KTEC Konnections

Hours: Monday – Friday when school is open

Before School Program: 7:00 AM – Start of School

After School Program: Dismissal – 6:00 PM

Fees: $25 Registration Fee / $35 per Family

$3.00 per hour

KTEC KONNECTIONS is a before and after school program that serves KTEC students in pre-school through Eighth grade. All Programs run Monday – Friday and is closed on all non-school days.

BEFORE SCHOOL PROGRAM- EAST: ALL STUDENTS DROPPED OFF AT SCHOOL BEFORE 7:45 AM MUST BE DROPPED OFF AT DOOR #2, (on the North side of the building) AND REPORT DIRECTLY TO KONNECTIONS. Breakfast will be available from 7:15 until 7:45 for anyone who is interested; breakfast fees will be charged to each student’s food service account, unless they qualify for free or reduced meals. If your student takes advantage of the breakfast program, you will not be charged from 7:15 until 7:45. If your student does not take advantage of the breakfast program, you will be charged from the time your student arrives until 7:45.

BEFORE SCHOOL PROGRAM- WEST: ALL STUDENTS DROPPED OFF AT SCHOOL BEFORE 8:05 AM MUST BE DROPPED OFF AT DOOR #13, (on the East side of the building) AND REPORT DIRECTLY TO KONNECTIONS. Breakfast will be available from 7:45 until 8:15 for anyone who is interested; breakfast fees will be charged to each student’s food service account, unless they qualify for free or reduced meals. If your student takes advantage of the breakfast program, you will not be charged from 7:45 until 8:15. If your student does not take advantage of the breakfast program, you will be charged from the time your student arrives until 8:05.

AFTER SCHOOL PROGRAM: Konnections serves as an extension of the supportive learning environment created in KTEC classrooms. Activities are designed to be consistent with the mission of our school and it focus on development of 21st century skills. The program is designed to foster academic, social, and emotional growth in students.

All students not picked up within 10 minutes of dismissal from school are escorted to KTEC Konnections and families will be charged accordingly.

PICK UP: Only authorized persons over 18 years of age with an ID may sign out a student who has been signed into KTEC Konnections. It is the parent or guardians responsibility to notify us in writing of any changes to their authorized pick up list.

No student will be allowed to leave with anyone other than people on their authorized pick up list.

PLEASE REMEMBER TO SIGN OUT YOUR STUDENT. IF NO TIME OR SIGNATURE IS NOTED ACCOUNTS MAY BE CHARGED UNTIL 6:00 PM WHEN KONNECTIONS CLOSES.
REGISTRATION: An enrollment form and pick up authorization form must be completed to participate in KTEC Konnections. A non-refundable registration fee of $25 for 1 child and $35 per family is required and will be assessed on the first bill.

BILLING: Families are charged only for the use of time they are at KTEC Konnections. Statements are sent home to the students every 2 weeks in their Wednesday folder. It is the responsibility of each family to check the student’s book bag for the bill. Payment in full is due upon receipt and no later than the following Monday. Checks must be made payable to KTEC (noted in the memo for Konnections), and returned to school. If payment had not been made in a month, it could result in your child being unable to attend Konnections.

KTEC is now implementing a late payment policy for its before and after school program. This policy is intended to provide stability of its programing and staffing. We, as a school, will always work with families to provide a reasonable payment plan if there are financial concerns. However, if there is no reasonable attempt made to pay the bill off: Konnections care will no longer be the provider for your child(ren). The policy is as follows

1. Notices will be sent out about late payment with the expectation that they will be paid within a two week period.
2. Bills that have reached the 30 day mark of delinquency will result in the removal of care by Konnections for your child (ren). Alternate accommodations must then be provided by you the parent/guardian. If children (ren) are continually left in our care (after termination of the Konnections child care) without arrangements then community authorities including the police department could be involved.

Please do not include payment for any other activity with this check or do not place any other payments with your Konnections check.

