

123 Mohawk St. Cohoes, NY 12047

C.A.R.E.S. Tutoring Center
Character and Academic Resources for Educational Success

March 22, 2006

Dear Parent/ Legal Guardian:

The Character and Academic Resources for Educational Success (CARES) tutoring center is an after-school tutorial program for children in grades 1-12. Our goal is to offer your child homework assistance, while providing resources to enhance and develop effective learning strategies. Positive character traits will also be modeled and reinforced through mentoring and by rewarding those traits designated as "Character trait of the month" by the Cohoes City School District.

We are excited that you have decided to enroll your child as a member in the CARES pilot program. It is our intention to help you as you help your child become a successful learner, gaining confidence in his or her academic abilities. We share your desire to see your child have good grades and a well-balanced character, and will work together with your family and your child's school to help your child along the path to lifelong learning. Please complete the following forms to register your child:

- Pre-registration form
- Health history
- Medical/ publicity waiver
- Code of conduct

Additionally, sit down with your child for a few minutes and help him or her to fill out the academic assessment, which asks for their opinion on academic strengths, weaknesses, and interests. We use this form as a tool for designing daily discussions and providing extra reading materials which address their specific needs and interests.

Sincerely,

Melody Nadeau
CARES Program Director

C.A.R.E.S. Tutoring Center
123 Mohawk Street, Cohoes, NY 12047

Pre-Registration Form

(Please Print)

Child's Name: _____

Parent's Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Work Phone: _____ Cell or
other contact number: _____

Emergency Contact: Name _____ Phone: _____

Transportation is the sole responsibility of the student's parent(s) or legal guardian(s). The tutor may not transport the child to or from the tutoring site.

How will your child get to and from the CARES tutoring center?

Individuals with permission to pick up your child (must show ID at the door):

Name	Relationship to child
_____	_____
_____	_____
_____	_____

Please specify anyone who is **NOT** permitted to pick up your child:

X _____
Parent's signature

Date

Student's Name: _____ Grade: _____
Parent's Name: _____

Attendance Policy

1. The CARES tutoring center is not a drop-in program. Your child is expected to be at the center on time for their tutoring sessions or appointments.
2. The CARES tutoring center follows the Cohoes City School district calendar and emergency closing schedule. For emergency closings, listen to radio stations WGY, WTRY, WROW, WFLY, WPYX, and WGNA, or watch WRGB (TV-6), WTEN (TV-10), or WNYT (TV-13). If Cohoes Schools are closed, we are closed.
3. If your child is going to be absent or late, please call Melody Nadeau at 326-4478 or 396-7379.
4. If your child is expected, but does not arrive by 3:30 pm or one-half hour after his or her scheduled tutoring appointment, we will call you.

Academic Information

School _____ Grade _____
Guidance Counselor _____

Areas my child requests assistance in:

Course (Please check)	Teacher's Name
Math _____	
Science _____	
English _____	
Reading _____	
Writing _____	
Social Studies _____	
Foreign Language (Specify) _____	
Other _____	

In your opinion, what is your child's school performance?

1: Excellent 2: Good 3: Average 4: Below Average 5: Failing

MATH _____ SCIENCE _____ ENGLISH _____
READING _____ WRITING _____ SOCIAL STUDIES _____

Student's Name: _____ Grade: _____
Parent's Name: _____

Why do you want your child to attend the CARES Tutoring Center?

How do you think your child will benefit from our program?

Does your child have behavioral, emotional, or learning problems?

Your child's strengths:

Your child's weaknesses:

Anything else you would like us to know about your child:

I, _____ the parent/ legal guardian of _____
(Print name) (Child's name)

agree to provide the CARES tutoring center staff with a copy of my child's current report cards and copies of any special assignments, tests, quizzes, etc. applicable to his or her academic advancement.

X _____
Signature

Date

C.A.R.E.S. Tutoring Center

Code of Conduct

Consequences:

The violation of these standards will result in disciplinary action. Program staff will issue the following penalties as a consequence of inappropriate behavior:

1st violation: Warning

2nd violation: Your daily sticker will be taken away

3rd violation: Time-out from activities; one minute per year your age

4th violation: Your parents will be called and you will be suspended for one full program session

5th violation: A conference is called with your parents to discuss permanent expulsion from the program. *

***This step is exercised immediately upon discovery of possession or use of illegal substances or weapons, as noted above.**

A C.A.R.E.S. parent is expected to:

- Be active in your child's education by engaging in suggested activities at home
- Provide C.A.R.E.S. tutoring center with your child's report cards, progress reports, and applicable tests or quizzes
- Support our **Code of Conduct**
- Attend parent conferences as requested
- Communicate with C.A.R.E.S. staff regarding changes or special circumstances regarding your child
- Treat staff members with respect, including picking your child up on time, using appropriate language with staff and children, and otherwise avoiding confrontational behaviors.

A C.A.R.E.S. volunteer is expected to:

- Respect each child as an individual with different abilities and learning style
- Serve as a role model
- **NOT** do the student's homework
- **NOT** work harder than the student
- Make a commitment to the program, and show this by regular, timely attendance
- Support each student's right to confidentiality
- Academically coach each student in weak subjects
- Avoid "Babysitting" by engaging students in educational activities
- Support the discipline policy and enforce consequences equally with each student

C.A.R.E.S. Tutoring Center
Code of Conduct

Responsibility of All:

Understand that the possession or use of any controlled substances, alcohol, tobacco, or weapons is forbidden in or on the premises of the C.A.R.E.S. tutoring center. We are a smoke-free, drug-free facility. Staff, volunteers, parents, and students are forbidden from using or possessing any of these substances at the facility or on any C.A.R.E.S. sponsored event or field trip. Adults arriving under the influence of alcohol or drugs will be asked to leave immediately, and if necessary, alternative arrangements will be made for picking up your child.

