Before & Afterschool Programs

DPS Community Education & Family Engagement Department

2019-2020

www.dpsnc.net/afterschool
Quality Standards
Durham Public Schools (DPS) before and afterschool programs offer a balance of structured and free-choice activities designed to stimulate students’ intellectual, social, emotional, and physical development. The program extends learning beyond the regular school day and provides caring support for every child. All before and afterschool programs are licensed by the North Carolina Department of Health and Human Services – Division of Child Development and qualify for day care assistance vouchers managed by the Department of Social Services (DSS).

Afterschool Offers...
- trained staff and a safe, stimulating environment
- theme-related activities in arts, crafts, music, dramatic play, science, language arts, cooking, and more
- organized indoor and outdoor games and physical activities
- homework and quiet time
- guest presenters and performers, including storytellers, musicians, drama and dance groups
- “club” activities that foster individual interests of students
- time for social interaction with a diverse group of peers
- community service-learning projects
- healthy afternoon snacks

Operating Information
Before school programs open at 6:30 a.m. and operate until the first bell rings. Before school programs will only operate at sites with 10 or more students enrolled. Elementary afterschool programs operate on school days from the time school is dismissed until 6:00 p.m. There is a late pick-up fee for children after 6:00 p.m. On early release days, programs will open and operate two hours earlier. Please refer to the DPS student calendar for the dates.

Program Locations
Students attend the Before & Afterschool program at the school where they are enrolled. The programs operate in each school’s gym or multipurpose building and use other areas including the media center, art room and classrooms. Students attending an elementary school that does not have a program, can enroll and attend a nearby program where students are transported by school bus.

For frequently asked questions or to view our program policies, please visit our website at www.dpsnc.net/afterschool

Schedule 1

<table>
<thead>
<tr>
<th>Before school: (6:30 a.m. - 7:45 a.m.)</th>
</tr>
</thead>
<tbody>
<tr>
<td>20 day before school fee (monthly)</td>
</tr>
<tr>
<td>Before school for 2nd child</td>
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<tr>
<td>Before school for 3rd child</td>
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</tbody>
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<table>
<thead>
<tr>
<th>Afterschool: (2:15 p.m. - 6:00 p.m.)</th>
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</thead>
<tbody>
<tr>
<td>20 day afterschool fee (monthly)</td>
</tr>
<tr>
<td>Afterschool for 2nd child</td>
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<tr>
<td>Afterschool for 3rd child</td>
</tr>
</tbody>
</table>

| Weekly fee (Before & Afterschool)    | $130   |
| Weekly fee (Before Only)             | $20    |
| Weekly fee (After Only)              | $110   |

Plan 1 / Bell Schedule (7:45 a.m. - 2:15 p.m.)
Bethesda
Club Afterschool only
Creekside
Eastway Afterschool only
Fayetteville St. Afterschool only @ WG Pearson
Holt Afterschool only
Lakewood Afterschool only
Little River Afterschool only
Mangum Afterschool only
Merrick-Moore
Oak Grove
Parkwood Afterschool only
WG Pearson Afterschool only
Sandy Ridge
Spring Valley
Watts Afterschool only

Schedule 2

<table>
<thead>
<tr>
<th>Before school: (6:30 a.m. - 8:30 a.m.)</th>
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</thead>
<tbody>
<tr>
<td>20 day before school fee (monthly)</td>
</tr>
<tr>
<td>Before school for 2nd child</td>
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<tr>
<td>Before school for 3rd child</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Afterschool: (3:00 p.m. - 6:00 p.m.)</th>
</tr>
</thead>
<tbody>
<tr>
<td>20 day afterschool fee (monthly)</td>
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<tr>
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<tr>
<td>Afterschool for 3rd child</td>
</tr>
</tbody>
</table>

| Weekly fee (Before & Afterschool)    | $130   |
| Weekly fee (Before Only)             | $30    |
| Weekly fee (After Only)              | $100   |

Plan 2 / Bell Schedule (8:30 a.m. - 3:00 p.m.)
Eastway
Eno Valley
Glenn
Hilandale
Hope Valley
Southwest
YE Smith (8:45 a.m.-4:15 p.m.) @ Eastway

