



August 26, 2021

**Welcome to Sheridan S.T.A.R.S.!** We are so excited to work with you and your student(s) this year! We are not quite back to normal yet but it's pretty close, we're looking forward to getting to know your student and having a successful year. The afterschool program will start on **Monday, September 20th**.

Below you will find an update on some of our policies and procedures.

- Students should bring their district issued chromebook with them to S.T.A.R.S. everyday.
- Snacks will be provided again this year by the Children Hunger Alliance, but students are still encouraged to bring a refillable water bottle.
- All paperwork/enrollment packets **must be fully completed and turned in** before attending the program.
- All parents must sign up for the **Remind App** in order to receive information and/or updates from Mrs. Channel about the program.
- Our pick up policy will remain the same as last year...no visitors will be allowed into the building.
  - Our program runs until 5:30 pm, and we ask that students are not picked up early unless absolutely necessary.
  - If you must pick up your student early, please call/text Mrs. Channel at 740-704-7625 to make arrangements.

We appreciate your understanding and cooperation. If you have any questions, please feel free to call or email.

Mrs. Channel  
[jchannel@nlsd.k12.oh.us](mailto:jchannel@nlsd.k12.oh.us)  
740-704-7625

2021 - 2022

# S.T.A.R.S.

## Afterschool Program Sheridan Middle/High School ENROLLMENT PACKET



***ALL REQUIRED DOCUMENTS MUST BE COMPLETED AND RETURNED  
TO S.T.A.R.S BEFORE STUDENTS CAN START THE PROGRAM***

- 2021-2022 Enrollment Form/Emergency Medical Info.  
*(front & back must be completed in full)*
  
- Parent Handbook Authorization Page
  
- Busing Consent Form *(if applicable)*

# S.T.A.R.S. AFTERSCHOOL PROGRAM 2021-2022

## STUDENTS AND TEACHERS ACTIVELY REACHING SUCCESS

### ENROLLMENT FORM AND EMERGENCY MEDICAL INFORMATION SHERIDAN MIDDLE AND HIGH SCHOOLS

PLEASE BE SURE TO COMPLETE BOTH SIDES OF THIS FORM COMPLETELY IN BLUE OR BLACK INK

#### STUDENT INFORMATION

NAME: \_\_\_\_\_ DOB: \_\_\_\_/\_\_\_\_/\_\_\_\_ GRADE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ GENDER: M \_\_\_\_\_ F \_\_\_\_\_

PHONE: \_\_\_\_\_

SHIRT SIZE: (PLEASE INDICATE ADULT OR YOUTH): \_\_\_\_\_

DOES THE STUDENT HAVE AN IEP OR A 504 PLAN? Y \_\_\_\_\_ N \_\_\_\_\_

#### PARENT/GUARDIAN INFORMATION

ARE THE PARENTS DIVORCED/SEPARATED? Y \_\_\_\_\_ N \_\_\_\_\_ IF YES, WITH WHOM DOES THE STUDENT LIVE? \_\_\_\_\_

IS EITHER PARENT DECEASED? Y \_\_\_\_\_ N \_\_\_\_\_ IF YES, WHICH PARENT IS DECEASED? \_\_\_\_\_

IF APPLICABLE, PLEASE LIST NAME(S) OF STEP-PARENTS: \_\_\_\_\_

##### MOTHER/GUARDIAN INFORMATION

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

HOME PHONE: \_\_\_\_\_

CELL PHONE: \_\_\_\_\_

PLACE OF EMPLOYMENT: \_\_\_\_\_

WORK PHONE: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

##### FATHER/GUARDIAN INFORMATION

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

HOME PHONE: \_\_\_\_\_

CELL PHONE: \_\_\_\_\_

PLACE OF EMPLOYMENT: \_\_\_\_\_

WORK PHONE: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

#### ATTENDANCE POLICY

BY ENROLLING, STUDENTS ARE SHOWING INTENT TO ATTEND REGULARLY (AT LEAST 30+ DAYS PER YEAR), BUT THERE MAY BE TIMES WHEN AN ABSENCE IS NECESSARY. INDIVIDUAL CLUBS MAY HAVE DIFFERING ATTENDANCE POLICIES, SO STUDENTS SHOULD CHECK WITH HIS/HER CLUB LEADER. TO ATTEND A FIELD TRIP, THE STUDENT MUST HAVE ATTENDED PROGRAM AT LEAST FIVE TIMES IN THE PREVIOUS SIX WEEKS.

