

HIGHLAND LOCAL SCHOOL DISTRICT'S

HIGHLAND EXPRESS

CHILD CARE PROGRAM

GRANGER ELEMENTARY

HINCKLEY ELEMENTARY

SHARON ELEMENTARY

DISTRICT PHONE NUMBERS: 330/239-1901

330/278-2727

330/668-1901

Our Highland Express Program has been developed to meet the needs of working parents and their children. We feel that children need a comfortable, loving environment where each child's developmental needs can be met. Although this time can be used to complement the child's school day, our program will have it's own identity. We do not want the program to be a continuation of the school day. We will seek to be as home-like as possible and provide a flexible curriculum with appropriate activities to interest all age groups. Opportunities will be available so each child's social, emotional, physical and cognitive needs can be met in self-directed activities.

We realize that there is nothing more precious to you than your children and it is important to have competent, loving people caring for them. It is the goal of our program to provide this and most important, to help build each child's self esteem and self image. Children who feel good about themselves are more likely to do well in school and succeed in life.

PROGRAM RATES

There is a \$25.00 registration fee for each child re-enrolled in the program. Tuition is a flat rate of \$8.00 per session regardless of the amount of time a child spends in the program daily. There is no tuition reduction for additional family members.

Morning -----	\$8.00
After School -----	\$8.00
Both before and after -----	\$16.00

Tuition must be paid by check or on-line using Payschools. If you must pay by cash, please have exact change. We cannot make change. Make checks payable to Highland Local Schools/Latchkey. **If an unpaid balance of fees exceeds \$65.00, your child will be excluded from attending the Latchkey Program.**

HOURS

The program hours will be from 6:30 to 8:45 in the morning and 3:30 to 6:00 in the afternoon each day school is in session.

OVERTIME FEES

The program ends promptly each day at **6:00 PM**. If you are late picking up your child, an overtime fee will be charged. The fee is \$5.00 each fifteen minute period you are late.

AM PROGRAM

Parent must sign in child and verbally check with staff member before leaving premises.

PM DISMISSAL POLICY

The person picking up a child must sign out and verbally check with a staff member before leaving the premises. If anyone other than a parent will be picking up the child, a staff member must be notified by either a note or a phone call from the child's parents or guardian before the child will be allowed to leave.

INCLEMENT WEATHER/EMERGENCY DISMISSAL

In the event Highland Elementary Schools are closed prior to the regularly scheduled dismissal time, the Highland Express program will not be held. Children will be sent home per instruction given on the Emergency Dismissal form.

START OF SCHOOL DELAY

If school is delayed, there will be NO morning program.

COMMUNICABLE DISEASE POLICY

A child suspected of having symptoms of a communicable disease will be isolated until his/her parents arrive. Parents will be notified by note if their child has been exposed to a communicable disease. A child will be isolated if any of the following symptoms are observed: head lice, severe diarrhea, Pink Eye, fever of over 100 degrees, severe runny nose or severe sore throat.

MEDICATION POLICY

We prefer not to administer medications of any kind, but, if absolutely necessary, special arrangements can be made.

EMERGENCY AND ACCIDENT POLICY

In case of an emergency and/or accident, we will follow the posted medical and dental plan. We will administer first aid, summon emergency transportation if needed, and contact the parents. An Incident Report will be completed and sent home to the parents.

STAFF/PARENT RELATIONSHIPS

Our staff will be available for any questions and concerns parents may have regarding their children. With your help, we will become a valuable resource for parents to link home and school.

CHILD ABUSE

We are required by law to report any suspected incidents of child abuse or neglect to the appropriate government agency.

TOYS FROM HOME

If a child would like to bring in a game or toy from home, it must be kept in a bag in the child's locker until it is approved by the supervisor. **NO toy guns. If a toy causes problems, it will be left at home.**

DISCIPLINE CLAUSE

The same school rules for student conduct found in the Student Handbook apply to any child attending the Latchkey Program. Students may be referred to the building principal for follow through of consequences.

*****PLEASE CALL*****

IT IS IMPORTANT TO CALL THE SCHOOL AND LEAVE A MESSAGE OR SEND A NOTE IF YOUR CHILD WILL NOT BE COMING TO THE PROGRAM AFTER SCHOOL AS SCHEDULED.

