



# Encore!

2009 - 2010

**Middle School Afterschool Program**

*in Durham Public Schools*



# Registration Form

Complete all information and return the registration form with a check or money order for either: **\$50 for a half of year** or **\$100 for the full year** to: COMMUNITY EDUCATION, PO BOX 1967, DURHAM, NC 27702 or you may register at our office at 302 MORRIS STREET (near the old Durham Bulls Athletic Park) **NOTE: You will need to re-register for the second half of the year**

unless you pay for the entire year. PLEASE DO NOT SEND THIS APPLICATION AND FEES TO THE SCHOOL. No refunds will be issued, unless the program becomes full. Please do not send cash. Limited space is available at each school. Applications with fees are taken on a first come, first served basis. Registered students will receive an acceptance letter with their program start

date. A waiting list will be formed once the program is full. You may fax Side 1 and 2 of this form and pay by credit card. Our fax number is 560-2177 or 560-3820. Scholarships for students are available. Please call 560-9488 for more information. Please complete all requested information.

<b>OFFICE USE ONLY</b>		<b>Checklist:</b> <input type="radio"/> I.D. <input type="radio"/> Welcome <input type="radio"/> Transportation <input type="radio"/> EZ Care	
Date Received: _____	Start Date: _____	Transportation Needed?: <input type="radio"/> Yes <input type="radio"/> No	
Amount Paid: (1st Half/Yr.) Oct.19th -Feb. 11th	Date Paid: _____	Check #: _____	Scholarship: _____
(2nd Half/Yr.) Feb.15th - May 20th	Date Paid: _____	Check #: _____	Scholarship: _____
Agency Referral: _____			

(PLEASE PRINT CLEARLY): School: \_\_\_\_\_ Grade: \_\_\_\_\_

Student's First Name: \_\_\_\_\_ Middle: \_\_\_\_\_ Last: \_\_\_\_\_

Birthdate: (Month) \_\_\_\_\_ (Day) \_\_\_\_\_ (Year) \_\_\_\_\_ Age: \_\_\_\_\_

My child is:  Black  White  Hispanic  Asian  Native American  Other My child is:  (M) male  (F) female

Home Address: \_\_\_\_\_ Apt #: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone #: \_\_\_\_\_ Parent Email: \_\_\_\_\_

Mother's Name: \_\_\_\_\_ Mother's Work #: \_\_\_\_\_

Cell/Pager #: \_\_\_\_\_ Mother's Email: \_\_\_\_\_

Father's Name: \_\_\_\_\_ Father's Work #: \_\_\_\_\_

Cell/Pager #: \_\_\_\_\_ Father's Email: \_\_\_\_\_

Emergency Contact Person: \_\_\_\_\_ Emerg. Phone #: \_\_\_\_\_

List all persons who have permission to pick up your child from the afterschool program. *Please inform manager of any changes:*

■ If legal parents are separated or divorced. Who has legal custody?  Mother  Father  Both Parents  Other

List any fears, allergies, medical or special conditions that may affect his/her stay during the program or while being transported home. Please attach an explanation of any physical, emotional, behavioral or medical condition to this application.

■ Does this student currently receive free or reduced lunch at school?  Yes  No

■ If this program were not available, would an adult be waiting at home at 2:30 p.m.?  Yes  No

■ Does your child need transportation home at the end of the afterschool program?  Yes  No

*\*Transportation is limited to students living within the school district. Transportation from Magnet Schools is not available.*

■ My child will:  \* Ride the bus home  Walk home  Be picked up by car

■ Was your child in the **Encore!** Afterschool Program last year?  Yes  No Two years ago?  Yes  No

■ My child lives with:  Both Parents  Mother/Stepfather  Father/Stepmother  Mother Only  Father Only  
 Other Relative  Foster Care  Other \_\_\_\_\_

■ Was your child referred by:  Parent  Social Service  School  Mental Health  Law Enforcement  Juvenile Court  
 Self/Child  Other

■ Reason Enrolling:  Needs Adult Supervision  Below Grade Level in Math  Below Grade Level in Reading  School Suspensions  
 Suspected Gang Involvement  School Attendance Problems  Enrichment  Socialization

# Encore! Yearly Schedules

REGISTER EARLY – Space is limited!