MY STUDENT WILL ATTEND THE AFTERSCHOOL PROGRAM ON AN AS NEEDED BASIS. I DO NOT NEED TO BE CONTACTED IF HE/SHE DOES NOT ATTEND EVERY DAY.

PARENT/GUARDIAN INITIALS: \_\_\_\_\_

OR

MY STUDENT WILL ATTEND THE AFTERSCHOOL PROGRAM EVERY DAY IT IS AVAILABLE THAT HE/SHE ATTENDS SCHOOL UNLESS A PARENT/GUARDIAN EXCUSES HIM/HER BY PHONE, WRITTEN NOTE, ETC. I WISH TO BE CONTACTED IF HE/SHE DOES NOT SIGN IN WITHOUT AN EXCUSE AT THE FOLLOWING PHONE NUMBER(S):

\_\_\_\_\_ OR \_\_\_\_\_

PARENT/GUARDIAN INITIALS: \_\_\_\_\_

LIST THREE PEOPLE TO BE AUTHORIZED TO PICK UP AND/OR CONTACT IN CASE OF EMERGENCY		
NAME AND RELATIONSHIP: _____	NAME AND RELATIONSHIP: _____	NAME AND RELATIONSHIP: _____
HOME PHONE: _____	HOME PHONE: _____	HOME PHONE: _____
CELL PHONE: _____	CELL PHONE: _____	CELL PHONE: _____
WORK PHONE: _____	WORK PHONE: _____	WORK PHONE: _____

**THREE IS THE STATE REQUIRED MINIMUM (CAN INCLUDE PARENTS FROM THE FRONT) ADD ADDITIONAL AUTHORIZED PERSONS BELOW**

AN ADULT MUST SIGN OUT ALL STUDENTS UNDER THE AGE OF 16 EACH DAY.  
IF OVER THE AGE OF 16, THE STUDENT MAY SIGN HIM/HERSELF OUT OF THE PROGRAM AND DRIVE HOME OR RIDE WITH ANOTHER STUDENT WITH PARENT PERMISSION.

MY CHILD <i>MAY NOT</i> SIGN HIM/HERSELF OUT OR RIDE HOME WITH ANOTHER DRIVING STUDENT. AN ADULT LISTED ABOVE/BELOW WILL SIGN OUT MY CHILD EACH AFTERNOON AT THE DESIGNATED TIME. INITIALS: _____ NAME/PHONE: _____	MY CHILD IS <u>16 OR OLDER</u> AND MAY SIGN HIM/HERSELF OUT OR RIDE HOME WITH ANOTHER DRIVING STUDENT, OR ADULT LISTED ABOVE/BELOW AT THE DESIGNATED TIME. (STUDENT MUST BE 16 OR OLDER) INITIALS: _____ NAME/PHONE: _____
NAME/PHONE: _____	NAME/PHONE: _____
NAME/PHONE: _____	NAME/PHONE: _____

**DO NOT RELEASE – THE FOLLOWING PEOPLE ARE NOT ALLOWED TO TAKE MY STUDENT:**

NAME/RELATIONSHIP: \_\_\_\_\_ PAPERS RECEIVED ON: \_\_\_\_\_

NAME/RELATIONSHIP: \_\_\_\_\_ PAPERS RECEIVED ON: \_\_\_\_\_

STATE LICENSING REQUIRES THAT WE HAVE THE FOLLOWING INFORMATION FOR EACH STUDENT

CURRENT PHYSICIAN: \_\_\_\_\_ CURRENT DENTIST: \_\_\_\_\_

DOES STUDENT HAVE ANY FOOD, MEDICATION, OR ENVIRONMENTAL ALLERGIES? N \_\_\_\_ Y \_\_\_\_ IF YES, PLEASE LIST AND EXPLAIN: \_\_\_\_\_

DOES YOUR STUDENT'S ALLERGY/ALLERGIES REQUIRE CARE FROM STAFF TO MONITOR STUDENT FOR SYMPTOMS, TAKE ACTION IF A REACTION OCCURS? N \_\_\_\_ Y \_\_\_\_ (IF YES, A MEDICAL/PHYSICAL CARE PLAN MUST BE COMPLETED.)