Ways to pay your bill - Cash, Check, and Credit Card (Can be done online- more info to come)

If you have a student in homework club or any other after school activities, Please note that siblings will be charged while in Konnections.

PARENT / GUARDIAN RESPONSIBILITY: KTEC KONNECTIONS closes promptly at 6PM. All students are to be picked up prior to the end of the program. A late fee of $10 per 5 minutes will be assessed to any family who has not picked up their student(s) by 6:00PM. KTEC Konnections is only responsible for students enrolled in the KTEC Konnections program during hours of operation.

HOMEWORK: Konnections staff will be happy to help and encourage your student to do homework, but it is still a parent’s responsibility to double check that homework is complete and accurate. Please talk with Konnections staff about any homework concerns.

After School Sales: If your student brings money and has permission, they will be allowed to participate in any after school fundraising sales which may include homemade bake goods or candy.
**SNACKS:** A snack will be served during after school care. The snack is provided by KUSD Food Service and meets Federal guidelines for nutritious snack. If your student’s dietary restrictions require him/her to have special snacks, please see Laura or Shay Nichols.

**Electronic Rules:** Students are permitted to use electronic games and listen to music in Konnection after school program. **No pictures, texting (sending and receiving), phone calls (in or out) and no internet access.**

If the above rules are not followed your student will not be able to bring electronics to Konnections.

**TOY POLICY:** **Toys from home are not allowed.** Please keep all Legos, stuffed animals and other toys, etc. at home. Konnections has its own collections of toys that students can play with.

**DISCIPLINE POLICY:** Parents and students should be aware that Konnections is an extension of the school day, and behavior expectations remain in place. Staff “Redirect” and encourage children to talk/work through situations together. If after redirection and modeling, the behavior has not improved, parents will be informed. Failure to comply with the Code of Expectation and Behavior Plan may result in a parent meeting, setting an action plan, and possible dismissal from the program. Poor behavior detracts from the experience of your student and the other students. Our goal is to ensure a safe, fun, and enjoyable experience for everyone through positive behavior. Thank you in advance for your cooperation and understanding.

**WITHDRAWAL OR TERMINATION:**

Please look over and familiarize yourself with the Konnections Behavior Report. Please let us know if you have any questions or concerns.
Konnections Behavior Report

Date ______________________

Dear Parent(s):

The purpose of this report is to inform you of a disciplinary incident involving your child. This behavior may have jeopardized the safety and well-being of other students. A verbal warning and three offenses could be grounds for suspension or dismissal from the program. You are to cooperate with the disciplinary action taken.

Date of incident ______________ Child ___________________________________

Infraction:

_____ Disrespect to another student
_____ Disrespect to staff
_____ Rough Physical Behavior
_____ Defiance of Authority
_____ Unacceptable Language
_____ Throwing objects
_____ Misuse of electronics
_____ Misuse of Internet
_____ Damage to school property
_____ Inappropriate items
_____ Rude or discourteous conduct
_____ Other behavior relating to safety, well-being, and respect for others
_____ Other ____________________________

Specific details __________________________________________________________
________________________________________________________________________
________________________________________________________________________

_____ Verbal warning

_____ First offense: Loss of Activity for remainder of the evening.

_____ Second offense: Referral, Removal from Konnections for one (1) day.

_____ Third offense: Referral, Removal from Konnections for one (1) week and a Parent Conference will be needed to discuss returning to Konnections.

_____ Fourth Offense: Referral, Removal from Konnections for six (6) weeks

After returning from the six week removal, if there is one more offense, you will be removed from Konnections or the remainder of the year.

Conference Scheduled

Disciplinary action to be taken ______________________________________________
________________________________________________________________________

Participant may be removed as a result of further occurrences. KTEC Konnections reserves the right to evaluate the consequences of each case in light of its severity and content.

