

Completed Registration Form with Signature and PDF flyer must be received by JULY 15 via email to HornJen@mac.com and paper flyer mailed to Jen Horn 407 S Williams St., Denver, CO 80209. Please contact me with any questions.

STEELE ENRICHMENT PROGRAM ENROLLMENT FORM School Year 2017-2018

Business/Provider Name : _____

Program Director Name: _____

Business Contact Information

Physical address: _____

Email Address: _____

Phone: _____

Website: _____

Class Information:

Class Name: _____

Registration method (i.e. email, website, address): _____

Rank Day of Class Preference:

Mon: _____ Tues: _____ Weds: _____ Thurs: _____ Fri _____

Number of Weeks per session: _____

Specific Session Dates

fall sessions begin the week of Sept.11 to the week of Dec.11 :

Winter/Spring sessions begin the week of January 8 to spring break (week of March 19) and Spring sessions begin the week of April 2 to the week of May 14.

Class Time: _____

Grades Eligible: _____

Cost per session: _____

Other Schools you offer your classes: _____

STEELE ENRICHMENT PROGRAM POLICIES

TIMELINE:

July 15. Application Due with program information and flyer
Enrichment Coordinator will develop class schedule based on preferences provided in Registration Form. Classroom assignments will be finalized and communicated to providers by August 1.

Enrichment Coordinator will provide summary of information to all Steele families regarding the available classes by registration. PDFs will be posted on website as well as a flyer for an Enrichment packet. Link to classes will be sent electronically in weekly Steele Stallion Newsletter. Steele parents will register and pay directly with each provider. Providers are to ensure all attending class are registered and have paid.

POLICIES: Following is a set of important policies that Steele has implemented for the Enrichment Program. Many of these policies are the result of mandates from the DPS Administration. **Please sign and return the bottom of this letter to indicate you have read and accept these policies.**

BACKGROUND CHECK: EACH instructor must have a CURRENT background check. We will accept background checks that have been conducted for other schools or companies within the last calendar year. You must have approval from DPS Community Use of Facilities. **HYPERLINK** "http://www.dpsk12.org/pdf/facility_use/Application.pdf"http://www.dpsk12.org/pdf/facility_use/Application.pdf

REFERENCES: Please include a list of 3 references, either personal or professional. Please include name, telephone, and email, if available.

RESCHEDULED CLASSES: You must notify parents immediately if your class must be rescheduled. Classes that are not rescheduled will result in a necessary pro-rated refund from you to the parents.

START OF EACH CLASS: Upon entering the building the enrichment teacher will check in with the office for an attendance list and at the start of class attendance must be taken and parents notified immediately if a student is absent from enrichment class and not on the attendance sheet.

END OF EACH CLASS: At the end of each class, the enrichment teacher is responsible for the students and MUST stay with students until they are picked up by an authorized person or taken to after care. Enrichment providers are responsible for implementing late policies if a person is continually late to pick up a student.

CLASS ROSTER: Please provide a paper copy to the office of the instructor's name, contact info as well as a current class roster. This must include: Student Name, Parent Name(s), grade, classroom, home phone number, and cell phone numbers. This needs to be turned in to the main office upon arrival of your first scheduled class. Failure to do so could result in cancellation of your class.

SNACKS: Due to food allergies, please do not provide snacks unless you get a signed release from a parent/guardian of each student in your class.

ENRICHMENT COORDINATOR:

Jennifer Horn, 970.509.9183, hornjen@mac.com, 407 S Williams St. Denver, CO 80209

PRINCIPAL:

Cindy Kapeller, Principal

**Thank you for your dedication to education and for working with Steele Elementary.
Please do not hesitate to call or email if you have any questions.**

We look forward to working with you!

I HAVE READ AND AGREE TO THE POLICIES STATED ABOVE FOR THE STEELE AFTER SCHOOL ENRICHMENT PROGRAM.

Signature & Date

Printed name

For Admin Use:

DAY: _____ **LOCATION:** _____

DATES: _____