**EMERGENCY MEDICAL AUTHORIZATION**

S.T.A.R.S. HAS PERMISSION TO SECURE EMERGENCY TRANSPORTATION FOR MY STUDENT IN THE EVENT OF AN ILLNESS OR INJURY. THE EMERGENCY TRANSPORTATION SERVICE WILL DETERMINE THE FACILITY TO WHICH MY CHILD WILL BE TRANSPORTED. PARENT/GUARDIAN INITIALS: _____	<b>OR</b>	S.T.A.R.S. DOES NOT HAVE PERMISSION TO SECURE EMERGENCY TRANSPORTATION FOR MY STUDENT IN THE EVENT OF AN ILLNESS OR INJURY WHICH REQUIRES EMERGENCY TREATMENT. PARENT/GUARDIAN INITIALS: _____
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*NOTE: THIS INFORMATION NEEDED FOR EMERGENCY PERSONNEL (PLEASE PROVIDE EACH SCHOOL YEAR)*

List Medication:	List Allergies:	Physical Impairments:	Other:
1. _____	1. _____	1. _____	1. _____
2. _____	2. _____	2. _____	2. _____

**ACKNOWLEDGEMENT OF POLICIES AND PROCEDURES**

I, \_\_\_\_\_, understand that the S.T.A.R.S. afterschool program is an extension of the school day and therefore, has the same high expectations of student behavior and success. I also understand that my participation in clubs, field trips, homework help and all other program activities are contingent on my actions and attitude, during the regular school day and during afterschool. As a Sheridan student and S.T.A.R.S. enrollee, I agree to respect my peers, the S.T.A.R.S. staff and equipment, and myself.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

I, \_\_\_\_\_, give my child permission to attend the S.T.A.R.S. afterschool program. I agree to the S.T.A.R.S. Handbook that describes the policies and procedures governing the program and share that information with my student, specifically regarding the discipline policy. I am aware of the possibility to allow my student to be bused to a local elementary school. I understand that in order for my student to receive the maximum benefits and assistance from the program, club leaders and learning center tutors will receive information from the student's regular classroom teacher as well as use information obtained from the DESSA survey and the Renaissance STAR testing that students will complete three times throughout the program.

Y \_\_\_\_ N \_\_\_\_ My student has permission to access the internet for educational purposes under supervision of the staff.  
 Y \_\_\_\_ N \_\_\_\_ I give permission for my student(s) photograph to be taken during S.T.A.R.S. activities and used for educational purposes.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

# **S.T.A.R.S.**

## **Parent Handbook**

### **2021-2022**

#### **Sheridan Middle/High School S.T.A.R.S. 21<sup>st</sup> Century Community Learning Center Program Philosophy**

##### **21<sup>st</sup> Century Grant**

Sheridan Middle/High School was awarded a 21<sup>st</sup> Century Community Learning Center (CCLC) grant for after school programming for the following school years; 2017-2018, 2018-2019, 2019-2020, 2020-2021, and 2021-2022. The purpose of the program is to expand upon the regular school day by providing students and families a range of high-quality services to support learning and development, including intervention, college/career activities, homework help, enrichment, service-learning clubs and project-based learning. At the same time, programs help working parents by providing a safe environment for students during non-school hours. The 21<sup>st</sup> Century program adheres to all rules, policies, and regulations of the 21<sup>st</sup> Century CCLC Grant.

##### **Vision Statement**

To be seen as the premier partner in building student and family success. Students, families, educators, community partners, and investors are continuously inspired by the participation in and progress made through academic assistance and wellness programs.

##### **Mission Statement**

The mission of the Sheridan Middle/High School 21<sup>st</sup> Century Program is to serve students and families. We nurture student growth by providing a safe place after school for kids in grades 6-12 to engage in academic assistance, build healthy relationships, and obtain life skills. We serve as a partner to families by helping to complete homework, working with school day staff, and offering programs and activities that build on the family as a unit. We believe that doing this at a low to no cost option and making it available in the student's school building is essential to our success.

