

STARS

Holy Redeemer
After-School Program
Parent Handbook
2018-2019



STARS: Students Together Accomplishing Reward and Satisfaction
2018-2019 HRS STARS after School Program

Holy Redeemer School staff would like to welcome you and your children to the STARS (Students Together Accomplishing Reward and Satisfaction) program. This handbook will provide all the information needed to support the program's success.

Goals

After school program that will provide a safe environment, social interaction, physical exercise, and time to work on academics. It is also designed to help children learn to give back to the community and do some service projects that will teach them about helping others. The program will also touch on different ideas and situations of how to handle yourself if you are ever home alone. Specific goals are as follows:

1. To provide a safe, caring, trusting and relaxed environment where your child can unwind after a full day of school.
2. To gain respect for themselves, others and property.
3. To develop new friendships.
4. To teach children how to build self-confidence.
5. To provide trained, caring and respectful staff who understand the needs of a stable setting to meet the emotional needs of children.

Who is Eligible?

Holy Redeemer School students enrolled from the first day Kindergarten through the last day of their 6th grade year. Seventh and eighth graders are encouraged to attend as helpers. No child will be denied or discriminated on the basis of race, color, creed, religion, or national origin in its enrollment policies.

When is the Program Offered?

The program will begin September 10, 2018 and run until May 29, 2019. The program will run every day after school, on school days only. The children are to report directly to the cafeteria after school (by 3:10 p.m.) and the program will close promptly at 5:30 p.m. There will be a \$5 fee for every 5 minutes beginning at 5:31 p.m.

There is no STARS program on days that school is not in session due to vacation days, teacher in-service or workshop, or weather related conditions. STARS will be open on 2:20 dismissal days. There is no program if school is dismissed early for any other reason. In case of early dismissals (example, weather or environmental emergencies), you will be responsible for your child.

Program's Schedule

The program will start with completing homework, followed by snack, an activity and free time. Activities may include: personal hygiene, crafts for upcoming seasons, community service projects, self-help and safety, cooking/cleaning, games, movies, holiday celebrations, etc. During this time, children may continue to work on homework if they have a large project due. Each month a general calendar will also be provided to those enrolled in the program.

Policies and Procedures

Enrollment in the program assumes an understanding that you will abide by the guidelines listed as follows:

Parent Expectations of the Program

1. Their children are cared for in a safe, supportive environment
2. They may visit the program supervisor about concerns related to their child or the program in a confidential manner.
3. They will be informed of any unacceptable behavior on the part of their child or involving their child and able to visit with the supervisor in order to bring about improvement in the situation.
4. They will be informed promptly if their child is scheduled to attend STARS and do not arrive in an appropriate time-frame.

Program Expectations of the Parents

1. Pay fees on time as explained in the fees and payment policies
2. Keep contact information current as explained in the enrollment forms.
3. All school information must be up-to-date in order for children to attend (for example: shot records, medical information, etc.).
4. Pick up children on time as explained in the Attendance Procedures Section.
5. Contact the director or the school office by 2:00 p.m. if their child will not be attending STARS as scheduled that day.
6. Be an active participant by paying close attention to any communications that are provided by STARS staff regarding scheduling, behavior issues, etc. Must cooperate in assisting with children if behavior issues arise to help improve the situation.
7. Inform the STARS staff regarding any special needs of their child.

Participant (child) Expectation of the Program

1. To have a safe, supportive, and Christ-centered environment.
2. To receive trust and respect from staff.
3. To receive discipline that is appropriate and non-punitive.
4. To receive nurturing care from staff members who are actively involved with them.

Program Expectations of the Participants

1. Have fun, be friendly, be safe, be honest and be respectful to staff and other participants.
2. To use the program/school equipment, materials, and facilities in a respectful manner.
3. To be responsible for their actions.
4. Must cooperate in the program, with staff and others at all times.
5. Take care of materials properly and put them in their appropriate place when done.
6. Arrive at the program promptly after school and sign in upon arrival.
7. Remember to act as Christians in a Christ-centered atmosphere.

Enrollment/Registration

Enrollment is complete when all the forms are returned and registration fee is paid. This contract is only for the 2018-2019 school year. The forms are as follows:

2018-2019 Contract

Emergency Form (with the 3 local references other than parents)

\$10 registration fee to be applied to the first STARS bill

Registration for upcoming month

Fees:

Each child is charged \$6 per day. Payment must be received by Friday prior to the following week. It is most beneficial to pay when you register for the week or month. If you prepay and school is cancelled due to environmental/weather related issues, you will be credited for that day. **The program also ends promptly at 5:30 p.m.** Every 5 minutes you are late beginning at 5:31 p.m. will be \$5. If an emergency occurs, please have your emergency contact pick up your child.