Schedule 3

<table>
<thead>
<tr>
<th>Before school: (6:30 a.m. - 9:15 a.m.)</th>
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<tbody>
<tr>
<td>20 day before school fee (monthly)</td>
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<tr>
<td>Before school for 2nd child</td>
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<tr>
<td>Before school for 3rd child</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Afterschool: (3:45 p.m. - 6:00 p.m.)</th>
</tr>
</thead>
<tbody>
<tr>
<td>20 day afterschool fee (monthly)</td>
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</tr>
<tr>
<td>Afterschool for 3rd child</td>
</tr>
</tbody>
</table>

| Weekly fee (Before & Afterschool)    | $130   |
| Weekly fee (Before Only)             | $40    |
| Weekly fee (After Only)              | $90    |

Plan 3 / Bell Schedule (9:15 a.m. - 3:45 p.m.)
Burton @ RN Harris
Forest View
Morehead
Pearsontown
EK Powe
CC Spaulding @ RN Harris
RN Harris
Registration Deadlines
Based on our licensing requirements, DPS cannot guarantee a space when a program becomes fully enrolled. When the program site reaches capacity, applicants are placed on a waiting list. When a space becomes available, parents will be contacted. The $35 registration fee will secure your place on the waiting list. Should you decide to withdraw from the waiting list, the registration and prepaid tuition fee will be refunded.

Year-round students requesting to start on the first day of school must be registered by July 5, 2019. Traditional school students requesting to start on the first day of school must be registered by August 16, 2019.

Register TODAY!
Your child can begin attending programs two business days from the day you register. Ex. Register on Monday before 5:00 p.m. and your child can start Wednesday. If you register after 5:00 p.m., your two day wait starts the next business day.

Note: Please refer to the website for possible delays. If a different start date is necessary, you will be contacted.

To Register
Complete a registration form; send the fee for one 20-day cycle plus the $35 registration fee for each child. This registration fee and one cycle payment is not refundable.

By Mail: Community Education & Family Engagement
Attention: Accounting Office
P.O. Box 1967
Durham, NC 27702-1967

In Person: Please visit our office located at 2107 Hillandale Road (I-85, exit 174-B). Our office hours are Monday through Friday from 8:00 a.m. to 5:00 p.m.

By Phone/Fax: Fax your completed registration form to (919) 560-2177 to the attention of the Accounting Office. To verify receipt of the faxed registration form, and to make your payment by credit/debit card, please contact us between 8:00 a.m. to 5:00 p.m. at (919) 560-9488. A 3% convenience fee will be added to all credit/debit card transactions.

Select Payment Option: One Time Payment:
☐ Check / Money Order made out to “Community Education” is enclosed.

Account Holder’s Name: ________________________________
Account No: ____________ ____________ ____________ ____________
Exp. Date: ____________ Signature: ____________________________ Date: ____________

☐ Please charge my: ☐ Master Card ☐ Visa ☐ Discover for $ __________________

☐ Checking Account (attach voided check)

Account Holder’s Name: ________________________________
Account No. (First 9 Numbers): ____________ ____________ ____________ ____________
Routing No. (First 9 Numbers): ____________ ____________ ____________ ____________ ____________
Account No. (Second Set of Numbers): ____________ ____________ ____________ ____________ ____________ ____________
3 Digit Security Code: ____________
Exp. Date: ____________ Signature: ____________________________ Date: ____________

Check No. (Third Set of Numbers): ____________
Bank Name: ________________________________

Contract
☐ I understand the before and afterschool programs are open according to the official school calendar of Durham Public Schools and is closed during vacations, school holidays, and intersession (year round schools).

☐ I understand that I am responsible for payment of monthly fees to the Community Education department. Payment is due the 15th or next business day of each month and one-month in advance. If my payment is late I will be responsible for paying a late fee. Enrollment will be terminated if accounts are past due. Past due accounts are subject to a third party collection agency.

☐ Checks are gladly accepted. When you provide a check as payment, you authorize us to use information on the check to make a one-time Electronic Fund Transfer (EFT) from your account, or to process the payment as a check transaction. You authorize us to collect a fee through EFT or bank draft from your account if your payment is returned unpaid. Community Education reserves the right to require cash or credit card payments once a check has been returned for insufficient funds.