##### **Goals & Outcomes**

1. Students who regularly attend will make continuous improvement in Math/Reading. We will measure improvement by the percent of students who move up the proficiency scale (i.e. from basic to proficient) on statewide assessments and will use Renaissance STAR Math/Reading screening results to monitor growth and adjust instruction throughout the year.
2. Students who regularly attend will show improved academic, social, and behavioral outcomes. We will measure youth development improvements through increases in school attendance rates, reductions of unexcused absences, and increases in regular, participating student ratings of their social emotional skills via a DESSA research- validated social-emotional rating tool. We will look for improvements in classroom behavior as measured by teacher feedback and by reductions in disciplinary incidents.
3. Families will become actively involved in their student's learning and access resources needed to assist their student in a successful education experience.

## Objectives

1. State licensure of sites. Qualified trained staff.
2. Developmentally appropriate activities will be offered.
3. Curriculum offered that aligns with state content standards.

## Program Admission

1. Applications for enrollment will be processed in the order that they are received. At no time will there be more than 20 students per staff member.
2. The funding for this program benefits all students; however, the 21<sup>st</sup> Century grant requires us to serve a specific percentage of students who are enrolled in the free and reduced lunch program. Therefore, some spots must be reserved for students who meet those requirements.
3. Once programs are at full capacity, students will be placed on a waiting list and contacted when openings occur.
4. There is no fee for this program.

## Enrollment

1. Students in grades 6-12 attending school at Sheridan Middle/High School are eligible for this program.
2. Students in grades 6-12 that are doing REMOTE LEARNING can participate virtually but not in person. If you're interested in your student participating remotely, a schedule will need to be in place for the student and teacher to follow.
3. Students wishing to enroll in the Sheridan Middle/High School 21<sup>st</sup> Century Program must complete an enrollment form and have an up-to-date emergency medical form and medical authorization form to participate in the program.
4. Parents/guardians of students enrolled in the program will be automatically assigned to the **REMIND APP** for notifications from the Site Coordinator.

## Program Attendance and Transportation Policies

1. It is important for your student to attend the program **as often as possible**.
2. We understand that there will be times when an absence is necessary. **If you expect an absence from a club, please let the Site Coordinator know in advance.** Excused absences include illness, doctor's appointment, personal appointments, funeral or personal tragedy, or extra-curricular activities.
3. Unexcused absences do occur, but we hope they are rare. If there is a waiting list for a particular program, then the following attendance policy applies:
  - a. 3 unexcused absences – A note will be sent home to the parents alerting them of their child's unexcused absences.
  - b. 5 unexcused absences – The Site Coordinator will call the parents to discuss the absences.
  - c. 6 unexcused absences – The student will be dismissed from the program. If you wish to re-enter the program, you will be placed at the end of the waiting list.

## Days and Hours of Operation

1. The Sheridan Middle/High School S.T.A.R.S. Program will operate on school days only. This will follow the school's district calendar. The after-school program will not operate on parent conference evenings.
2. The S.T.A.R.S. Program will not operate on snow days. The after-school program will not operate on early dismissals due to weather.
3. The after-school program will begin directly after school. This program begins at 2:30 pm and will end at 5:30 pm. This program will operate 4 days a week for the duration of the school year.

4. Students enrolled in the S.T.A.R.S. Program can sign-up for busing to our 3 drop off points within the district. Children MUST have a busing permission form on file to be transported.
5. This bus route will take S.T.A.R.S. students from the high school and middle school at the end of the S.T.A.R.S. Program to **drop off points only**. Plan to arrive 5 minutes prior to the drop off time to be prepared to pick up your student. **Please be advised; the students will be dropped off even if there is no ride waiting.** The drop off points and approximate times will be the following:  
**Thornville Elementary: 5:25 p.m. – 5:30 p.m.**  
**Glenford Elementary: 5:40 p.m. – 5:45 p.m.**  
**Somerset Elementary: 5:55 p.m. – 6:00 p.m.**
6. Please be prompt in picking up your child. Closing procedures include:

#### **YOUNGER THAN 16 YEARS OLD**

- a. A child YOUNGER THAN 16 YEARS OLD must be picked up by an adult, who must enter the building and sign the child release form each night.
- b. A child will only be released to adults previously selected by the parents on the enrollment form or by a note sent to the Site Coordinator by the parent.
- c. Please be prompt in picking up your child from the program. If an appointed person has failed to pick up their child by 5:30 pm, there will be a charge of \$10.00 for every 15 minutes they are late.
- d. Parents must inform the Site Coordinator if there are specific individuals who should not pick up the child/children.

