

# ***GREENON LOCAL SCHOOLS***

## **LATCHKEY PROGRAM**



**2025-2026**

## **PARENT HANDBOOK**

Dear Families,

Welcome to our Latchkey Program! We are excited to offer our services to you both before and after school at Greenon Elementary. We are confident that you will find Latchkey to be a quality program. It is well structured with engaging activities, study periods, free time, and/or craft periods.

Students will be supervised by our energetic, competent staff members at all times.

If you have any questions, please call the school's office. Your comments, questions, and suggestions are welcome and appreciated.

Thank you,

Mr. Phelps

Greenon Elementary Principal

# GREENON LOCAL SCHOOLS LATCHKEY PROGRAM PARENT HANDBOOK

## CONTENTS:

1. Letter to Parents
2. Philosophy
3. Program Goals
4. Program Schedule
5. Policies & Procedures
6. Health and Safety Procedures
7. Hours of Operation
8. Snacks
9. School Closings, School Delays, Early Dismissals
10. Transportation
11. Discipline
12. Fees/Payment
13. Medications
14. School Calendar

## PHILOSOPHY

The Latchkey Program is designed to provide quality care before and after school for working parents who prefer having their children participate in a school-sponsored program.

The program will provide a structured and supervised environment conducive to positive peer interaction and enrichment activities.

A key concept of the program will be a warm setting for students to play informally, complete homework, and relax under the guidance of a competent and dedicated staff.

## PROGRAM GOALS

In a warm, informal setting, the program will provide:

1. Opportunities to engage in supervised activities;
2. Time and space to engage in reading and homework;
3. Time and space to study;
4. Time and space to engage in large-muscle activities and games;
5. Encouragement to be creative;
6. Time to discuss the day's activities with staff and peers.

## SUGGESTED PROGRAM ACTIVITIES

- Roll Call
- Restroom Break, as needed
- "Noisy-Active" Time in gymnasium
- Snack Time
- Quiet/Homework Period

## POLICIES AND PROCEDURES

*If your child is scheduled to stay in Latchkey every day (as indicated on registration agreement), we will keep your child every day unless notified by written note or phone call – no exceptions.*

### Sign-In Policy:

If a parent drops the student off in the morning or as soon as his/her class is dismissed at the end of the day, the student must report directly to the Latchkey room.

### Who is Authorized to Pick Up a Child?

Only persons authorized in writing by the parents may pick up a child. This is for your child's protection. If someone else is picking up your child, please notify the program director in writing. If your child will need to leave earlier than usual with someone not named on your enrollment form due to situations such as a meeting, etc., please send a note with your child or send a message through the school's secretary.

### What Happens If a Child is Ill?

A sick child is to be kept home for his/her own well-being and that of others.

### What Happens if My Child is Injured at the Program Site?

If your child is injured, a staff member will take whatever steps necessary to obtain emergency medical care. These steps include, but are not limited to, the following:

1. Attempts to contact a parent or guardian.
2. Attempts to contact any of the persons listed on the emergency information form you completed for us.

If we cannot contact you, the staff will do any or all of the following:

1. Call 911.
2. Send the child to an emergency hospital in an ambulance, if deemed necessary by the EMS team, at the parent's cost.

## HEALTH AND SAFETY POLICIES

Emergencies and accidents will be handled as requested by the parent per emergency forms.

The staff will treat minor accidents (cuts, etc.) and have a first-aid box in the Latchkey room.

Any child who becomes ill while at Latchkey will be separated from the other children while arrangements are made for the child to go home. The staff will determine the illness. A fever of 100 degrees or higher, vomiting, and/or diarrhea indicate the child should be sent home.

No child shall ever be left alone or unsupervised. A working telephone is located in the Latchkey Program Room, which is immediately accessible at all times.

Fire drills will be conducted at varying times during the school day. A fire emergency and tornado alert plan will be posted in the Latchkey Room explaining the emergency action plan and a diagram showing evacuation routes and/or shelters.

## HOURS AND DAYS OF OPERATION

The Latchkey Program will operate Monday through Friday from 6:30 a.m. to 8:15 a.m.; and from 3:15 p.m. to 5:30 p.m. Parents whose children remain past 5:30 p.m. must pay an overtime fee as follows:

1. The first 1-15 minutes overtime = \$10.00 per family.
2. Each additional 1-15 minutes = \$ 5.00 per child.

*An overtime fee will be assessed if pickup is after 5:30 p.m. A parent must notify Latchkey by 4:45 p.m. if they are going to be late. If not notified and Latchkey personnel are not able to reach anyone on the pickup list, dismissal from the program may occur.*

## SNACKS

Your child will receive a snack. The staff will serve a variety of tasty and appealing snacks. If your child has any dietary restrictions or food allergies, be sure to indicate them in writing to the staff.

## SCHOOL CLOSINGS

When the Greenon Local Schools are closed due to snow, inclement weather or other calamities, the Latchkey Program will be canceled. Please complete a School Closing/Early Release Information Form when your child is admitted to the program.

