

2015



2016

Cowan
(310) 877-9103

Welcome to STAR,

STAR, Inc. is a charitable 501(c)(3) non-profit education organization serving kids, families, schools, and communities.

For your convenience, the Galaxy program can be paid in one full payment, or four or ten equal installments. This takes into consideration all school holidays, vacations and pupil free days. All payments are due according to the payment schedule unless other arrangements have been made with the director.

Please take your time to fill out all paperwork completely. The following seven forms need to be signed and returned to STAR before your child can be accepted to the STAR program:

- ☐ **2015-2016 STAR Contract**
- ☐ **Tuition Contract**
- ☐ **Credit Card Authorization**
- ☐ **Bottom half of STAR Discipline Policy**
- ☐ **Bottom half of Personal Rights**
- ☐ **Bottom half of Parents Rights**
- ☐ **Emergency Card**

A non-refundable \$50 registration fee is required along with the completed contract. Sibling discounts are available, see tuition contract for details. Both items are required to ensure your child a space in STAR for the 2015-2016 school year.

Scholarships are available according to need and availability and are based on a sliding scale payment program.

Any court rulings on child custody agreements must be kept on file at STAR.

A physician's note and the original prescription bottle must be kept at STAR in order for medication to be administered.

Please contact your STAR director for more information.

AFTER SCHOOL CONTRACT 2015-2016

STAR, Inc. is a charitable 501(c)(3) non-profit education organization serving kids, families, schools and communities

CHILD'S NAME: _____ Permit: _____ Grade: _____ Room # _____

Age: _____ Date of Birth: ____/____/____ Sex: M____ F____ Home Language: _____

Home Address: _____ City: _____ Zip: _____

Home Phone#: _____ Home E-Mail Address: _____

Parent/Guardian1 Name: _____ Cell#: _____

Guardian 1 Employment: _____ Position: _____

Address: _____ City: _____ Zip: _____

Work Phone#: _____ Work E-Mail Address: _____

Parent/Guardian2 Name: _____ Cell#: _____

Guardian 2 Employment: _____ Position: _____

Address: _____ City: _____ Zip: _____

Work Phone#: _____ Work E-Mail Address: _____

ABSENCES

STAR is a non-profit charitable program with fixed expenses; therefore, we cannot give credit or make-up days for the absence of your child. We pay staff, custodial services, accountant, etc., whether your child is present or not. When a school holiday occurs or a Natural Disaster, Civil Unrest, Catastrophes, etc., you are responsible for paying that day.

TARDINESS AND PICK UP

Late pick up policy: STAR closes promptly at 6:00 p.m. Repeated tardiness may result in cancellation of your child's enrollment in the program. Excessive late pick up is considered to be late more than 3 times in the school year. Late Fee is \$1.00 per minute after 6:00 p.m. STAR allows a ten-minute grace period. At 6:11 the late fee is \$11.00, 6:12 the fee is \$12.00 etc. The late fee will be charged to your account upon arrival. When late, our staff member will make every effort to contact you or the persons listed as your emergency contacts. If we are unable to make contact by 7:00 p.m., the local police will be contacted, and your child will be taken to the local police station. Staff is not allowed to take children home.

STAR PHOTOGRAPHY & VIDEO CONSENT

Occasionally STAR will use a student's photograph and/or film/video for promotional purposes of the organization.

If you do not want STAR to use your student's photograph and/or film/video for promotional purposes of the organization, please check this box. ☐

CONFIDENTIALITY

STAR is committed to keeping personal family information confidential. We will only release information to parents/guardians. If parents/guardians wish any information shared, they must give STAR permission in writing.

