____ (Int'l's)

The Extension Care program is a voluntary, fee-based program. Therefore, adherence to the regulation stated in this contract is mandatory. Your child care services may be terminated for the following reasons:

- Six late pick-ups in one school year.
- Failure to pay fees two consecutive months in a row.
- Disruptive behavior (Our Lady of Victory School Handbook for Discipline Policy and Procedures).
- Successive failure to notify the Extension care staff of schedule changes, drop off and pick up of child without signing in or out.

8. Behavior Management Goals

The Extension Care programs goal is to help develop each child's ability to independently control his/her own behavior in an age-appropriate manner. All School / Diocese rules must be followed. Any interruptive behavior that affects the program or the safety of other children can be grounds for removal from the program. See the Our Lady of Victory School handbook for the Discipline Policy and Procedures.

9. Staffing

Children 6-10 years old --1:14 adult-child ratio. Children 10-14 years old--1:18 adult-child ratios. Wherever groups of children of varying ages are commingled, adult ratios shall be proportionate and appropriate to the ages and groups of children.

10. Food/Snacks

Children are not offered an after school snack. Please make sure to send your Child/ren with a snack if desired.

11. Illness and Injuries

Ill children can not be accepted into the Extended Day Program. Should a child become ill, the parents will be notified to promptly pick up their child. However, minor accidents may occur. If your child is injured in the Extension Care, first aid procedures will be followed. In case of a serious accidental injury, we will make every attempt to contact you. We will also call 911, when and if appropriate, while continuing to administer basic first aid procedures. All non-routine incidents which result in corrective, preventative, investigative, safety or personnel procedures are reported to the Diocese using the General Liability Accident Report.

12. Medication

A student is not allowed to carry medication with him/her on the school grounds. Students who need inhalers or other medication must follow the protocol established by the School.

13. Child Protective Services

All Child care custodians are mandated reporters inclusive of school employees. As a mandated reporter, if any employee knows or has reasonable suspicion that a child is being abused and/or neglected or has been abused and/or neglected, the Child Protective Services agency will be notified and all required procedures followed.