## SCHOOL DELAYS

Morning Latchkey is canceled in the event of any school delay. Please make proper arrangements for your child if this occurs.

## EARLY DISMISSALS

Latchkey services will not be provided on any early dismissal by the school due to emergency weather conditions. Latchkey will be provided on scheduled 2-hour early dismissals. We will make every attempt to notify you about early dismissals and ensure that your child follows your instructions as indicated on the School Closing/Delay Information Form for early dismissal.

Please make proper arrangements for your child if this occurs.

## TRANSPORTATION

You are responsible for your child's transportation home from the After-School Latchkey Program.

## DISCIPLINE

Each child will be treated with respect and concern for his/her developmental needs by the staff and by other children. The staff expects each child to behave in a respectful and well-disciplined manner. The Greenon Local standards governing student conduct will be followed in the Latchkey program as well as the behavioral guidelines that follow.

1. The child must report directly to the Latchkey Room as soon as s/he arrives in the morning or as soon as class is dismissed each day.
2. The child will sign in with the staff person.
3. No chewing gum is permitted.
4. There will be NO running permitted inside the building, aside from within the gymnasium.
5. The child must have staff permission to leave the room for any reason.
6. The child must keep shoes on at all times.
7. The child must remain in an area designated by staff when inside or outside the building.
8. There will be no climbing, crawling, laying or standing on bleachers or tables. Children may sit in open sections.
- 9.. No child is to enter any classroom, storage room, or any area without the consent of the staff.
10. The child must not leave the school building without an authorized adult who has signed him/her out in the presence of a staff member.
11. Playground equipment must be used in the proper manner -- for its intended use only.
12. No harmful physical contact, such as hitting, kicking, pushing, tripping, biting, spitting, etc. will be permitted. This type of behavior may result in immediate suspension or expulsion from the Latchkey program. Building Administrator(s) will be consulted to address the consequences.
13. Disruptive behavior will not be tolerated and can result in short term suspension or expulsion from the Latchkey program. Building Administrator(s) will be consulted to address the consequences.
14. No parent is to confront or discipline another child during Latchkey. If you feel a problem exists, please discuss it with the Latchkey Aide.
15. All Latchkey students are expected to be toilet trained.
16. Only Greenon Local students may attend the Greenon Local Latchkey program.
17. Students must be able to participate in Latchkey activities independently. (One-on-one supervision cannot be provided.)
20. Cooperation with other students in the program is an absolute MUST.

Disruptive behavior with classmates or staff will not be tolerated. If such disruptive behavior occurs, the staff will call you to pick up your child immediately and will schedule a conference. At that time, the staff will discuss the following:

1. Behavior displayed;
2. Suggestions for improving behavior;
3. Recommendation for suspension or expulsion from the program.

## FEES

|                                  |                             |
|----------------------------------|-----------------------------|
| Flat rate for AM and PM Latchkey | \$3.50 per hour/per student |
|----------------------------------|-----------------------------|

Charges are figured on a quarter ( $\frac{1}{4}$ ) hour basis, based on daily attendance and the number of children per family who attend per day. Check payments are preferred.

### Greenon Latchkey Program Hours

Morning Care Hours: 6:30 a.m.to 8:15 a.m.

Afternoon Care Hours: 3:15 p.m.to 5:30 p.m.

## PAYMENT

You must make regular payments as scheduled by the staff, weekly or bi-weekly.

\*If you are experiencing financial difficulties, please notify the staff immediately. If you are delinquent in payment, you will receive a notice. If you do not make payment in full or present an acceptable payment plan, services will be discontinued.\*

Charges for occasional use of Latchkey services must be paid on the day of service (2 hour early release, late pick up, etc.).

## MEDICATIONS

In cases where prescribed medication must be given during Latchkey hours, the following procedures are required:

- A. The Latchkey aides receive a written request signed by the parent or guardian, that the drug be administered to the student. There is a special form for this available in the school office titled "Parent Release for Administration of Medicine".
- B. The Latchkey aides receive a statement signed by the physician that includes the following:
  - 1. The name and address of the student;
  - 2. The school the student is enrolled in;
  - 3. The name of the drug;
  - 4. Dosage and time(s) to be administered;
  - 5. The dates to begin and end administration of the medication;
  - 6. Possible severe adverse reactions to the drug which should be reported to the physician;
  - 7. An emergency phone number where the physician can be reached;
  - 8. And any special instructions for administration of the medication.

- C. All statements are to be filed in a designated area.
- D. The Latchkey aides shall be responsible for storing the medication in a locked storage space or in a refrigerator, if applicable, as long as the refrigerator is not used by students.
- E. If any of the information originally provided by the physician changes, the parent or guardian must agree to submit a revised statement signed by the physician.
- F. The drug shall be received by the Latchkey aides, from the parents only, in the container in which it was dispensed by the physician or licensed pharmacist.  
(Handled by Adults Only)

\*Oral medicines are to be administered by the Latchkey aides who are responsible for all necessary and appropriate hand washing, both before and after administering such medications.

