



Los Angeles Unified School District  
 BEYOND THE BELL BRANCH  
**BEFORE AND AFTER-SCHOOL PROGRAM**  
**APPLICATION/AGREEMENT**

*For Staff Use Only*

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DISTRICT ID NUMBER 2018 SCHOOL YEAR								

**SCHOOL OF ATTENDANCE:** \_\_\_\_\_

Program Applying for: <i>(Only check one)</i>			OTHER PROGRAMS:
BEFORE-SCHOOL	AFTER-SCHOOL		Name of Program
Ready-Set-Go! (RSG)	Youth Services	Grant Funded Program (ASES/21 <sup>st</sup> CCLC/ASSETS) Name of Program MS Unit Summer Program 2018	
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

**APPLICANT**

PRINT NAME CLEARLY: FIRST M.I. LAST DATE OF BIRTH MONTH DAY YEAR GRADE

STREET ADDRESS APTS CITY ZIP CODE

**PARENT(S)/GUARDIAN(S)**

MOTHER'S/GUARDIAN'S NAME		FATHER'S/GUARDIAN'S NAME	
PRINT NAME:	FIRST M.I. LAST	PRINT NAME:	FIRST M.I. LAST
PHONE NUMBER (MAIN)	PHONE NUMBER (OTHER)	PHONE NUMBER (MAIN)	PHONE NUMBER (OTHER)

**EMERGENCY CONTACT/RELEASE INFORMATION** *(provide a minimum of two contacts)*

#1: RELATIONSHIP	NAME (FIRST LAST)	PHONE NUMBER(S)	ADDRESS (STREET CITY ZIP)
#2: RELATIONSHIP	NAME (FIRST LAST)	PHONE NUMBER(S)	ADDRESS (STREET CITY ZIP)
#3: RELATIONSHIP	NAME (FIRST LAST)	PHONE NUMBER(S)	ADDRESS (STREET CITY ZIP)

- I/We authorize the Beyond-the Bell Before/After-School Program (BASP) to contact, and if necessary, release my child to any of the above individuals listed as an Emergency Contact/Release Information. The above listed individuals must be 18 years or older.
- I/We give my permission for my child to be filmed or photographed. I understand that all film or photos are the sole property of the BASP, and may be used in displays to the public, to publicize the program, or for printed materials published by and/or for the BASP.
- I/We hereby consent to the disclosure of personally identifiable information from my child's education records under the Family Educational Rights and Privacy Act and allow for the Los Angeles Unified School District to disclose such information only to the extent and for the duration necessary for my child to participate in BASP programs.
- The After School Education and Safety (ASES) Program Act of 2002, enacted by initiative statute, establishes the After School Education and Safety Program to serve pupils in kindergarten and grades 1 to 9, inclusive, at participating public elementary, middle, junior high, and charter schools. The act gives priority enrollment in after school programs and before school programs to pupils in middle school or junior high school who attend daily. Pupils who are identified by the program as homeless youth or as being in foster care will be given first priority. Parents/guardians may indicate this information below:  
 Pupil designation *(please check, if applicable)*:  Homeless Youth  Foster Care
- Does your child have any physical, emotional, and/or learning difficulties? If so, please specify: \_\_\_\_\_
- Does your child have any food allergies? If so, please specify: \_\_\_\_\_

**ACKNOWLEDGEMENT**

MOTHER'S/GUARDIAN'S NAME (PRINT)	MOTHER'S/GUARDIAN'S SIGNATURE	DATE
FATHER'S/GUARDIAN'S NAME (PRINT)	FATHER'S/GUARDIAN'S SIGNATURE	DATE
SITE COORDINATOR'S NAME (PRINT)	SITE COORDINATOR'S SIGNATURE	DATE



Los Angeles Unified School District  
BEYOND THE BELL BRANCH - STUDENT AUXILIARY SERVICES

**BEYOND THE BELL MIDDLE SCHOOL UNIT-SUMMER PROGRAM**

611 JACKSON STREET  
LOS ANGELES, CA 90012

OFFICE: (213) 633-3500  
FAX: (213) 633-3565

**PARENT / CHILD AGREEMENT**

The Beyond the Bell Middle School Unit Summer Program provides academic enrichment, recreation and educational enrichment activities. The program hours of operation begin at 8:00 A.M. and end at 2:00 P.M.

During the Beyond the Bell Middle School Unit Summer Program, your child will be involved in exciting recreation, academic and educational enrichment activities; and be provided with an evening snack. Children may be released at any time to a designated adult during these hours.

