

**EXTENDED SUPERVISION**

Even if you do not anticipate using Extended Supervision, this form must be completed and returned by the first day of school. PLEASE PRINT

a.m. [ ]      p.m. [ ]      both a.m. and p.m. [ ]      occasional use [ ]

Child's name \_\_\_\_\_ Grade \_\_\_\_\_

Mother's name \_\_\_\_\_ Father's name \_\_\_\_\_

Resides primarily with: both parents \_\_\_\_\_, mother \_\_\_\_\_, father \_\_\_\_\_, other \_\_\_\_\_

In the event of an emergency, please provide the following phone numbers:

Home \_\_\_\_\_ Father's work \_\_\_\_\_ cell and /or pager \_\_\_\_\_

Home \_\_\_\_\_ Mother's work \_\_\_\_\_ cell and /or pager \_\_\_\_\_

Persons other than immediate family authorized to pick up my student are:

Name \_\_\_\_\_ relationship \_\_\_\_\_ Phone #'s \_\_\_\_\_, \_\_\_\_\_

Name \_\_\_\_\_ relationship \_\_\_\_\_ Phone #'s \_\_\_\_\_, \_\_\_\_\_

Name \_\_\_\_\_ relationship \_\_\_\_\_ Phone #'s \_\_\_\_\_, \_\_\_\_\_

Name \_\_\_\_\_ relationship \_\_\_\_\_ Phone #'s \_\_\_\_\_, \_\_\_\_\_

**Students will not be released to persons not on this list unless authorized person notifies the office by phone or a note.**

The Extended Supervision must enroll and charge each student who is not picked up by 3:15 p.m. or after he/she has participated in an after school activity such as art class, sports events, etc.

**FEES**

Morning Supervision (7:00 – 8:00 am) ..... \$2.75  
Afternoon Supervision (3:15 – 6:00 pm) ..... \$8.00

**LATE FEE**

Extended Supervision is provided until 6:00 p.m. There will be an additional charge of \$10.00 for the first 15 minutes or fraction thereof after 6:00 p.m. There will be a charge of \$15.00 for every 15 minutes or fraction thereof after 6:15 p.m. PAYMENT IS DUE WHEN THE CHILD IS PICKED UP.

I HAVE READ THE GUIDELINES AND STIPULATIONS CONCERNING THE EXTENDED SUPERVISION PROGRAM AND I AGREE TO ABIDE BY THE RULES, WHICH HAVE BEEN DESIGNED FOR MY CHILD'S WELFARE.

Parent/guardian signature \_\_\_\_\_ Date \_\_\_\_\_