I HAVE READ AND UNDERSTOOD ALL THE INFORMATION INCLUDED IN THIS CONTRACT AND BY SIGNING, I AGREE TO ADHERE TO THE TERMS OF THIS CONTRACT. IT IS FURTHER UNDERSTOOD THAT POLICIES AND TERMS OF THIS CONTRACT MAY BE CHANGED AND AMENDED, AND THAT I SHALL BE INFORMED IN WRITING OF SUCH CHANGES WITH A 30-DAY NOTICE. I HAVE RECEIVED A COPY OF THIS CONTRACT

Parent/Guardian Name (Print): _____

Parent/Guardian Signature: _____ Date: _____

Please Indicate Ethnicity (optional)

☐ American Indian/Alaskan Native ☐ Asian ☐ Hispanic ☐ Black (not of Hispanic origin)
☐ White (not of Hispanic origin) ☐ Filipino ☐ Pacific Islander ☐ Other _____

EMERGENCY CONTACTS

The law requires the person who brings the child to, and removes the child from, the center shall sign the child in/out. Failure to comply with this law may result in suspension or termination of this contract. Your child/children will not be released to any person that is not listed on the emergency contact list. If you need to have your child/children picked up by someone not included in this list, we require both a telephone call from you and a written authorization. **Appropriate identification will be required.**

By law children must be released to either parent even if one parent is not included on this form. STAR must have a copy of any court document that mandates special custody arrangements. Besides guardians previously listed, we will release children only to the following individuals:

Name: _____ Relation: _____

Address: _____ Phone#: _____

Name: _____ Relation: _____

Address: _____ Phone#: _____

Name: _____ Relation: _____

Address: _____ Phone#: _____

EARTHQUAKE OUT OF STATE CONTACT: _____ **PHONE#** _____

In addition, I authorize the STAR Nova staff to sign my child in/out for the purpose of STAR Nova classes

ADDITIONAL INFORMATION

DENTIST'S NAME: _____ Phone# _____

PHYSICIAN'S NAME: _____ Phone# _____

Prescription medications may be administered ONLY when authorization forms are on file with STAR. See Director for details.

Does your child have any medical conditions, allergies, or other special needs or problems of which we should be aware?

No [] Yes [] (Please specify) _____

Does your child have any physical and/or behavioral needs of which we should be aware?

No [] Yes [] (Please specify) _____

STAR will provide services in the manner necessary to provide equal opportunity and access to their programs. If the STAR director becomes aware that a child with a disability needs accommodation(s) to participate in the program, the STAR director will contact the District's Beyond the Bell Branch, which, in consultation with the Division of Special Education, will identify the reasonable accommodation(s), if any, that may be necessary.

EMERGENCIES

In case of an emergency, STAR will make every effort to contact the guardians of the child involved before any treatment is begun. However, in the event we are unable to make contact with the parents or guardians, we require this medical release to be signed by all the participants in the program.

I HEREBY AUTHORIZE THE PHYSICIAN OR HOSPITAL SELECTED BY THE STAR PROGRAM TO HOSPITALIZE, SECURE TREATMENT FOR, AND TO ORDER INJECTION, ANESTHESIA, OR SURGERY FOR MY CHILD.

Name of Insurance: _____ **Policy #:** _____

Parent/Guardian's Name (Print): _____

Parent/Guardian's Signature: _____ **Date:** _____

Credit Card Authorization Form 2015-2016

STAR, Inc. is a charitable 501(c)(3) non-profit education organization serving kids, families, schools and communities

THIS FORM MUST BE COMPLETED IF CHOOSING OPTION B OR C AND/OR PAYING BY CHECK

CHILD'S NAME: _____

GRADE: (In Fall of 2015)

Payment Plan selected:

☐ Option A (one payment)

☐ Option B (four equal payments)

☐ Option C (ten equal payments)

Payments will be paid by:

□ Check

☐ Automatic credit card charge

I hereby authorize STAR to charge my credit card for tuition according to the contract and payment plan

Credit Card #: Exp: / CVV#

Name on Card: _____ Card Type: Visa MC AE

Billing Address: _____

City: _____ State: _____ Zip Code: _____ Phone #: () - _____

Authorizing Signature:_____

If you are not splitting tuition, skip this section

☐ I am splitting tuition with another party

Splitting Tuition

When paying by check and/or credit card, all parties involved must fill out a credit card authorization form. When paying by check, the parties involved are responsible for submitting payments in a timely matter. STAR is not a mediation service and will not intervene or speak on behalf of one parent/guardian or another. All financial obligations need to be worked out between the parent(s)/guardian(s).