PROGRAM INFORMATION

The Highland Express was developed as a result of community interest. Start-up costs were funded through a state grant. The program is open to all students in the Highland School District grades Pre K – 5. The Highland Express program provides child care in a group setting. The program does not exclude qualified students with disabilities and offers reasonable modifications to the program to afford qualified students with disabilities an equal opportunity to participate in the program. The program is not required to provide modifications that constitute an undue burden for the District or result in a fundamental alteration of the program. The Highland Express does not discriminate in the enrollment of children upon the basis of race, color, religion, sex, or national origin.

HIGHLAND LOCAL SCHOOLS

CENTRAL OFFICE

3880 RIDGE ROAD

MEDINA, OHIO 44256

330/239-1901 330/278-2727 330/668-1901

HIGHLAND LOCAL SCHOOLS DISTRICT'S
HIGHLAND EXPRESS AFTER SCHOOL CHILD CARE PROGRAM

STUDENT ENROLLMENT INFORMATION

Bus number _____

Child's Name _____ Date of Birth _____

Child's Teacher _____ Room No. _____ Grade _____

Home Phone Number _____ Cell Number(s) _____

Names and ages of brothers and sisters _____

Who lives in the home with the child? (mom, dad, grandma, etc.) _____

Mother's Name _____ Father's Name _____

Parent's Status: Married _____ Divorced _____ Single _____ Widow(er) _____

Previous school or child care center/provider _____

Has your child experienced any changes lately? (moving, new baby, etc.) _____

Is there anything you feel the child care staff should know about your child? _____

Please list all of your child's medications and/or allergies _____

RELEASE OF CHILD

Name and relationship of **ALL** people authorized to take your child from the facility:

Is there anyone **NOT** allowed to take your child from the facility?

_____ Reason: _____

LATCHKEY START DATE: _____

(Parent Signature)

(Date)

PARENT AGREEMENT CONTRACT
THE HIGHLAND EXPRESS
GRANGER HINCKLEY SHARON
ELEMENTARY SCHOOLS

Child's Name _____ Grade _____
Address _____
Home Phone Number _____

Mothers Name _____
Work Phone # _____ Cell # _____
E-mail address _____

Fathers Name _____
Work Phone # _____ Cell# _____
E-mail address _____

DAYS OF ATTENDANCE: (please circle)

Monday Tuesday Wednesday Thursday Friday As Needed

TIMES OF ATTENDANCE: A.M. P.M. FULL TIME AS NEEDED
(Please circle the above)

Please sign and return this contract which states:

I agree to pay \$8.00 per session or the full-time rate of \$16.00 per day; whichever is applicable to my child's participation in the program. **If an unpaid balance of fees exceeds \$65.00, your child will be excluded from attending the Latchkey Program.** All fees are expected to be paid in full by the end of each month.

Fees should be paid by check or on-line using PaySchools. Please make checks payable to Highland Local Schools/Latchkey. Payment by cash is discouraged, however if you must pay by cash, please have the exact change. We appreciate your cooperation and look forward to your child's participation.

Parent's Signature Date

***PLEASE REMEMBER: IF SCHOOL IS DELAYED LATCHKEY WILL BE CLOSED. ALSO, IF SCHOOL IS DISMISSED EARLY LATCHKEY WILL BE CLOSED. IF YOUR CHILD IS ABSENT FROM SCHOOL HE/SHE MAY NOT USE THE PROGRAM THAT DAY. ***

HIGHLAND LOCAL SCHOOLS

EMERGENCY DISMISSAL

In the event that school is dismissed at an unscheduled time, due to unforeseen circumstances, **THE FOLLOWING SHOULD BE STRICTLY ADHERED TO:**

Student's Name _____

Grade _____ Teacher _____

Bus Number _____

_____ My child is to go directly home. (regular bus)

_____ My child is to go to the home of a neighbor or friend:

Name _____

Address _____

Walk to the home _____ Bus Number _____

_____ My child is to go to the home of a classmate:

Name _____

Address _____

Bus Number * _____

Due to the fact that telephone lines may be inoperable or busy, our staff would not have time to call home for instruction. Therefore, it is imperative that your child specifically be instructed by you as to where he/she is to go.

If bus number is different from the regular bus.