2019-2020

Warriors Excel After School (WEAS) Handbook



Wilson Elementary

After School Care Program

101 East 28th \* Hays, KS \* 67601

Office Phone (785) 623-2550

Wilsonweas@usd489.com

Dear Parents,

Welcome to the Warriors Excel After School (WEAS) Care Program! We are pleased that you have chosen us to be your child care provider. WEAS is a self-supporting, nonprofit program designed to provide quality care and supervision for Wilson students of all ages. This program will offer a variety of activities such as recreation and games, crafts, special interest groups, music, homework/reading time, computers, movies, and free time for the children to pursue their own interests. Our objectives are as follows:

* To inspire autonomy, creativity, cooperation, self-control, choice, and responsibility
* To provide activities that meet the individual needs of children
* To encourage participation of children of different racial, ethnic, cultural, and economic backgrounds
* To include parents in decision-making
* To share and build upon existing community resources
* To respect other agencies and groups who share the concern for children and their families

**Hours of Operation**

WEAS will operate Monday through Friday from 2:59 p.m. to 5:30 p.m. according to the calendar of USD 489. The program will not be offered on days that USD 489 is not in session, or on days that school is dismissed early or cancelled due to weather. On early release days, WEAS will operate from 1:00-5:30 pm for an additional fee.

**Daily Schedule**

Each day will be structured, yet relaxed in a way that the day to day schedule will vary. Staff members will plan the daily activities according to factors such as weather or number of children present. Generally, each day will start with check-in and a snack. Once snack is finished, the children will be directed to the activities planned by the WEAS director.

**After School Academics**

Within WEAS, Wilson Elementary also offers the **Wilson** **After-School Academics for students in Grades 2-5**. The program is designed to meet the needs of those students who need additional help with their studies and with their homework. The program runs from **3:00 until 4:00 on Monday through Thursday when there is a full day of school.** Academics will begin on Tuesday, September 3rd.

We believe that this program is a strong support to Wilson’s academic program. There will be two tutors in the classroom at all times. The guidelines for the program are as follows:

1) This program is an academic program. **Students will be expected to complete homework or additional practice/intervention for core subjects.** If students complete work early, they will join the regular WEAS activity for that day.

2) Academics **ends at 4:00 each day.** Students need to be supervised at all times while they are at our school, so **students who are not picked up at 4:00 will be moved into the WEAS activity.**

3) Students will meet in the gym at the Academics to check in for WEAS and receive the daily snack, then move to the Media Center. Students will need to bring all necessary books and materials with them, as they will not be allowed to be out in the hallways and other classrooms once the after-school period has begun.

4) No student will be allowed to attend Academics without parental consent.

5) On-task behavior is a must during Academics in order for all students to experience success. Students who disrupt others’ learning will be written up according to regular WEAS guidelines.

**Personal Belongings**

WEAS is not responsible for lost or stolen items. Space will be provided for each child’s coat and school bag. All personal belongings should be labeled with the child’s name. **Children should not bring valuables to the program!** Usage of cell phones, iPods, personal iPads, etc. will not be allowed at WEAS, and children will be asked to put these items away if they are seen.

**Attendance**

If your child attends WEAS on a regular basis, and he/she will be absent, please notify the main office or the director as soon as you are aware the absence will occur. You can email WEAS at: WilsonWEAS@usd489.com

If your child attends WEAS occasionally, please notify the main office or the director as soon as you are aware, he/she will be attending.

**It is the responsibility of you and your child to know whether or not they will be attending WEAS each day!** If a situation arises where the child is uncertain, they will be asked to join in order to assure that you and the staff know their whereabouts.

**Child Pick-Up Procedure and Policy**

No child will be released to any individual other than a parent, guardian, or person designated by the parent/guardian. If an unauthorized person is to pick up your child, please notify the main office or the director. Children will not be allowed to sign themselves out. **The child must be signed out in order to be released!**

Cleanup is a part of our program. Consistency, cooperation, and support are essential for an efficient cleanup time. When picking up your child, please urge them to help properly put things away before leaving.