Name (print): _____ Relationship : _____

I hereby authorize STAR to charge my credit card for tuition according to the contract and payment plan

Credit Card #: Exp: / CVV#

Name on Card: _____ Card Type: Visa MC AE

Billing Address: _____

City: _____ State: _____ Zip Code: _____ Phone #: (____) _____ - _____

Authorizing Signature: _____



2015-2016 PAYMENT SCHEDULE

OPTION A: One Full Payment

PAYMENT	PAYMENT DUE ON OR BEFORE
Full payment plus registration	Tuesday, August 18, 2015

COUPONS SUBJECT TO RECEIPT OF FULL PAYMENT AND REGISTRATION. COUPONS MAY BE PRORATED

OPTION B: Four Installments

INSTALLMENTS	PAYMENT DUE ON OR BEFORE
B1 plus registration	Tuesday, August 18, 2015
B2	Monday, October 26, 2015
B3	Wednesday, January 27, 2016
B4	Friday, April 8, 2016

COUPONS SUBJECT TO RECEIPT OF REGISTRATION AND INSTALLMENTS PAID ON TIME. COUPONS MAY BE PRORATED

OPTION C: Ten Installments

INSTALLMENTS	PAYMENT DUE ON OR BEFORE
C1 plus registration	Tuesday, August 18, 2015
C2	Wednesday, September 16, 2015
C3	Tuesday, October 13, 2015
C4	Friday, November 06, 2015
C5	Thursday, December 10, 2015
C6	Wednesday, January 27, 2016
C7	Tuesday, February 23, 2016
C8	Friday, March 18, 2016
C9	Thursday, April 21, 2016
C10	Tuesday, May 17, 2016

YEARLY TUITION BASED ON SCHOOL DAYS ONLY

PAYMENT EXPLANATION

For your convenience, the Galaxy program can be paid in one full payment, or four or ten equal installments. This takes into consideration all school holidays, vacations and pupil free days. Payments are due according to the payment schedule chosen.

HOLIDAYS, BREAKS, PUPIL FREE DAYS, UNASSIGNED WORK DAYS

Camps may be available at this site or a site nearby for a discounted rate. Sites may be closed by school district mandate during Thanksgiving/winter/spring break.

STAR will not charge additional fees for minimum days, shortened days, or for early dismissal during conference week.



Discipline & Responsibility Policy

GOALS

The goal of the STAR Program is to provide every child with a happy, safe, and enriching experience everyday. In order to achieve our goal, we need the full cooperation and support of every parent and child. By working together, we can teach the children the skills that will help them make sound decisions and be successful in their social development.

DISCIPLINE POLICY

Dictionary definition of discipline: To guide, train, practice, correct, and teach. The STAR Program follows the “STAR CAN DO DISCIPLINE PROGRAM.” This highly-acclaimed system uses a positive approach for guiding children. All staff members are required to take this training. The Can Do Discipline training has three components: the Rules, the Reward System, and the Consequences.

The Rules

- Come directly to STAR
- Follow directions
- Stay in your area
- Respect others: no fighting, inappropriate physical contact, name calling or other activities that take the right to be happy away from any child.
- No inappropriate behavior or touching, including gestures and signals.
- Respect the property of others.

The Reward System

Each STAR Program will implement a reward system to positively reward good behavior.

Consequences

If a child chooses to repeatedly break the rules, a formal meeting with the parent will be set up. If the child breaks the rules after this meeting, a one-day suspension will follow. Any further infractions of the rules will result in the cancellation of the child’s registration.

(4/2015)



(More Information on Back)

Please remember to sign and return the “tear off” section on the other side of this sheet.

Keep the remaining portion for your records.

Thank you

(4/2015)

BATHROOM PROCEDURES

Children are taken to the bathroom on a regular basis or as needed. A staff member will accompany each child to the bathroom. Restrooms are to be used for their intended purpose only. Restrooms are not an area for play!