**REGISTRATION and CONSENT AGREEMENT**  
**Greenon Latchkey Program**  
**2025-2026**

Today's Date \_\_\_\_\_  
\_\_\_\_\_

First Date of Attendance \_\_\_\_\_

Amount Paid \_\_\_\_\_  
\_\_\_\_\_

Receipt # \_\_\_\_\_

(\$15.00 per family Non  
refundable Fee)

| Child's Name | Grade | Date of Birth | Sex | <u>Morning</u> | <u>Afternoon</u> |
|--------------|-------|---------------|-----|----------------|------------------|
| _____        | _____ | _____         | —   | Yes No         | Yes No (Circle)  |
| _____        | _____ | _____         | —   | Yes No         | Yes No (Circle)  |
| _____        | _____ | _____         | —   | Yes No         | Yes No (Circle)  |

**Known Allergies:** \_\_\_\_\_

Greenon Latchkey Program:

A.M. Hours are: 6:30 a.m.to 8:15 a.m.

P.M. Hours are: 3:15 p.m.to **5:30 p.m.**

**Please fill in Completely:**

Morning Latchkey

Afternoon Latchkey

Days to attend (Please circle) M T W TH F

Days to attend (Please circle) M T W TH F

Parent(s) or guardian(s) with whom child resides:

Name \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_

Cell Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Name/Address of employer:

\_\_\_\_\_

Work phone: \_\_\_\_\_

Person responsible for payment, if different from above:

Name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

Person(s) authorized to call regarding your child:

1. Name\_\_\_\_\_ Phone Number\_\_\_\_\_
2. Name\_\_\_\_\_ Phone Number\_\_\_\_\_
3. Name\_\_\_\_\_ Phone Number\_\_\_\_\_
4. Name\_\_\_\_\_ Phone Number\_\_\_\_\_

\*Any changes in this list **MUST** be received from you in writing. **NO** unauthorized person will be allowed to pick up your child(ren).\*

1. The Latchkey School Care Program will assume full responsibility for my child(ren) from the time s/he arrives at the program until the child is called for by me or another authorized person. The child will be signed in upon arrival and be signed out by an authorized person.
2. I understand I am responsible for providing transportation home for my child(ren).
3. **An overtime fee will be assessed if pickup is after 5:30 p.m. Parents must notify Latchkey by 4:45 p.m. if going to be late. If not notified and Latchkey personnel are not able to reach anyone on the pickup list, dismissal from the program may occur.**
4. Parents/guardians whose children remain past the closing of the program must pay the following overtime fees:  
**1-15 minutes overtime = \$10.00 per family**  
**Each additional 1-15 minutes = \$ 5.00 per child**
5. I understand that during vacation periods and days that schools are closed, or delayed by two (2) hours, because of inclement weather, there will be **NO** Latchkey Program. (Refer to Latchkey Program Parent Handbook.)
- 6a. I agree to pay on a weekly or bi-weekly basis.  
**BALANCES MUST BE PAID IN FULL WEEKLY OR BI-WEEKLY, AS AGREED OR SERVICES WILL BE DENIED UNTIL PAYMENT IS MADE IN FULL.**  
***Charges for occasional use of Latchkey services must be paid on the day of service.***
- 6b. I agree to pay before the 1st of each month for unlimited childcare for my students. Total to be paid before the 1st of each month for unlimited childcare\_\_\_\_\_
- If payments for unlimited childcare are not paid before the 1st of the month, families will pay the daily rate, per child in the latchkey services.**
7. If my child is having problems adjusting to the program, a conference will be arranged between the staff and the family.
8. In the event of illness, vacation, or other absences such as Scouts, music lessons, and other out -of-school activities, the Latchkey Program staff will be notified. Communication with the Latchkey School Program staff can be made through the Greenon Main Office (937)864-7348.

9. **This registration must be accompanied by a completed Emergency Medical Form, and School Closing Information Form. Please keep Latchkey personnel informed of any changes such as phone #, address, etc.**
10. Latchkey Program operates Monday through Friday when school is in session
11. Check payments are preferred, and should be made out to Greenon Local Schools.
12. Ages and grades of children to be served: Grades K through 6.

I agree to adhere to the Latchkey School Care Program registration policies as listed in the Registration Agreement and the Latchkey Program Parent Handbook. I give my child permission to participate fully in this program. I further acknowledge that I have read, understand, and agree to abide by all rules, regulations, and procedures developed by the Greenon Local School District.

Signature: \_\_\_\_\_

Date \_\_\_\_\_

Greenon Local Schools 120 S. Xenia St. Enon, Ohio 45323

**\*\*\* NON REFUNDABLE REGISTRATION FEE  
\$15.00 per family \*\***