Staff signature ________________________________________ Date ______________________

Parent signature ______________________________________ Date ______________________

Any verbal abuse or violence will not be tolerated and is considered immediate grounds for dismissal from Konnections.
Parent Agreements

Please initial that you read and understand the following policies.
Please return with your Konnections Registration form.

________________________________________________________________________________________________________
Student Name (s)

I understand that if I don’t sign out correctly (including time and signature) that I could be charged until 6:00PM when Konnections closes.

I understand that all payments for Konnections are due the following Monday after bills are received. I should not include any other payments or forms with my Konnections payment.

I have read and understand the Konnections Behavior / Discipline Policies.

I understand if my student does not use their electronic devices in accordance with the electronic policy, they will not be allowed to have their electronic devices in Konnections.

No toys from home will be brought to Konnections.

My student has my permission to participate in any after school fundraising sales. Parents / student are responsible for bringing / supplying money.

I would like my student to work on homework in Konnections until they are finished or they are picked up from Konnections.

or

My student will be doing their homework at home and may choose to do whatever activities they would like to do during Konnections.

________________________________________________________________________________________________________
Signature
Date ______ /______ /_______

2015-2016
KTEC Konnections
Student Contact Form

Student Name: __________________________________ Date of Birth: ____ / ____ / ____
Student Name: __________________________________ Date of Birth: ____ / ____ / ____
Student Name: __________________________________ Date of Birth: ____ / ____ / ____
Student Name: __________________________________ Date of Birth: ____ / ____ / ____
Student Name: __________________________________ Date of Birth: ____ / ____ / ____

Father: ___________________________ Mother: ___________________________
Cell Phone: ___________________________ Cell Phone: ___________________________
Work Phone: ___________________________ Work Phone: ___________________________
Email: ___________________________ Email: ___________________________
Address: ___________________________ Address: ___________________________
City: ___________________________ City: ___________________________
State: _______ Zip: __________ State: _______ Zip: __________

Emergency Contacts

Person #1 Person #2
Name: ___________________________ Name: ___________________________
Address: ___________________________ Address: ___________________________
State: _______ Zip: __________ State: _______ Zip: __________
Cell Phone: ___________________________ Cell Phone: ___________________________
Work Phone: ___________________________ Work Phone: ___________________________
Relationship: ___________________________
Relationship: ___________________________

______________________________
Signature of Parent / Guardian

*Please notify Konnections if any changes*
KTEC KONNECTIONS
Pick Up Authorization Form

Unless otherwise noted we will only release a child from KTEC Konnections to a Parent / Guardian or to someone specifically authorized by them. **The authorization person must be prepared to furnish a valid picture ID to Konnections Staff Member.**

_______________________________________________________________________________________

Student Name(s)

I give permission to have my child(ren) picked up from KTEC Konnections by the following.

Person # 1
Name: ___________________________________________
Address: _________________________________________
City: _____________________________________________
State: ___________________ Zip: ___________________
Home Phone: _____________________________________
Work Phone: ______________________________________
Cell Phone: _______________________________________ 
Relationship: ______________________________________

Person # 2
Name: ___________________________________________
Address: _________________________________________
City: _____________________________________________
State: ___________________ Zip: ___________________
Home Phone: _____________________________________
Work Phone: ______________________________________
Cell Phone: _______________________________________
Relationship: ______________________________________

Person # 3
Name: ___________________________________________
Address: _________________________________________
City: _____________________________________________
State: ___________________ Zip: ___________________
Home Phone: _____________________________________
Work Phone: ______________________________________
Cell Phone: _______________________________________ 
Relationship: ______________________________________

Person # 4
Name: ___________________________________________
Address: _________________________________________
City: _____________________________________________
State: ___________________ Zip: ___________________
Home Phone: _____________________________________
Work Phone: ______________________________________
Cell Phone: _______________________________________ 
Relationship: ______________________________________

________________________________________________________
Signature of Parent / Guardian

**Children will only be released to persons authorized on this form**