MORE SERIOUS BEHAVIOR & CONSEQUENCES

Biting, spitting, bullying tactics, teasing, intimidation through threats, physical fights, leaving the group or campus, defacing property, vandalism, lying, stealing, making false accusations, swearing, blatant disrespect for children, parents, and staff are considered more serious offenses. A first time infraction shall result in an immediate one-day suspension, and a second time infraction will result in the non-refundable cancellation of registration. Parents may be called to pick up their child immediately from the program if the child is out of control and will not follow instructions. Any behavior that endangers the children or staff will be cause for immediate cancellation of registration.

PARENT RESPONSIBILITY

Your cooperation is needed in the following areas:

- Direct your child to come directly to the program on days enrolled
- Your child must be signed in and/or out every day by an authorized adult listed on your contract. Your child will not be released otherwise.
- Go over the rules with your child
- If corrective actions are needed, such as suspension, please follow up at home with a discussion about the issue at hand. Be supportive. We are working together for the welfare and healthy development of your child's social skills.
- Parents are their children's first teachers and primary role models. Any parent who uses abusive language or behavior towards staff, other parents, and/or children risks registration cancellation.
- Parents are not allowed to confront other children about any incident. The law protects children from this type of action.

IMPORTANT

To ensure we are providing the best service possible for the children, we review our policies and procedures on a regular basis. Therefore, this contract may be modified at any time.

(4/2015)



STAR DISCIPLINE AND RESPONSIBILITY POLICY AGREEMENT

I have read and understood the Discipline and Responsibility Policy of the STAR Program and hereby agree to follow the terms stated in these policies.

Parent's Name (please print): _____

Parent's Signature: _____

Child's Name: _____

Child's Signature: _____

Date: _____

(4/2015)

PERSONAL RIGHTS

Child Care Centers

Personal Rights, See Section 101223 for waiver conditions applicable to Child Care Centers.

- (a) Child Care Centers. Each child receiving services from a Child Care Center shall have rights which include, but are not limited to, the following:
- (1) To be accorded dignity in his/her personal relationships with staff and other persons.
 - (2) To be accorded safe, healthful and comfortable accommodations, furnishings and equipment to meet his/her needs.
 - (3) To be free from corporal or unusual punishment, infliction of pain, humiliation, intimidation, ridicule, coercion, threat, mental abuse, or other actions of a punitive nature, including but not limited to: interference with daily living functions, including eating, sleeping, or toileting; or withholding of shelter, clothing, medication or aids to physical functioning.
 - (4) To be informed, and to have his/her authorized representative, if any, informed by the licensee of the provisions of law regarding complaints including, but not limited to, the address and telephone number of the complaint receiving unit of the licensing agency and of information regarding confidentiality.
 - (5) To be free to attend religious services or activities of his/her choice and to have visits from the spiritual advisor of his/her choice. Attendance at religious services, either in or outside the facility, shall be on a completely voluntary basis. In Child Care Centers, decisions concerning attendance at religious services or visits from spiritual advisors shall be made by the parent(s), or guardian(s) of the child.
 - (6) Not to be locked in any room, building, or facility premises by day or night.
 - (7) Not to be placed in any restraining device, except a supportive restraint approved in advance by the licensing agency.

THE REPRESENTATIVE/PARENT/GUARDIAN HAS THE RIGHT TO BE INFORMED OF THE APPROPRIATE LICENSING AGENCY TO CONTACT REGARDING COMPLAINTS, WHICH IS:

NAME

Department of Social Services LA Northwest Community Care Licensing Division

ADDRESS

6167 Bristol Parkway Ste 400

CITY

Culver City

ZIP CODE

90230

AREA CODE/TELEPHONE NUMBER

310-337-4333

DETACH HERE

TO: PARENT/GUARDIAN/CHILD OR AUTHORIZED REPRESENTATIVE:

PLACE IN CHILD'S FILE

Upon satisfactory and full disclosure of the personal rights as explained, complete the following acknowledgment:

ACKNOWLEDGMENT: I/We have been personally advised of, and have received a copy of the personal rights contained in the California Code of Regulations, Title 22, at the time of admission to:

