



Charleston, IL August, 2016 (ASP 02)

Dear Applicants,

The Newman Catholic Center in conjunction with the Student Volunteer Center is pleased to offer an **After School Program for a LIMITED NUMBER OF STUDENTS (7-14 years old)**

- This program provides **one-on-one academic help** and mentoring with your child.
- A college student will work for an hour with your child on homework or **extra practice**.
- A light **healthy snack** will be provided.
- Be sure that we will care and share our love with your student providing one on one attention.

The program runs from MONDAY THROUGH THURSDAY FROM 4:00 TO 5:00 PM

- Your child will be tutored from **4:00-5:00** at the Newman Center (including play and circle time)
- Please drop them off **on time** and pick them up **on time**.

Due to a high number of requests for TRANSPORTATION, the first come first serve policy for our bus was put into effect. If there is room for your child:

- Please have your child and or children **ready** for pick up.
- Your child will be picked up between **3:30-4:00pm** (destination written on the application)
- Your child will be dropped off from **5:00-5:30pm**

GENERAL POLICIES OF THE AFTER SCHOOL PROGRAM

1. The purpose of the After School Program is to HELP YOUR STUDENT ACADEMICALLY.

- This is not a babysitting service.
- The first 45 minutes will be educational activities. This is not negotiable.
- He/She is expected to bring his/her homework and necessary materials to the program each day.
- A party or other activity may shorten the time for educational activities. You will be notified of these days.

2. YOUR CHILD IS TO ATTEND EVERY DAY he/she is registered.

- **Excess absences will not be tolerated**, and your child will be dismissed from the program.
- If your child will not be attending a certain day due to illness, doctor appointment, etc., you are expected to call the Newman Catholic Center at **348-0188 by 3:00pm**.

3. Your student IS EXPECTED TO BE RESPECTFUL and on his/her best behavior.

- It is a privilege to attend this program. Misbehavior will not be tolerated.
- Your child will be dismissed from the program if misbehavior becomes excessive.
- These policies have been put into place to help the program run smoothly.

We will let you know if there is room for your child, and the exact day when tutoring will start. If you have questions **Please feel free to call 217 348 0188 EXT. 11.**

TUTORING WILL START ON TUESDAY, SEP. 6th 2016 Fall Semester Calendar in the back.

** Keep this sheet for your reference **

Sincerely,

After School Program Coordinators

Student Volunteer Center - Newman Catholic Center (217) 348 - 0188 Ex# 11

Newman Catholic Center
AFTER SCHOOL PROGRAM

FALL 2016

We expect your child these following days! If your child cannot make it please call 217 348 0188

**except days in black*

Mon	Sep 05	Labor Day
Tue	Sep 06	TUTORING
Wed	Sep 07	TUTORING
Thu	Sep 08	TUTORING
Mon	Sep 12	TUTORING
Tue	Sep 13	TUTORING
Wed	Sep 14	TUTORING
Thu	Sep 15	TUTORING
Mon	Sep 19	TUTORING
Tue	Sep 20	TUTORING
Wed	Sep 21	TUTORING
Thu	Sep 22	TUTORING
Mon	Sep 26	TUTORING
Tue	Sep 27	TUTORING
Wed	Sep 28	TUTORING
Thu	Sep 29	TUTORING
Mon	Oct 03	TUTORING
Tue	Oct 04	TUTORING
Wed	Oct 05	TUTORING
Thu	Oct 06	TUTORING
Mon	Oct 10	Columbus Day
Tue	Oct 11	TUTORING
Wed	Oct 12	TUTORING
Thu	Oct 13	TUTORING
Mon	Oct 17	TUTORING
Tue	Oct 18	TUTORING
Wed	Oct 19	TUTORING
Thu	Oct 20	TUTORING***
Mon	Oct 24	TUTORING
Tue	Oct 25	TUTORING
Wed	Oct 26	TUTORING
Thu	Oct 27	TUTORING
Mon	Oct 31	TUTORING
Tue	Nov 01	TUTORING
Wed	Nov 02	TUTORING
Thu	Nov 03	TUTORING
Mon	Nov 07	TUTORING
Tue	Nov 08	Election Day! VOTE!
Wed	Nov 09	TUTORING
Thu	Nov 10	TUTORING
Mon	Nov 14	TUTORING
Tue	Nov 15	TUTORING
Wed	Nov 16	TUTORING
Thu	Nov 17	TUTORING
Mon	Nov 21	Thanksgiving Break
Tue	Nov 22	Thanksgiving Break
Wed	Nov 23	Thanksgiving Break
Thu	Nov 24	Thanksgiving Break
Mon	Nov 28	TUTORING
Tue	Nov 29	TUTORING
Wed	Nov 30	TUTORING
Thu	Dec 01	TUTORING