The **Encore!** program at traditional calendar schools begins on October 19, 2009 and ends on May 20, 2010. The program meets Monday - Thursday for two hours each day except on teacher workdays and holidays. These schools include:

**Brogden**

1001 Leon Street  
560-3906

**Durham School of The Arts**

400 N. Duke Street  
560-3926

**Neal**

201 Baptist Road  
560-3955

**Carrington**

227 Milton Road  
560-3916

**Githens**

4800 Chapel Hill Road  
560-3966

**Shepard Magnet**

2401 Dakota Street  
560-3938

## 2009/2010 Traditional Afterschool Schedule

2009

OCTOBER				NOVEMBER				DECEMBER				KEY
M	T	W	T	M	T	W	T	M	T	W	T	
5	6	7	8	2	3	4	5		1	2	3	(●) Last Day of School
12	13	14	15	9	10	11	12	7	8	9	10	(●) First/Last Day of Afterschool Program
19	20	21	22	16	17	18	19	14	15	16	17	(●) Days Not Meeting
26	27	28	29	23	24	25	26	21	22	23	24	(●) Holiday
				30				28	29	30	31	

2010

JANUARY				FEBRUARY				MARCH				APRIL				MAY				JUNE			
M	T	W	T	M	T	W	T	M	T	W	T	M	T	W	T	M	T	W	T	M	T	W	T
4	5	6	7	1	2	3	4	1	2	3	4				1	3	4	5	6		1	2	3
11	12	13	14	8	9	10	11	8	9	10	11	5	6	7	8	10	11	12	13	7	8	9	10
18	19	20	21	15	16	17	18	15	16	17	18	12	13	14	15	17	18	19	20	14	15	16	17
25	26	27	28	22	23	24	25	22	23	24	25	19	20	21	22	24	25	26	27	21	22	23	24
								29	30	31		26	27	28	29	31				28	29	30	

**Chewning**

6819 Red Mill Road  
560-3914

**Rogers-Herr**

911 Cornwallis Road  
560-3970

## 2009/2010 Year-Round Afterschool Schedule

2009

OCTOBER				NOVEMBER				DECEMBER				KEY
M	T	W	T	M	T	W	T	M	T	W	T	
5	6	7	8	2	3	4	5		1	2	3	(●) Last Day of School
12	13	14	15	9	10	11	12	7	8	9	10	(●) First/Last Day of Afterschool Program
19	20	21	22	16	17	18	19	14	15	16	17	(●) Days Not Meeting
26	27	28	29	23	24	25	26	21	22	23	24	(●) Holiday
				30				28	29	30	31	(●) Intersession

Encore! does not operate during intersession.

2010

JANUARY				FEBRUARY				MARCH				APRIL				MAY				JUNE			
M	T	W	T	M	T	W	T	M	T	W	T	M	T	W	T	M	T	W	T	M	T	W	T
4	5	6	7	1	2	3	4	1	2	3	4				1	3	4	5	6		1	2	3
11	12	13	14	8	9	10	11	8	9	10	11	5	6	7	8	10	11	12	13	7	8	9	10
18	19	20	21	15	16	17	18	15	16	17	18	12	13	14	15	17	18	19	20	14	15	16	17
25	26	27	28	22	23	24	25	22	23	24	25	19	20	21	22	24	25	26	27	21	22	23	24
								29	30	31		26	27	28	29	31				28	29	30	

\* Programs may be canceled due to inclement weather, early release, holidays, and other days at the discretion of the school administration.  
Please post this calendar for easy reference regarding Encore! days of service.



# Encore!

## Program Information:

The **Encore!** programs are enrichment based, allowing students to participate according to their interests. The program maintains a staff to student ratio of 1:15 or lower. Programs are staffed by a mix of teachers, youth service workers, college students and volunteers.

### Program activities include:

- Homework Assistance
- Recreation and Intramurals
- Field Trips
- Arts and Crafts
- Cultural Enrichment
- Personal Development Activities
- Clubs
- Snack Period

Transportation home is provided for students living within the school district at each school except Shepard Magnet School and Durham Schools of the Arts. Programs operate Monday - Thursday beginning immediately after school dismisses.

- Low Cost to Students
- Enrichment-Based
- Operates 2 Hours Daily
- Free Nutritious Snacks and Drinks Provided
- Free Transportation Home

**We always encourage and welcome parents to visit and to volunteer in our programs.**

## Why After School?

**Our Mission Statement:** To provide educational, social and recreational alternatives for middle school students during the after school hours.

**Our Goals:** To advance student achievement by providing extended learning opportunities in a safe, caring and supportive environment.

**To engage** students in productive after-school programs primarily at the middle school site.

**To ensure** that afterschool activities complement and reinforce middle school programs.

**To provide** educational experiences, enrichment programs, or recreational alternatives for students who need reinforcement, exposure to a wider view of the world, or non-competitive opportunities to develop intellectual or recreational interests and skills and foster positive peer interaction.