You will receive a monthly statement with your account balance. All money owed for the month must be received by the 5th of the following month. A \$10 late fee will be assessed on the 6th. If your account is not current on the 6th of the following month, your child will not be able to attend STARS until the balance is paid. **Tax statements can be found in Fast Direct under the finance icon.**

All staffing will be completed by Thursday of the week prior to the following week. If your child is registered by 2:00 p.m. on the Thursday before the following week, he/she is guaranteed a spot in the program. Any sign up after Thursday, there may not be availability in the program if numbers are too large. You may also sign up for an entire month so you do not have to contact the director each week.

Payment:

STARS is a non-profit, self-supporting program and needs prompt payment to meet additional expenses.

Checks may be made payable to "Holy Redeemer School STARS". All checks must be made in a separate envelope labeled "STARS". Do not include in folders without an envelope or with other school payments. You may give your payments directly to the STARS supervisor when you pick up your child. However, if that does not work you may also include the envelopes in the Thursday folder with registration forms for the following month or mail to:

HRS STARS
501 S Whitney Street
Marshall, MN 56258

ACH Payments will also be accepted. Please complete the form at the end of this packet to have payments automatically withdrawn by the Parish Office, or you may complete ACH or credit card payments through Fast Direct.

Illnesses/Medication Procedures

ILLNESS

HRS STARS has the following practice regarding ill children:

1. Children who are ill must not attend STARS. This includes the following symptoms: fever, diarrhea, an undiagnosed rash, inflamed eyes, severe cold or sore throat.
2. A child is sent home if displaying signs of illness and/or has a temperature of 100 degrees or higher.
3. If a child has been vomiting or had diarrhea within the last 24 hours, he/she must not attend STARS.
4. If a child has not been in school that day or sent home due to illness, they will not be allowed to STARS that day.

When a child becomes ill during the program, he/she will rest away from the other children and the parents will be contacted immediately for pick up. If parents cannot be reached, the emergency contacts will be notified.

If a child is diagnosed with a communicable disease such as chicken pox, head lice, pink eye, strep throat, whooping cough, etc. you must contact STARS immediately. When communicable diseases are reported to staff, a sign will be posted to inform other families enrolled in the program.

ACCIDENTS

Any minor injury such as cuts or bumps will be communicated to parents upon pick up.

If a moderate injury occurs where a child needs medical attention (such as sprains or deep cuts), the staff will contact parents or emergency contacts immediately so you may arrange medical attention.

In an emergency situation, the staff will immediately contact 911 then the parent or emergency contact. Once the 911 team assesses the situation, they determine what action will be taken. STARS and HRS are not responsible for medical charges.

MEDICATION

STARS may not dispense medications for children on a daily basis, however there may come a time when we need to dispense medication. Please become familiar with the following guidelines:

1. Prescription medications require a "Medication Request and Authorization" form that must be completed and signed by the parent/guardian and a physician. No medication will be dispensed without a physician's signature.
2. All prescriptions must come to school in the original prescription container labeled for the student by the pharmacy or physician. Mixed dosage in a single container or dosage that needs to be altered will not be accepted. Medication in envelopes, baggies, etc. will not be administered.
3. Non-prescription/over-the-counter medications also require a form to be filled out, which can be obtained from the office if the parents want them administered at STARS.
4. Medications are not generally carried by the student unless there are special circumstances such as inhalers or allergic reaction kits. There must be a "Medication Request and Authorization" form on file with the school and a copy provided by the parent or guardian to the STARS director. The form must have specific instructions for handling of the medications.

5. The school and STARS must be informed immediately of any changes to a student's medication or if the medication is no longer needed. Any dosage changes require notification from the physician and a new form to be put on file.

"Medication Request and Authorization" forms are available from the HRS school office or your local doctor's office. You should always have a form on hand in the event your child needs medication at any time.

Child Guidance Procedures

Promoting Safety and Self-Esteem for all Students

In order to maintain a safe and nurturing environment for all children, STARS will not tolerate any form of behavior that hurts or intends to hurt others physically, verbally or emotionally. All children deserve a positive environment that helps them feel secure, fosters self-esteem, and provides opportunities to develop new skills. Respect must be shown to all members of the program including staff and students.