Parents will be charged an extra $5.00 for every 15 minute increment the child remains in the care of WEAS past 5:45 p.m. One dollar will be added for every minute the child remains after 5:45 p.m. These fees will be added to the monthly statement. In the case that this happens, a staff member will remain on site with the child until they are picked up. If a problem arises where the person picking up the child knows they will be late, arrangements need to be made for someone else to pick up the child on time, and the director should be notified.

**Open Door Policy**

Parents are always welcome visitors! We ask for you to let us know if you can or would like to participate in any way. Any parent or guardian is permitted unlimited access during the hours of operation for the purpose of contacting their children or evaluation of the program. Please notify the director when entering for these purposes.

**Personnel**

All staff have previous experience working with children. Each member is thoroughly screened and evaluated to ensure the safety of your children. A staff-child ratio of 1:12 is maintained to assure individual attention and proper supervision. **We encourage you to take the time to visit with and get to know the WEAS staff!** Please feel free to ask questions and state concerns or suggestions, as it is vital to keep the lines of communication open between parents and caregivers.

**Complaints-Problems-Ideas**

Any parent needing assistance concerning problems, complaints, or ideas related to the Warriors Excel After School program may contact the director via phone, email, or in person. If you have discussed your problem, complaint, or idea with the director and you are unsatisfied with the outcome, you may then contact the principal.

**Health and Emergencies**

The health and safety of the children are a primary concern. If a child has any one of the following conditions, the parent will be notified to pick up the child immediately: contagious disease, fever of 100 degrees Fahrenheit or greater, vomiting, diarrhea, or any accident requiring medical attention. Parents of all children enrolled in WEAS are required to submit a medical release form. This form will grant permission to any staff member to seek medical attention for the child in case of an emergency. In the case of an emergency, one or more of the following will occur:

* A staff member will carry out immediate first aid
* The director will notify the parents
* In the case that a parent or other authorized person cannot be reached, the director will call the designated physician and/or the local emergency unit for treatment and/or will accompany the child to the hospital to remain with the child until the parent or guardian arrives
* An incident report will be completed on the day of the accident to remain on file at the school for one year

**Discipline Plan**

Our program’s discipline philosophy is based on respect, responsibility, safety, and perseverance. Each child is expected to follow the rules set in place by the school, program, or staff. Failure to obey these rules will result in one of the following:

* Discussion of the problem to determine the cause and help redirect the behavior
* Assignment of a special task that will help build self-esteem
* Separation from the group, in the form of a time-out or walking laps, to allow time to think about the situation
* Meeting with the guidance counselor or principal

In the case that a child’s behavior consistently disrupts the flow of the program, the child will be instructed to fill out a Think Sheet. The Think Sheets are designed to encourage the child to consider what happened, why it happened, and what could’ve been done to prevent it. Each time a Think Sheet is filled out, the parents will be notified. Once a child has filled out **three** Think Sheets, they will not be allowed to return to WEAS for a full week. If the child must fill out another Think Sheet any time after their return, the result will be a complete suspension of WEAS for the remainder of the school year.

Remember, we are here to provide a pleasant and enjoyable experience for everyone. Guidelines must be followed in order to fulfill this!

**Tax Information**

The federal identification number for the WEAS program is **48-0726243**. This number is needed should you decide the claim the cost of your child care for tax deduction. Tax forms will be sent out each year in January, as soon as payment is received for the bill of the month of December. **If you have any outstanding payments, you will not receive a tax form until *all* bills are paid!**

**Payment Policy**

The supplies, salaries, and administrative expenses of WEAS are supported entirely by the child care fees paid by the parents who utilize our program. USD 489 provides the space, utilities, and custodial services as a kind donation to the program.

Bills will be sent out the first of each month. **Payments are due no later than the 15th of every month!!** A child will not be accepted for care when a payment is two weeks overdue.

Parents’ social security numbers will be required on the application form. All delinquent accounts will be collected through the Kansas Set-off Program.

**Fees**

\*A $10.00 nonrefundable enrollment fee will be charged per child. This will only be billed when the child attends.