**Sponsored by:** The Encore! program is generously supported by Durham Public Schools, Durham County Government, parent fees, and local community groups.

**Your Help is Needed:** To keep Encore! affordable for as many families as possible, please consider making a voluntary, tax deductible contribution to either sponsor a child for an entire year (\$100) or a portion of a year so we can serve more children. Thank you for any assistance you choose to provide.

## Vision Statement

We believe that the **Encore!** program will provide students with the opportunity to enhance their academic progress, boost skills and pursue interests. We believe that participation in this program will result in increased school attendance, development of positive peer relationships and reduction of at-risk behaviors.

## Release Statement

**PARTICIPATION RELEASE:** My child, \_\_\_\_\_ has my permission to fully participate in the Encore! afterschool program. In order to ensure that he/she receives the full benefit of this program, relevant background information is required. My permission is hereby granted for information, such as name, legal status, and school records, i.e. attendance, referrals, behavior, test scores and grades to be released. It is understood that this information is being shared with an independent program evaluator for use determining Encore's effectiveness. I/We retain the right to have access to this data upon written request. I have read and understood the above statement and I am familiar with its contents. The services of this program or some part thereof, may be altered, changed or suspended at any time due to funding shortages.

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

**MEDICAL RELEASE:** If a medical emergency arises, the Encore! staff will attempt to contact the parent/guardian. If the emergency is such that immediate hospital attention is necessary, I give permission for my child to be transported by ambulance.

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

**TRANSPORTATION RELEASE:** I hereby give my permission to allow my child to be transported home from the Encore! afterschool program on days scheduled. In addition, my child has my permission to be transported to and from afterschool activities/field trips and functions when they are located off school campus.

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

**MEDIA RELEASE:** I hereby grant and assign to Durham Pubic Schools, its agents, employees, designees, successors, or assigns, all my rights, title, and interest to photographic reproductions of my child including his/her name and consent that such may be used for the purposes of advertising and publicity of the Encore! afterschool program.

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

## Student/Parent Contract

**Encore!** afterschool program parents and students must read and accept the following statements in order to make their participation rewarding and beneficial.

1. I will meet the minimum attendance requirement of two days per week, understanding that daily attendance is preferred. My lack of attendance will result in my termination from this program or losing my transportation services.
2. I will follow all school rules as they also apply to the **Encore!** afterschool program.
3. I will report on time each day at the designated area assigned by the **Encore!** afterschool program.
4. I will come prepared to devote one hour each day to academics.
5. Fighting, misconduct or unwillingness to participate or follow staff instructions can result in my immediate suspension from the **Encore!** program. (Specific rules and expectations from your **Encore!** afterschool program will be given to you when you begin the program).
6. As the parent/guardian, I agree to pick my child up on time if (s)he is not a bus rider. I understand there are fees associated with any late pick up that concerns my child.
7. I will keep the **Encore!** staff informed of any changes or important information that affects my child's well-being.

**I have read and agree to these guidelines:**

Student's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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

## Method of Payment

Check/Money Order made out to Community Education is enclosed.  
Please charge my:  Visa  Master Card Amount \$:

Card #: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Cardholder Name (print): \_\_\_\_\_

Signature: \_\_\_\_\_

**Your Donation is Appreciated:**

I wish to donate \$ \_\_\_\_\_  
to the Encore! program to assist  
scholarship students.

## To Register

**BY MAIL:** Complete and return the registration form and payment (check or money order) to: Community Education, P.O. Box 1967, Durham, NC 27702-1967

**BY FAX:** Complete and fax the registration form to our accounting office at 560-2177. Please call to make payment by phone using a credit or debit card: 560-9488. A 3% convenience fee will be charged on all credit/debit card payments.

**IN PERSON:** Complete and bring the registration form along with your method of payment to our office at 302 Morris Street in downtown Durham. Office hours are Monday-Friday from 8-5pm.

2009-2010 Middle School Afterschool Program in Durham Public Schools

**Encore!**

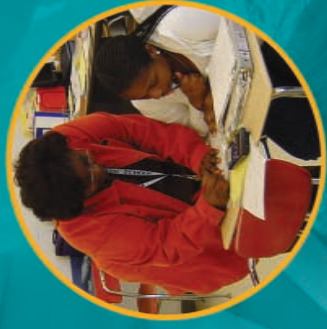


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2009 - 2010

**Middle School Afterschool Program**

*in Durham Public Schools*



Durham Public Schools  
Community Education Department

P.O. Box 1967

Durham, NC 27702-1967

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Check us out on the Internet at [www.dpsnc.net](http://www.dpsnc.net)  
Questions? Call 560-3816