Process for Promoting Success in all Children

STARS views discipline as an opportunity to teach children social skills needed to function in society and daily life. STARS staff encourages appropriate behavior through clear guidelines and choices, consistent consequences and positive staff interaction. When working with the STARS program, staff will remain proactive, guiding children in making appropriate choices and redirecting them as needed.

Discipline Notice and Plans for STARS Success

The STARS staff will handle discipline. The expectations for behavior will be explained to the children on a regular basis. The first time an occurrence happens there will be a warning giving to the student and a specified time frame to make a necessary change. If that doesn't work, the parents will be contacted on the second occurrence for a meeting with the STARS director, student and parents. A third offense may result in a one month suspension. After one month, if the occurrences continue, the student will be suspended from STARS for the school year. These procedures need to be followed to provide a safe and positive atmosphere for the remainder of the children in the program.

General Information

Contact Information
Holy Redeemer STARS
501 S Whitney Street
Marshall, MN 56258
Stacy Felt, Director
507-532-6642 (school)
E-mail address: stacyteach2020@gmail.com

Attendance Procedures

Sign In/Out

When your child arrives, he/she needs to check in with the STARS supervisor in the HRS cafeteria. This ensures that all children who are scheduled to be at STARS have arrived safely. Check in is no later than 3:10 p.m. In cases when participants are involved in other after school activities first, special arrangements may be made with the STARS director.

When parents pick up their children, they must sign their children out with the STARS staff. Only parents and those individuals authorized on the Emergency Contact form or the Contract may pick up children from STARS. When registering your child for STARS, please name all persons authorized to pick up your child from the program.

Parents must inform the STARS director or the school office in advance, in writing, by e-mail or phone call, if someone who is not authorized to pick up a child from STARS will be picking their child up that day. Written statements will not be accepted from the child unless the parent has called the director or the office and discussed it ahead of time. Those authorized to sign children out of STARS must be over 18 years old.

Emergency Form

In addition to parents, please include at least three people with local residence/phone numbers on the emergency form who can pick up your child in case of an emergency. This emergency form is for individuals who can pick up your child promptly in case of emergencies. Out of town relatives should not be included on this form. On the back of your Emergency Form, you are encouraged to list all persons who can remove your child, thus out of town relatives/friends can be included here. It is very important to keep the STARS staff informed of any changes on your Emergency Form.

Guests/Friends

Any student not enrolled in the STARS program will not be able to attend any session of the program.

Insurance

The program carries school liability insurance. Families are required to provide their own medical insurance coverage.

Registration Calendar

Each STARS family enrolled will be given a calendar for the upcoming month. Families are encouraged to fill out this form with payment for that month the Thursday before the month begins to ensure enrollment and space.

Calendar of Events

A calendar of events will also be given to all enrolled families the week prior to the new month.

Snacks

A snack and beverage will be provided each day. Children may bring something to share only if they bring enough for all participants. Special treats such as a root beer float may be served on holidays.

Once again, no child will be denied or discriminated on the basis of race, color, creed, religion, or national origin in its enrollment policies.

Student Disability Nondiscrimination:

In accordance with Section 504 of the Rehabilitation Act of 1973, HRS does not discriminate on the basis of disability.

Student Sex Nondiscrimination

Students are protected from discrimination on the basis on sex pursuant to Title IX of the Education Amendments of 1972 and the Minnesota Human Rights Act. HRS provides equal educational opportunity for all students and does not unlawfully discriminate on the basis of sex. No student will be excluded from participation in, denied the benefits of, or others subjected to discrimination under any educational program or activity operated by the school on the basis of sex.

Any questions regarding this handbook or program may be directed to the school office at 507-532-6642

Holy Redeemer STARS After-School Program Contract for 2018-2019 School Year

Please list all children who will be participating in the after-school program either regularly or occasionally.

Student: _____ Current Grade: _____

Hours of program: 3:00 p.m. – 5:30 p.m. on school days only. Rate is \$6 per student per day.