☐ A 3% convenience fee will be charged on all credit/debit card transactions and on-line registrations. The 3% fee is waived on automatic payments.

☐ I will give a minimum two weeks notice in writing to the Accounting Department prior to withdrawal and I am responsible for payment of fees through the end of the bill cycle. If I enroll and withdraw within the same cycle, I owe for one full cycle. Enrollment is on a full time basis only. Part time enrollment will not be accepted nor can fees be prorated due to absences, or early withdrawals.

☐ I will update my child’s emergency and other pertinent information if changes occur. It is my responsibility to sign my child into before school each day. I understand that children may be signed out ONLY by me or those persons I have named on the registration form. I will provide the manager with any appropriate changes.

☐ This program must maintain a minimum number of students enrolled for the program to operate. Parents will be given a minimum 30 day notice if the program is cancelled due to low enrollment.

☐ I understand I will be charged a late fee of $10.00 for every 10 minutes or portion thereof when my child is picked up after 6:00 p.m. Once I have accumulated five late pick-ups program participation will be terminated.

Check us out on the Internet at www.dpsnc.net/afterschool

The Durham Public School system does not discriminate on the basis of sex, color, religion, national origin, age or disability in any of its educational or employment programs or activities.

Tax ID Number: 56-6001021
Before & Afterschool PROGRAMES Registration FORM 2019-2020

Child’s Name: Preferred Name: DOB: Age: Grade [Aug 19]:

School Name: Check the program needed: □ Before □ After □ Both programs

2nd Child’s Name: Preferred Name: DOB: Age: Grade [Aug 19]:

School Name: Check the program needed: □ Before □ After □ Both programs

(PERSON RESPONSIBLE FOR BILLING) PLEASE PRINT!

Parent/Guardian’s Name #1:
Address: Apt#: City: State: Zip:
Email Address:
Home Phone: Cell Phone:
Place of Employment: Work Phone:

Parent/Guardian’s Name #2:
Address: Apt#: City: State: Zip:
Email Address:
Home Phone: Cell Phone:
Place of Employment: Work Phone:

AUTHORIZED PICK-UP: Child will be released only to the parents/guardians listed above. The child can also be released to the following individuals as authorized by the person who signs this application.

Name: Home Phone: Cell Phone:
Name: Home Phone: Cell Phone:
Name: Home Phone: Cell Phone:

EMERGENCY CONTACT: (MUST BE FILLED OUT): In the event of an emergency, if the parents/guardians cannot be reached, the facility has permission to contact the following individuals.

Name: Home Phone:
Work Phone:
Name: Home Phone:
Work Phone:
Name: Home Phone:
Work Phone:

HEALTH CARE NEEDS: For any child with health care needs such as allergies, asthma, or other chronic conditions that require specialized health services, a medical action plan must be attached to the application. The medical action plan must be completed by the child’s parent or health care professional. Is there a medical action plan attached? □ Yes □ No

List any allergies and the symptoms and type of response required for allergic reactions:

List any health care needs or concerns, symptoms of and type of response for these health care needs of concerns.

Please explain any physical, emotional or behavioral needs.
Does your child(ren) have any fears or receives special services during the school day? □ Yes □ No
Please explain:

Doctor’s Name: Phone:
Hospital Preference: Phone:

- Is there a separation, divorce or custody concern of which our staff should be aware? □ No □ Yes (If yes, please attach an explanation and the order).
- If a medical emergency arises, the program staff will attempt to contact me. If the emergency is such that immediate hospital attention is necessary, an ambulance may take my child to the hospital.
- I agree to the before, afterschool and summer camp programs contract and state policies and procedures of the Durham Public Schools-Community Education. I certify that I have received (hardcopy/online) at www.dpsnc.net/afterschool of the parent handbook which includes the behavior management guidelines, aquatic policy, DPS tobacco policy and a summary of the NC Child Care Laws.
- I give my permission for my child(ren) to participate fully in before, afterschool and summer camp activities including field trips and swimming under the supervision of staff.
- I understand that I will receive program billing and account information by email.

Parent/Guardian Signature Date