

Monroe Elementary School  
2020-2021  
Before School Program



## **REGISTRATION**

**Application MUST be turned into the Front Office THE DAY BEFORE the student is to begin the program!**

Greetings MES Parents:

If you are interested in Before School Care for the 2020-2021 school year, please complete the attached registration packet. For more information contact:

Dr. Dorothy Neal at [dneal@walton.k12.ga.us](mailto:dneal@walton.k12.ga.us) or 770-207-3205

### **MES Before School Rules and Consequences**

#### **Rules:**

1. Stay with your group at all times.
2. Follow directions the first time they are given.
3. Be respectful of adults and your peers.
4. Keep your hands, feet, and objects to yourself.

#### **Consequences:**

1. Verbal warning.
2. Time out - documented on MES Behavior Log.
3. Time out with director - offense will be recorded on referral notice and parent's signature required.
4. Phone call home.
5. If a student has received 3 referral notices a meeting will be set up with parent/guardian and the director to determine before school eligibility. Students may be dismissed from the program at the director's and/or administrator's discretion.

#### **Note:**

All school policies and procedures will be followed during Before School.

Student Behavior will be documented in Agenda book as coded by the school's Discipline Plan.

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2020-2021  
Before School Program  
General Information

**Program Hours: 6:30am - 8:00am**

No one is allowed in the building before 6:30am.

No children should be waiting alone for staff to arrive.

- Breakfast will be served at 8:00am through the MES Cafeteria.
- Students attending the Before School Program **MUST** be signed in daily in the Front Office.
- The Before School Program prices do **NOT** reflect the price of a breakfast meal purchased in the MES Cafeteria. If your child needs to eat breakfast at school, payment for breakfast is handled through the MES Cafeteria.
- Payment is due at the beginning of each week or daily.

Price

- Daily Rate- \$5.00 Per Child
- Weekly rate \$20. 00 Per Child– Weekly rates will not carry over from week to week.

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Parental Acknowledgment of Rules and Regulations for the MES Before School Program

**Must be attached to application BEFORE student can attend!**

MES Before School Program Rules:

I have read and reviewed the rules and consequences with my student, and I am aware of all they entail.

Parent/Guardian Signature: \_\_\_\_\_

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

Date: \_\_\_\_\_

MES Before School Program Payment Policy:

I understand the payment policy for the 2020 –2021 school year. I am aware that if I am late on payment for **two consecutive weeks**, my child will be dismissed from the program until the payment balance is up to date.

Parent/Guardian Signature: \_\_\_\_\_

Date: \_\_\_\_\_

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2020-2021

(Please return to school)

Medical Restrictions

Program Start Date: \_\_\_\_\_

Homeroom: \_\_\_\_\_

Child's Name \_\_\_\_\_ Grade \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_

Address \_\_\_\_\_ City, State, Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Guardian/Mother's Name \_\_\_\_\_ Home Phone \_\_\_\_\_

Mother's Employer \_\_\_\_\_ Work Phone \_\_\_\_\_

Guardian/Father's Name \_\_\_\_\_ Home Phone \_\_\_\_\_

Father's Employer \_\_\_\_\_ Work Phone \_\_\_\_\_

**In Case of Emergency Contact:**

Name \_\_\_\_\_ Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Phone \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Phone \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Phone \_\_\_\_\_

Additional names may be listed on the back

Hospital or Physician \_\_\_\_\_

If your child has any special needs due to allergies, diet, medical, etc. Please list below. (Use back if more space is needed.)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Students must adhere to the Walton County Public Schools Code of Conduct while attending the Monroe Elementary School Before School Program. I, the parent/guardian of the above named student, will assume liability for accidents and injuries incurred during the Before School Program. In the event of emergency, I authorize the person(s) in charge to seek immediate medical attention for my child. Students who do not follow rules and procedures as directed by program staff will be referred to the Program Director who will in turn report the incident using a Disciplinary Referral Form. Students who acquire three Disciplinary Referral Forms in a school year will be referred to the administration for possible dismissal from the program.

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

**Primary Email Contact:** \_\_\_\_\_

**\*Please make sure to sign the "Parental Acknowledgment of Rules and Regulations for the MES Before School Program Form". The application and the acknowledgement form are required to be filled out before your child can begin the program.**