#### **16 YEARS OLD OR OLDER**

1. A child 16 YEARS OLD OR OLDER may sign out and drive home, or ride home with another student WITH PARENT PERMISSION as noted on the enrollment form.
2. A child will only be released to students/adults previously selected by the parents on the enrollment form or by a note sent to the Site Coordinator by the parent.
3. Please be prompt if you are picking up your child from the program. If an appointed person has failed to pick up their child by 5:30 pm, there will be a charge of \$10.00 for every 15 minutes they are late.
4. Parents must inform the Site Coordinator if there are specific individuals who should not pick up the child/children.

### **POLICIES**

#### **Discipline**

*The program shall have a written discipline policy describing the program's philosophy of discipline and the specific methods of discipline used at a program. This written policy shall be on file at the program for review. Constructive, developmentally appropriate child guidance and management techniques are to be always used, and shall include such measures as redirection, separation from problem situations, talking with the child about the situation, and praise for appropriate behavior.*

1. All school-age childcare staff members shall receive a copy of the program's discipline policy for review upon employment.
2. The school child program shall in-service staff regarding the written discipline policy and procedures before the school child program begins and/or before staff members begin working with children.
3. The parent of a child enrolled in a program shall receive the program's written discipline policy.
4. A school-age childcare staff member in charge of a child or group of children shall be responsible for their discipline.
5. Discipline shall be constructive and educational in nature and may include such measures as praise for appropriate behavior, diversion, talking with the child, or separation from problem situations.

6. Exclusion from the school child program for disciplinary reasons shall be addressed in the policy and procedures.
7. The program shall not abuse or neglect children and shall protect children from abuse and neglect while in attendance in the school-age childcare program.

**The program's actual methods of discipline shall apply to all persons on the premises and shall be restricted as follows:**

1. There shall be no cruel, harsh, corporal punishment or any unusual punishments such as, but not limited to, punching, pinching, shaking, spanking, or biting.
2. No discipline shall be delegated to any other child.
3. No physical restraints shall be used to confine a child by any means other than holding a child for a short period of time, such as in a protective hug, so the child may regain control.
4. No child shall be placed in a locked room or confined in an enclosed area such as a closet, a box, or a similar cubicle.
5. No child shall be subjected to profane language, threats, derogatory remarks about himself/herself or his/her family, or other verbal abuse.
6. Discipline shall not be imposed on a child for failure to eat or for toileting accidents.
7. Techniques of discipline shall not humiliate shame or frighten a child.
8. Discipline shall not include withholding food, rest, or toilet use.
9. Separation, when used as discipline shall be brief and appropriate to the child's age and developmental ability, and the child shall be within sight and hearing of a school-age childcare staff member in a safe, lighted, and well-ventilated space.
10. If the student's behavior disrupts the activities of the program, or endangers the well-being of students or staff members, then these sequences of discipline should be followed:
  - a. Verbal warning to the student by a staff member
  - b. Conference between the Site Coordinator and student
  - c. Communication with parent and student by the Site Coordinator
  - d. Dismissal from the program

Every effort will be made to help the student correct their behavior including, but not limited to, behavior management plans, incentive systems, redirection, etc. If no interventions are successful, we reserve the right to dismiss the student from the program. A student may also be dismissed from the program immediately for a severe offense such as harming another student/staff member, damaging school property, or other harmful offenses.

### **Emergencies**

1. Emergency medical forms will be always kept on site. In the event the program takes a field trip, emergency medical forms will be taken on the trip.
2. Procedures for emergencies will follow those of the local school district.

### **Errand and Restroom**

Children may run errands or use the restroom without adult supervision under the following conditions:

- a. Children are within hearing distance of the adult
- b. Staff member always knows the whereabouts of children
- c. Staff member checks on children regularly
- d. Children receive permission from staff member

### **Parent Communication and Participation**

1. The parents are welcome to visit the program at any time.
2. The parents are invited to attend multiple family literacy events where they are provided with an event survey.



3. The parents are invited to attend field trips with their students, to experience career explorations, college campus visits and health and wellness information.
4. We will include parents of regular attending students in the beginning of the year and end of the year orientations with the staff, to help in the planning process.
5. The parents will be notified of events through the monthly STARS newsletter. They will also be able to pick up flyers and information at the sign out table. A current calendar of events will be posted near the sign out sheets. The name and phone number of the Site Coordinator will be posted on the calendar, on the door and on all written communications.