(PRINT THE NAME OF THE FACILITY)

(PRINT THE ADDRESS OF THE FACILITY)

(PRINT THE NAME OF THE CHILD)

(SIGNATURE OF THE REPRESENTATIVE/PARENT/GUARDIAN)

(TITLE OF THE REPRESENTATIVE/PARENT/GUARDIAN)

(DATE)

IMPORTANT INFORMATION FOR PARENTS

CAREGIVER BACKGROUND CHECK PROCESS CALIFORNIA DEPARTMENT OF SOCIAL SERVICES

The California Department of Social Services works to protect the safety of children in child care by licensing child care centers and family child care homes. Our highest priority is to be sure that children are in safe and healthy child care settings. California law requires a background check for any adult who owns, lives in, or works in a licensed child care home or center. Each of these adults must submit fingerprints so that a background check can be done to see if they have any history of crime. If we find that a person has been convicted of a crime other than a minor traffic violation, he/she cannot work or live in the licensed child care home or center unless approved by the Department. This approval is called an exemption.

A person convicted of a crime such as murder, rape, torture, kidnapping, crimes of sexual violence or molestation against children cannot by law be given an exemption that would allow them to own, live in or work in a licensed child care home or center. If the crime was a felony or a serious misdemeanor, the person must leave the facility while the request is being reviewed. If the crime is less serious, he/she may be allowed to remain in the licensed child care home or center while the exemption request is being reviewed.

How the Exemption Request is Reviewed

We request information from police departments, the FBI and the courts about the person's record. We consider the type of crime, how many crimes there were, how long ago the crime happened and whether the person has been honest in what they told us.

The person who needs the exemption must provide information about:

- The crime
- What they have done to change their life and obey the law
- Whether they are working, going to school, or receiving training
- Whether they have successfully completed a counseling or rehabilitation program

The person also gives us reference letters from people who aren't related to them who know about their history and their life now.

We look at all these things very carefully in making our decision on exemptions. By law this information cannot be shared with the public.

How to Obtain More Information

As a parent or authorized representative of a child in licensed child care, you have the right to ask the licensed child care home or center whether anyone working or living there has an exemption. If you request this information, and there is a person with an exemption, the child care home or center must tell you the person's name and how he or she is involved with the home or center and give you the name, address, and telephone number of the local licensing office. You may also get the person's name by contacting the local licensing office. You may find the address and phone number on our website. The website address is http://ccl.dss.cahwnet.gov/RegionalOf_1829.htm

IMPORTANT INFORMATION

CAREGIVER BACKGROUND CHECK INFORMATION

The law requires that the Community Care Licensing Division check the criminal background of all adults who apply for a license to operate a community care facility. We also check the criminal background of all adults who want to work, reside in or have contact with clients being cared for in a community care facility.

What is a background check?

As part of the background check process you must be fingerprinted and tell whether you have ever been convicted of a crime other than a minor traffic violation. The Department of Justice and the FBI will check your fingerprints against their criminal record information. If you will have contact with children, your name will be checked against the Child Abuse Central Index registry. This is a listing of people who have been reported for suspected child abuse. If you have not been convicted of a crime and have no child abuse history, you will be given a "clearance."

What if I have a criminal conviction?

If you were ever convicted of a crime, other than a minor traffic violation, even if it happened a long time ago, you cannot own, live or work (including some volunteers) in a facility unless we give you an "exemption." If the Department of Justice notifies us that you were convicted of a crime, we will notify the facility operator that an exemption is needed. If you were convicted of a serious crime or if you are on supervised probation after being convicted of a crime, you probably won't be given an exemption.

You do not qualify for a criminal record exemption if you have ever been convicted of a serious crime such as robbery, sexual battery, child abuse, elder or dependent adult abuse, rape, first degree burglary, arson, or kidnapping. These kinds of crimes are nonexemptible and if you were convicted of one of them, by law you will never be allowed in a facility.

How do I get a criminal record exemption?