REGISTRATION Year: Fall 2016-Spring 2017



VERY IMPORTANT *We need this form completed before we accept your student into the program.

GENERAL INFORMATION ASP 03

Today's Date: _____

Student's Name: _____

Your Name: _____ **Relation to Student** _____

Date of **Birth:** _____ Grade: _____ Sex: M F

Address: _____

Home _____ **Cell Phone:** _____ **Work Phone:** _____

Name of School: _____ **Teacher's Name:** _____

I would like my student **to attend** the After School Program: **(check mark please)**

All 4 days () or Monday () Tuesday () Wednesday () Thursday ()

4:00 pm to 5:00 pm

TRANSPORTATION * Transportation is limited-first come first served basis*

Does your student **need transportation**? Yes___ No___

If so, please list the locations you would like your student picked up and dropped off at:

Pick -up: _____

Drop-off: _____

EMERGENCY INFORMATION AND RELEASES:

In case of emergency we should call: (Other than above)

Name: _____

Relationship: _____ Phone: _____

By signing below, I _____ give permission for the Newman Catholic Center After School Program to use pictures of my student for publicity and grant purposes.

Applicant's Signature: X _____

When completed, please return this application to:

NEWMAN CATHOLIC CENTER – AFTER SCHOOL PROGRAM
500 ROOSEVELT CHARLESTON, IL 61920
TEL 217 348 0188 EMAIL newman@eiunewman.org

PLEASE ANSWER ABOUT THE STUDENT

STRONG Academic areas are: _____

Areas of **IMPROVEMENT:** _____

FAVORITE subject at school: _____

LEAST FAVORITE subject at school: _____

Free Time ACTIVITIES: _____

What would you like to see your student improve in while at the After School Program

***** To better help your child we require the MOST RECENT IEP *****

Dietary needs: _____

PLEASE READ: Policies of the Newman Catholic Center After School Program

1. **The purpose of the After School Program is to help your student academically. This is not a babysitting service.** Your student will be engaged in educational activities for the first 45 minutes of this program. This is not negotiable. He/She is expected to bring his/her homework and necessary materials to the program each day. There will be days in which this amount will be decreased due to a party or other activity. You will be notified of those days in advance.
2. **Your student is to attend everyday he/she is registered. There are numerous children waiting to get into the program. Excess absences will not be tolerated, and your student will be dismissed from the program. If your student will not be attending a certain day due to illness, doctor appointment, etc., you are expected to call the Newman Catholic Center at 348-0188 by 3:00 pm**
3. **Your student is expected to be respectful and on his/her best behavior.** It is a privilege to attend this program. Misbehavior will not be tolerated. Your student will be dismissed from the program if misbehavior becomes excess.
4. **As the ASP is sponsored by the Student Volunteer Center at the Newman Catholic Center.** We will offer some prayer/meditation to the kids and promote values that will impact positively their lives.

I agree to follow the policies of the Newman Catholic Center After School Program outlined above. I understand that excess absences and/or excess misbehavior will not be tolerated and my student will be dismissed from the program if they occur.

Applicant's signature: X _____

I authorize the After School Program to text or email me important alerts:

email address: _____