

Paso Robles Joint Unified School District ASES Application 2021-2022

Child's Name: _____

(Write EXACTLY as on School Registration) Nickname -Name child is called by

Address: _____

Birth Date: ____/____/____ Age: _____ School: _____ Grade in 2021-22: _____

Are there other siblings who attend the school or are enrolled in the ASES Program? If yes, include name and grade.

Has your student attended ASES before? () Yes () No My student is: () New to ASES () Returning to ASES

Parent/Guardian Name: _____ Cell Phone: _____ Home Phone: _____

Address: _____

Employer: _____ Work Phone: _____

Email Address: _____

Parent/Guardian Name: _____ Cell Phone: _____ Home Phone: _____

Address: _____

Employer: _____ Work Phone: _____

Email Address: _____

We assume both the father and mother (listed above) are legally authorized to pick up this child. If this is not the case, provide copy of legal document that identifies person NOT allowed to pick up child. This must be kept up-to-date. If renewed, we need a copy.

Child lives with: () Both Parents () Mother () Father () Grandparent(s)
() Step Mother/Father () Foster Parents () Other _____

EMERGENCY INFORMATION: In an emergency, our policy is to call 911 AND a parent or guardian. Please list three **different people** with three **different phone numbers** who are authorized to be called in case of emergency or to pick up your child if parent cannot be reached (Person MUST be 18 years or older)

1. Name _____ Relationship _____ Phone _____

2. Name _____ Relationship _____ Phone _____

3. Name _____ Relationship _____ Phone _____

HEALTH HISTORY

Does your child have any health concerns? _____

Does your child take medication or use a breathing aid daily? () YES () NO

If YES, name of medication or breathing aid: _____

Has your child ever needed medical care as a result of a bee or insect sting or food allergy? () YES () NO

If YES, does your child have an Epi-Pen? () YES () NO

Is there anything regarding academics or behavior you would like us to know about your child?

Signature of Parent / Guardian _____

Date _____

For Office Use Only

Application Rcvd: _____

Teacher Name: _____

Blue/Green/Red/Yellow

Start Date: _____

State ID #: _____

Student ID _____

2021-2022 ASES Attendance Rules

This is a **free** program for families. The program costs California \$8.75/day (\$175/month) per student and therefore we are required to follow state mandated rules. If you are not able to follow these rules please give your child's spot to another family.

Student Name: _____ School: _____

Please write your initials next to each rule indicating your understanding and agreement to follow these rules. Parents are required to attend a meeting with the site leader in order to attend ASES.

Parent/Guardian Initials

	Hours of Operation: Monday 1:30-6:00, Tuesday, Wednesday, Thursday, Friday 2:30-6:00, minimum days 12:30-6:00 when school is in session. Students must attend 5 days a week including Fridays.
	If your child is absent for any reason you must call ASES to notify the staff Glen Speck 400-5696 Virginia Peterson 400-5853 Winifred Pifer 400-5273.
	Students may not be checked out Monday before 4:30 and Tuesday - Friday before 5:30 unless they have an early release form of why they are leaving early.
	In order for the ASES program to remain in operation we must maintain 85% attendance. In order to achieve this each child will be allowed 10 absences. Absences are not deemed excused or unexcused in the ASES program. Any absence is one absence towards the ten allowed absences.
	Students may leave for a doctor or dentist appointment after 4:00 <u>Tuesday – Friday or after 3:00 on Mondays</u> . Students picked up prior to 4:00 or it may be considered an absent.
	Parents MUST sign their child out every day with a signature and time or this will be considered an absence.
	Parents must pick up their child by 6:00pm. There is a \$1.00 per minute per child charge after 6:00pm. Three late pickups will result in dismissal from the program. 6:01 is considered late.
	If there are behavioral problems, your child will be placed on a contract. After 3 write ups your child will be dismissed from the program. Parents will be notified when their child goes on a behavior contract.
	Parents give ASES and their partners' permission to use their child's photo to promote the ASES program.

Yes, my child will attend the 2021-2022 ASES Program and I agree to follow the ASES rules

Parent/Guardian Signature

Language of Preference (Circle One)

Staff Signature: _____

English

Spanish