Regular Day Care & Academics (2:59 to 5:30)

$4.00 per day – per child

Early Release Days (1:00-5:30)

$12.00 per day – per child

\*If children are picked up before 3:15, there is no charge for that day.

**All fees may be subject to change.**

Warriors Excel After School

***Wilson Elementary School***

***101 E 28th ٭ Hays, KS 67601***

***Phone (785) 623-2550***

Enrollment Form ٭ 2019-2020

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**Child’s Name**  **HomeRoom** **DOB**

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**Child(ren) will attend WEAS (please check days)**

\_\_\_\_\_Monday \_\_\_\_\_Tuesday \_\_\_\_\_Wednesday \_\_\_\_\_Thursday\_\_\_\_\_Friday \_\_\_\_\_Occasionally

**Child(ren) will attend Academics (please check days)**

\_\_\_\_\_Monday \_\_\_\_\_Tuesday \_\_\_\_\_Wednesday \_\_\_\_\_Thursday

**PARENT/GUARDIAN INFORMATION**

Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship to child\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Employer\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Work Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Parent’s Social Security Number\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent’s Driver’s License Number\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PIN Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(Your 4 digit code. It is your personal code to check out on I-Pad for attendance)

**Please list names of other persons picking up your child(ren):**

Name Relationship to child Phone

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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***Enrollment Form 2019-2020***

Does your child have any eating problems or food dislikes (including allergies)?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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How does your child get along with other children?

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What discipline techniques work best for your child?

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Please include any other information which you believe will be helpful to staff in

understanding and caring for your child.

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***RECORDS RELEASE AUTHORIZATION 2019-2020***

I hereby authorize and request Wilson School to release to the Warriors Excel After School Program

a copy of the Emergency and Medical Data for my child \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ presently in their school record file.

\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date Signature of Parent or Guardian

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***Picture Release 2019-2020***

I DO DO NOT (circle one) give permission to have my child appear in any media coverage approved by Warriors Excel After School.

\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date Signature of Parent or Guardian

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***Travel Authorization 2019-2020***

I DO DO NOT (circle one) give permission for my child \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_to leave the Warriors Excel After School Program for trips in a car or school bus to special places and walks around the neighborhood, etc. I understand that I will be notified before each activity.

\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date Signature of Parent or Guardian

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***Payment Agreement 2019-2020***

I agree that I will pay the monthly payment by the 15th of every month. If I cannot pay by that time I will make arrangements with the WEAS Financial Manager by the 15th. If after two weeks my balance is still delinquent, and no arrangements have been made, then my child will be unable to attend WEAS until the balance is paid. A late fee may also be assessed. All accounts not having payment arrangements made will be collected through the Kansas Set-Off Program.

\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date Signature of Parent or Guardian

**AUTHORIZATION FOR EMERGENCY MEDICAL CARE FOR CHILD CARE**

In order to meet all legal requirements, I hereby authorize any WEAS staff member and/or Wilson Staff Member who is(are) representative(s) of Warriors Excel After School to give consent for any

and all necessary emergency medical care for my child\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_while said child is in

said individual’s care between the dates of August \_\_\_, 2019 and May\_\_\_, 2020

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Parent or Guardian

Physician\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Hospital Preference\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Emergency Phone Numbers (H)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(W)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(C)\_\_\_\_\_\_\_\_\_\_\_\_

Do you have Health Insurance? \_\_\_\_\_Policy Name and Number\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Do you receive medical assistance? \_\_\_\_\_\_Program and Care Number\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Is child eligible for military medical care? \_\_\_\_\_\_\_\_I.D.Number\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Medical Information on Child:

Drug Allergies\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Last Tetanus Toxoid\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Has your physician approved the use of any non-prescription medications for your child such as acetaminophen, cough syrup, ointments, which can be given by the day care provider? Yes/No\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Does your child have any of the following problems?

Allergies\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Frequent Sore Throat/Cold\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Skin Problems\_\_\_\_\_\_\_\_\_\_\_\_\_ Earaches\_\_\_\_\_\_\_\_\_ Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If yes please explain\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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List any childhood diseases or other illnesses your child has had:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Have there been any major changes at home that might affect your child in care\_\_\_\_\_\_\_\_  
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