### **Supervision**

1. At no time will there be more than 20 children per staff member.
2. Staff members will be certified teachers and/or aides. Some staff members are also teachers/aides that work full/part time for the school district.
3. The Site Coordinator is at the site daily and is in direct contact with the Lead Teacher and staff.
4. At least two staff members shall be present on field trips including seven or more participating children.
5. Children may run errands or use the restroom without direct adult supervision in the area designated for the program's use by the site plan if the children are within hearing of a staff member, a staff member always knows the whereabouts of the children, and a staff member checks on the children every 5 minutes.
6. When a group of children are outdoors, a staff member shall be able to summon another adult without leaving the group alone or unsupervised.

### **Management of Communicable Diseases**

- A person trained to recognize the common signs of communicable disease or other illness and disease management procedures shall observe each child daily as he/she enters a group. A licensed physician or nurse, a medical technician/ambulance instructor or a currently authorized American Red Cross First Aid instructor will conduct the trainings.
- Any child who is suspected of having a communicable disease will be isolated immediately, and a parent or guardian shall be notified via telephone as soon as possible.
- Any child suspected of having a communicable disease shall be within sight or hearing of a staff member.

### **Symptoms of Communicable Disease**

- Diarrhea (more than one abnormally loose stool within a 24-hour period)
- Severe coughing, causing the child to become red or blue in the face or to make a whooping sound
- Yellowish skin or eyes
- Conjunctivitis (pinkeye)
- Temperature of 100° F taken by the auxiliary method when in combination with any other sign of illness
- Untreated infected skin patch(es)
- Unusually dark urine and/or gray or white stool
- Stiff neck
- Evidence of lice, scabies, or other parasitic infection
- Vomiting
- Serious cold symptoms
- Sore throat or difficulty in swallowing
- Unusual spots or rashes

If a child is "mildly ill" (experiences minor cold symptoms or does not feel well enough to participate in activities but is not exhibiting any of the symptoms specified in the Communicable Disease Policy) he/she will be permitted to stay at the program and will be monitored frequently and observed for signs and symptoms of a worsening condition. If a child's symptoms worsen, then he/she will be isolated from other children and the parent or guardian contacted to arrange for the child to be taken from the program site.

# STUDENT HANDBOOK - AUTHORIZATION PAGE

Please initial each line and sign below

\_\_\_\_\_ My child has permission to participate in the STARS After School program.

## ACADEMIC ASSISTANCE

\_\_\_\_\_ Is your child on an IEP, 504, or Special Education Plan? Yes\_\_\_\_\_ No\_\_\_\_\_ If yes, please briefly describe the special areas of concern, so that we may support child's academic needs. \_\_\_\_\_

## HANDBOOK

\_\_\_\_\_ I have received a Parent Handbook that describes the policies and procedures governing the Sheridan Middle/High School STARS After School Program.

## SHARING OF INFORMATION

\_\_\_\_\_ The Sheridan Middle/High School STARS After School Program wants to provide the best academic improvement program it can, continuously improving to meet students' needs. I grant permission for the STARS After School Program, under the supervision of Sheridan Middle/High School, to gather participation and school information regarding my child for evaluation purposes (i.e. grades, test scores, free/reduced lunch status, eligibility, etc.). Collected information will be confidentially processed for program compliance and evaluation solely by the STARS After School Program staff. At no time will your child's complete individual information be released outside of the program.

## PHOTO/TAPE/AUDIO RECORDS

\_\_\_\_\_ The Sheridan Middle/High School STARS After School Program has my permission to photograph and/or audio/video tape activities that include my child for purposes of program promotion.

## USE OF COMPUTERS AND ONLINE SERVICES

\_\_\_\_\_ All computers must be used in a responsible, efficient, and ethical manner. Every effort will be made by the STARS After School Program staff to protect children from harmful content, including the use of software that blocks offensive content. Unacceptable uses of the computer and/or network by students will result in the revoking of access privileges. I give permission for my child to use computer equipment and the internet, acknowledging the inherent risk of the internet.