As part of the request for an exemption, the facility operator or you must send us convincing proof that you are of good character in spite of your conviction. We will review any information you submit as well as the number and type of crimes committed, how long ago the crime(s) happened, what kind of work you will be doing and whether you will be working with children, adults, or the elderly. If we find that you were not truthful in the information you submitted for your exemption, we will deny your exemption request. In most cases, if you are currently on supervised probation or on parole you will not be granted an exemption. If your exemption is denied, and you are married to or living with someone who is applying for a license and care will be provided in your home, his or her application will be denied because everyone who lives in the home must have a clearance or exemption. If a criminal record exemption is granted to you and you later move, or want to work in a different facility, your exemption will be re-evaluated based on your new role and our current laws, regulations, and policies. If you are arrested or convicted after an exemption is granted to you, your exemption may be cancelled. If you are married to or living with someone who is licensed, and care is provided in your home, the facility license may be suspended or revoked.

You are strongly encouraged to read the licensing criminal record exemption regulations to find out the amount of time that must pass following your conviction, before you can qualify for an exemption. Some convictions require longer periods of time following conviction than others. The regulations and other information can be found on our web site at www.cdcd.ca.gov.

How long does the criminal record exemption process take to complete?

If you do not have a criminal record, a clearance is normally available in a few days. If an exemption is needed, it may take three months or longer to complete the process.

DISCLOSURE OF CRIMINAL RECORD EXEMPTION INFORMATION UNDER THE CALIFORNIA PUBLIC RECORDS ACT

If you are granted a criminal record exemption, your name will be given out to the public, upon request. If you own a facility and you have staff, residents or volunteers who have a criminal record exemption, the name of your facility will be given out to the public, upon request.

**CHILD CARE CENTER
NOTIFICATION OF PARENTS' RIGHTS****PARENTS' RIGHTS**

As a Parent/Authorized Representative, you have the right to:

1. Enter and inspect the child care center without advance notice whenever children are in care.
2. File a complaint against the licensee with the licensing office and review the licensee's public file kept by the licensing office.
3. Review, at the child care center, reports of licensing visits and substantiated complaints against the licensee made during the last three years.
4. Complain to the licensing office and inspect the child care center without discrimination or retaliation against you or your child.
5. Request in writing that a parent not be allowed to visit your child or take your child from the child care center, provided you have shown a certified copy of a court order.
6. Receive from the licensee the name, address and telephone number of the local licensing office.

Licensing Office Name: LA Northwest Community Care Licensing Division

Licensing Office Address: 6167 Bristol Parkway Ste 400, Culver City, 90230

Licensing Office Telephone #: 310 337-4333

7. Be informed by the licensee, upon request, of the name and type of association to the child care center for any adult who has been granted a criminal record exemption, and that the name of the person may also be obtained by contacting the local licensing office.
8. Receive, from the licensee, the Caregiver Background Check Process form.

NOTE: CALIFORNIA STATE LAW PROVIDES THAT THE LICENSEE MAY DENY ACCESS TO THE CHILD CARE CENTER TO A PARENT/AUTHORIZED REPRESENTATIVE IF THE BEHAVIOR OF THE PARENT/AUTHORIZED REPRESENTATIVE POSES A RISK TO CHILDREN IN CARE.

For the Department of Justice "Registered Sex Offender" database, go to www.meganslaw.ca.gov

LIC 995 (9/08)

(Detach Here - Give Upper Portion to Parents)

ACKNOWLEDGEMENT OF NOTIFICATION OF PARENTS' RIGHTS
(Parent/Authorized Representative Signature Required)

I, the parent/authorized representative of _____, have received a copy of the "CHILD CARE CENTER NOTIFICATION OF PARENTS' RIGHTS" and the CAREGIVER BACKGROUND CHECK PROCESS form from the licensee.

Name of Child Care Center

Signature (Parent/Authorized Representative)

Date

NOTE: This Acknowledgement must be kept in child's file and a copy of the Notification given to parent/authorized representative.

For the Department of Justice "Registered Sex Offender" database go to www.meganslaw.ca.gov