1. I understand that I am responsible for childcare as identified in the Parent Handbook. STARS reserves the right to disqualify participants if full payment is not made by the due date.
2. I understand that STARS will operate only on days that Holy Redeemer School is in session. There will be no STARS program on snow days, early dismissals, vacation days, or teacher in-service/workshop days.
3. I understand that payments are based on the above contract. The cost is a per day fee regardless of if a child is in the program for ten minutes or 2 ½ hours.
4. I will make payments by check, payable to "Holy Redeemer STARS," or through Fast Direct. A \$30 charge will be assessed and billed for any insufficient funds.
5. I understand that the STARS program will close at 5:30 p.m. and that a late fee of \$5 for each five minutes beginning at 5:31 p.m. will be assessed and billed per child.
6. I understand that a \$10 registration fee will be made at the time of registration. This fee will be applied toward your family's first STARS bill.
7. I have received a copy of the STARS Parent Policy Handbook. I have read and understand the information contained in the handbook.

Parent's Signature: _____ Date: _____

2018-2019 Holy Redeemer STARS School Age Care Emergency Form

Student: _____ Current Grade: _____ Birthdate: _____

Mother's Name: _____ Employer: _____

Home Address: _____

Day Phone #: _____ Home Phone #: _____

Cell Phone #: _____ Additional #: _____

Father's Name: _____ Employer: _____

Home Address: _____

Day Phone #: _____ Home Phone #: _____

Cell Phone #: _____ Additional #: _____

*Please list three local individuals who are allowed to pick up your child and may be contacted in case of emergency (not including parents). **On the BOTTOM of this form, please list ALL other authorized individuals able to pick up your child from STARS.***

1. _____ Phone #: _____

2. _____ Phone #: _____

3. _____ Phone #: _____

Does your child need special medical attention due to conditions such as allergies or asthma? _____ If yes, please explain and list any medications needed (You must include a copy of the Medication Request and Authorization Form): _____

If something medically related to the above question were to happen to your child during the program hours, please list specifically what needs to be done with your child: _____

Please list any further information or suggestions regarding the character of your child that would assist the staff: _____

Family Denist: _____ Phone: _____

Family Doctor: _____ Phone: _____

Insurance Company: _____ Policy Holder ID# _____

Please list ALL other authorized individuals that are allowed to pick up your child from the STARS program. Include any additional names and numbers on a separate sheet of paper.

⇒ _____ Phone #: _____
⇒ _____ Phone #: _____

I hereby give my permission to the staff of STARS to secure medical assistance, including the services of 911 (police, ambulance, fire department, hospital, etc.) in the event of an emergency. I agree to pay all costs and fees contingent on any medical/emergency care and/or treatment for my child (ren) as secured or authorized under this consent.

I give my consent to the exchange of information between Holy Redeemer School personnel and STARS personnel whenever it would be beneficial to my child(ren).

Parent Signature: _____ Date: _____

Holy Redeemer School
Direct Payment of STARS Form

Family Name _____

Please deduct STARS payments on the last business day of the month beginning September, 2018 and occurring each month including April, 2019.

The amount deducted each month is set at your discretion. **Adjustments can be made with notice at least 5 business days in advance.** Overpayments will be adjusted at the end of the school year. At that time you will have the option of carrying over any balance or having the amount refunded to you. Notices will be sent monthly. STARS will not be available for the following school year until any past due balances are paid.

Amount to deduct each month: \$ _____

Authorization for Automatic Payment

I authorize the Holy Redeemer School and Bremer Bank/Marshall, MN, to initiate entries into my checking account. This authority will remain in effect until I notify you in writing to cancel it in such time as to afford Holy Redeemer School and Bremer Bank a reasonable opportunity to act on it. I can stop payment of any entry by notifying my bank three (3) days before my account is charged. I can have the amount of erroneous charge immediately credited to my account up to fifteen (15) days following issuance of my bank statement or sixty (60) days after posting, whichever occurs first.

Your Name _____

Address _____

City/State _____

Signature _____

Date _____

Same account used for tuition payments. You do not need to fill out the remainder of the information.

Fill out the section below if this is a new application or if there have been any changes:

Bank Name _____

Bank Address _____

Bank routing or Transit number { _____ }

Checking Account # _____

Please attach a copy of a voided check

RETAIN THIS PORTION FOR YOUR RECORDS: On the last business day of each month (September 2017 to April 2018) I authorize Holy Redeemer School, located at 501 South Whitney Street, Marshall, MN, to initiate electronic entries of \$ _____ to my account and agree to the terms as detailed on the authorization. This authority will remain in effect as agreed or until I cancel it in writing to Holy Redeemer School.