## DESSA - SOCIAL/EMOTIONAL LEARNING SURVEY

\_\_\_\_\_ I give my child permission to complete the DESSA Survey. The DESSA Survey is an assessment tool for our regular attendees to show improved academic, social, and behavior outcomes. Improvements measured by increased school attendance rates, reductions unexcused absences, and increases in student ratings (via DESSA social-emotional skills rating tool)

## TRANSPORTATION SERVICES

\_\_\_\_\_ It is VERY important that the buses leave the elementary schools at their appropriate times. I understand that if my student is NOT to attend the STARS After School program that day, I must send a note that morning, call the school secretary, or Site Coordinator at least one hour before the end of the school day. If there is no such communication, the student will be required to stay for the program that day. *Please note that this is for the safety of your student.*

## STUDENT SIGN OUT

\_\_\_\_\_ An adult MUST sign out all students each day. If your child is 16 years or older and you gave consent, they may sign him/herself out. NOTE: Your child will only be released to those listed on the enrollment form.

Please sign and return this form to the STARS Site Coordinator.

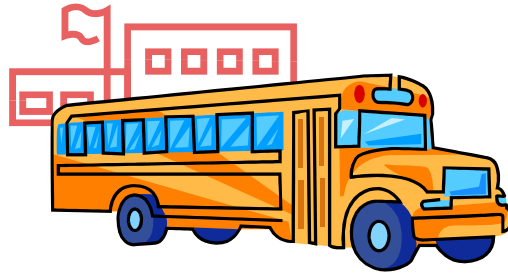
\_\_\_\_\_ \*STARS\* Student Name

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

# S.T.A.R.S.

offers busing to *ALL* students  
participating in the program!



We are excited to offer our S.T.A.R.S. students a ride at the end of the day! This route is available to all Sheridan Middle/High School students enrolled in the program.

This bus route will take S.T.A.R.S. students from the high school and middle school at the end of the S.T.A.R.S. Program to **drop off points only**. Plan to arrive 5 minutes prior to the drop off time to be prepared to pick up your student. **Please be advised; the students will be dropped off even if there is no ride waiting.**

The drop off points and approximat times will be the following:

**Thornville Elementary: 5:25 p.m. - 5:30 p.m.**

**Glenford Elementary: 5:40 p.m. - 5:45 p.m.**

**Somerset Elementary: 5:55 p.m. - 6:00 p.m.**

For more information contact Jenn Channel (Site Coordinator)  
@ Sheridan Middle School (740) 743-1315 OR (740) 704-7625

# S.T.A.R.S. BUSING CONSENT FORM

I hereby give permission for my student(s)

Student Name: \_\_\_\_\_ Grade: \_\_\_\_\_

Student Name: \_\_\_\_\_ Grade: \_\_\_\_\_

Student Name: \_\_\_\_\_ Grade: \_\_\_\_\_

to travel by Northern Local School District bus from Sheridan Middle School to:

(Please select a drop off site)

\_\_\_\_\_ Thornville Elementary - drop off time approx. 5:25 pm - 5:30 pm

\_\_\_\_\_ Glenford Elementary - drop off time approx.: 5:40 pm - 5:45 pm

\_\_\_\_\_ Somerset Elementary - drop off time approx.: 5:55 pm - 6:00 pm

**Plan to arrive 5 minutes prior to the drop off time to be prepared to pick up your student.**

**Please be advised; students will be dropped off even if there is no ride waiting.**

*In granting permission, I hereby expressly waive my claim for liability against Northern Local School District, Muskingum Valley Educational Service Center (MVEESC), their Boards of Education, including its employees and representatives and release them from liability in connection with this bus route.*

\_\_\_\_\_  
Parent/Guardian Signature  
(REQUIRED)

\_\_\_\_\_  
Phone #  
(REQUIRED)

Date: \_\_\_\_\_

# •remind

## Sign up for important updates from Mrs. Channel,

Get information for Sheridan Middle/High School right on your phone—not on handouts.


Pick a way to receive messages for S.T.A.R.S.:

**A** If you have a smartphone, get push notifications.

On your iPhone or Android phone, open your web browser and go to the following link:

[rmd.at/8b6ea4](http://rmd.at/8b6ea4)

Follow the instructions to sign up for Remind. You'll be prompted to download the mobile app.




**B** If you don't have a smartphone, get text notifications.

Text the message @8b6ea4 to the number 81010.

If you're having trouble with 81010, try texting @8b6ea4 to (650) 466-7723.

\* Standard text message rates apply.



Don't have a mobile phone? Go to [rmd.at/8b6ea4](http://rmd.at/8b6ea4) on a desktop computer to sign up for email notifications.