Upon acceptance to the Beyond the Bell Summer Program, the following guidelines must be met on a daily basis:

1. Your child may sign his/herself out (waiver must be filled out) or must be picked up by an adult (designated on the student's emergency card) 18 years of age or older.
2. Children must be picked up or have signed out before the end of the program's operating time. Check with your Beyond the Bell Middle School Unit Site Coordinator for the program hours. If your child is not picked up before the program dismissal time, the Middle School Unit office will be notified. If your child is picked up late three times, your child may be dismissed from the program. If one hour passes and a child has not been picked up, the child will be considered an abandoned child and a law enforcement agency will be called to pick up the child.
3. If a child is disruptive, misbehaves and or poses a threat to other children, he/she may be dismissed from the program.
4. On a daily basis, once the child is signed in, he/she may not leave without an authorized adult. Failure to comply will constitute grounds for dismissal from the summer program.
5. **Your child must attend the Beyond the Bell Middle School Unit Summer Program an average of 80% of the month. That is four (4) out of five (5) days of the week, or sixteen (16) out of twenty (20) days per month. Failure to maintain this attendance average without a valid reason will be grounds for dismissal.**
6. Verbally or physically abusive behavior towards school staff by a parent will constitute grounds for dismissal from the program.
7. Children will not be released to a parent/guardian who is deemed to be in an intoxicated state. Any such incident may also be grounds for dismissal from the program.
8. Evaluation of the Beyond the Bell Program is essential to maintaining and developing an effective summer program. Therefore, I (parent/guardian) agree to complete an annual parent survey and allow my child to be surveyed and his/her cumulative records accessed for evaluation information.
9. **I give my permission for my child to be filmed or photographed. I understand that all film or photos are the sole property of the Beyond the Bell Middle School Unit, and may be used in displays to the public, to publicize the program, or for printed materials published by and/or for Beyond the Bell.**
10. I understand that my child may be selected as a team member to participate in a Beyond the Bell youth sports tournament, and the practices may take place during one or more of the daily rotations. I grant my child permission to participate with that understanding.

Upon arrival, your child must first check in with the Beyond the Bell Middle School Unit Summer Program.

We are looking forward to your child successfully participating in the Beyond the Bell Middle School Unit Summer Program.

I have read and authorized the above Parent/Child agreement policies.

PARENT/GUARDIAN SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

CHILD (REN) NAME: \_\_\_\_\_ GRADE: \_\_\_\_\_

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

SCHOOL: \_\_\_\_\_



### BEYOND THE BELL BRANCH Summer Middle School Early Release Policy

State Legislation governing after school programs for middle schools funded by After School Education and Safety Program and/or 21st Century Community Learning Centers mandates that such programs must operate from 8:00 a.m. every school day until 2:00 p.m. It is the intent of the State Legislation that middle school students attend an average of 80% of the month, that is four (4) out of five (5) days of the week, or sixteen (16) out of the twenty (20) days per month. In the event that a student is participating in other extracurricular activities during program hours, a parent/guardian or authorized person (18 years or older who is on the student's emergency card) may pick up his/her child or may authorize the child to sign out of the program under the following condition(s):

**A:** Attending a parallel program (program in the school or community such as soccer, basketball, music lessons, religious education, etc.) as long as an agreement with the parent or guardian exists making this the child's enrichment component.

Please select the day(s) and enter the time(s) when the student will be picked up from the program.

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY

First day of activity: \_\_\_\_\_ Last Day of activity: \_\_\_\_\_

Activity/Class: \_\_\_\_\_

\*This section must be completed each and every time the student enrolls in a new activity.

**B:** During Standard Time, when the days are shorter and it gets dark early, a parent/guardian or authorized adult (18 years or older who is on the student's emergency card) may pick up his/her child under the following condition:

**Family does not have transportation and they need to walk home before it gets dark.**

My child will be picked up at: \_\_\_\_\_ from \_\_\_\_\_ to \_\_\_\_\_

Time Date Date \*This option is valid only during Standard Time.

- C: Family emergencies (such as a death in the immediate family, natural catastrophic incidents, etc).
- D: Medical appointments
- E: Climatic/Natural Disaster Conditions
- F: Other conditions especially in regards to safety, as prescribed by the school, local district, or local government body.

Code/Time: \_\_\_\_\_

Dates/Initial: \_\_\_\_\_

\*This section must be completed each and every time the student leaves before the program closes.

**THE EARLY RELEASE POLICY IS NOT INTENDED FOR THE DAILY EARLY DEPARTURE OF STUDENTS. FAMILIES MAY USE THE EARLY RELEASE POLICY SPORADICALLY. THE MISUSE OF THE EARLY RELEASE POLICY MAY RESULT IN THE TERMINATION OF SERVICES.**

- o My child will be picked up by an authorized adult.
- o I authorize my child to sign out of the program and leave without adult supervision
- > (Authorization for student to sign out of the program must be in the student's file).

Student's Name: \_\_\_\_\_ Grade: \_\_\_\_\_ Birth date: \_\_\_\_\_

In signing below, I request that my child be excused from the program at the specified time(s) and day(s) mentioned above. I understand neither the program provider nor the Los Angeles Unified School district is liable for incidents involving my child occurring after his/her departure from the program. I also understand services will be terminated if the program has a waiting list of students eligible to attend the program on a regular basis.

\_\_\_\_\_  
Parents Name

\_\_\_\_\_  
Parents Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Agency Representatives Name

\_\_\_\_\_  
Representatives Signature

\_\_\_\_\_  
Date

This form must be completed each time the student leaves before the program closes.

This section to be completed by site personnel.

Number of days the student has left early during the current school year: \_\_\_\_\_