X _____ (Child's signature)	_____ (Date)
X _____ (Parent's signature)	_____ (Date)
X _____ (CARES Representative)	_____ (Date)

Personal Health History (Confidential)

Student's Name: _____ Date of Birth: ____/____/____
Parent/ Guardian Name: _____

Although your child will be attending the CARES Tutoring Center for a limited time period, it is important that program staff be aware of any specific health issues that might interfere with your child's learning and interactions with others. Therefore, please review the list below and indicate any issues that staff should be made aware of.

ALLERGIES:

Please check and list any reaction to allergies below:

- _____ Asthma _____
- _____ Specific foods and additives _____
- _____ Insect bites/ stings _____
- _____ Ivy, Oak, etc. _____
- _____ Other _____

CHRONIC CONDITIONS

Please explain areas checked below:

- _____ Seizure disorder _____
- _____ Diabetes _____
- _____ Hearing problems _____
- _____ Vision problems _____
- _____ Behavioral or learning problems requiring medication _____
- _____ Other _____

If medication is to be taken, state reason, name of medication, dosage, and time. Please include a signed copy of physician's orders to be kept on file at the CARES facility.
(all medication must be in original container, properly labeled)

RECENT SURGERY OR SERIOUS INJURIES

PLEASE NOTE ANY HEALTH CONCERNS NOT LISTED ABOVE:

Family Physician: _____ **Phone:** _____

Insurance Company: _____ **Policy #** _____

Hospital Preference: _____

Emergency Contact: _____ Phone: _____
Relationship: _____
Parent/ Guardian Signature: _____ Date: ___/___/___

C.A.R.E.S. Tutoring Center
Medical & Publicity Waiver

Child's Full Name (Please Print): _____
Address: _____
City: _____ State: _____ Zip: _____

Home Phone: _____ Parent's work phone: _____

FIRST: CARES Tutoring Center shall exercise every reasonable precaution to ensure the health and safety of each child and agrees to take no extraordinary action pertaining to his or her welfare without consulting the parent or legal guardian except as indicated by emergency conditions.

SECOND: Parents affirm that the said minor is not now afflicted with any disorder or disease which would adversely affect his or her participation in the program, or the welfare of other program participants.

THIRD: Parents authorize the CARES Tutoring Center staff to secure the best treatment possible in the event of sudden illness or injury, and on the basis of professional medical counsel, to enter the minor child in a hospital, medical clinic, or other medical treatment facility, should this action be necessary to ensure the health and safety of the child. Such determination shall be made solely at the discretion of the CARES Tutoring Center through its representative.

FOURTH: Parents individually and as guardians of the above minor acquit, discharge, and release CARES Tutoring Center, its staff, volunteers, representatives, and agents of all liability, claims, and damages of any type as a result of accident or injury involving the above mentioned minor child.

FIFTH: On occasion, the CARES Tutoring Center takes photographs or makes video recordings of youth and/ or adults involved in its program activities. In addition, such photographs and/ or video recordings may be used in publications, advertising materials, or other publicity venues (newspapers, television, etc.). In addition, local news agencies may wish to use the child's likeness and name in reports concerning the CARES Tutoring Center. I consent to the use of any audio or visual representations of my child to be used as staff and/or representatives of the CARES Tutoring Center see fit. I understand that I will be notified of any such publicity uses of my child's likeness before events occur, or as soon as possible afterward.

Parent/ Guardian Signatures: Medical Waiver: _____
Publicity Waiver: _____

Relationship to child named above: _____
Date: _____

Name _____

Grade _____

Academic Interview and dialog
1st Assessment Date _____

Do you like school? Yes _____ No _____

What do you like about school? _____

What don't you like about school? _____

How are you at math? _____

What math functions are you good at (multiplication, division, addition/ subtraction, fractions, decimals, etc.)? _____

What aren't you good at? _____

Are you good at reading? Yes _____ No _____

Do you have trouble reading individual words? Yes _____ No _____

Do you understand what you read? Yes _____ No _____

Do you enjoy reading? Yes _____ No _____

Can you write? Yes _____ No _____

Print? Yes _____ No _____

Spell? Yes _____ No _____

Cursive? Yes _____ No _____

Is your writing neat? Yes _____ No _____

How are you at science? _____

How are you at social studies? _____

Are you good with computers? _____

What would you like to learn more about? _____

NO Homework and/ or Study Plan = NO Entrance

GUIDELINES:

1. All Students are required to bring backpacks or binders to each tutoring session.
2. Backpacks and binders should include the child's day-to-day school materials such as class folders, notebooks, pencils, etc.
3. Students without or with empty binders or backpacks will not be allowed to attend the session and will be sent home according to his or her individual transportation plan. The child's parent(s) will be called to inform them of the child's situation.
4. Students attending without specific, daily homework are required to come with a study plan* sufficient for the second hour of the program. Students arriving without a study plan will be sent home as outlined above.

*** A Study Plan may include one or all of the following:**

- Working on a project
- Working on a written report
- Working on an area within a subject in which the student is failing or performing poorly
- Additional or extra credit work assigned by teacher(s)
- Reviewing class notes and/or worksheets
- Correcting old homework
- Preparing for a quiz, test, or exam
- Reviewing and/or correcting old quizzes, tests, or exams
- Learning a new study skill:
 - Prewriting skills (outlines, semantic maps, etc.)
 - Memory improvement skills
 - Listening skills
 - Critical thinking skills
 - Taking notes
 - Punctuation and/or grammar skills
 - Study habits
 - Reading skills
 - Test taking strategies
 - Library skills
 - Math skills
 - Science skills
 - Computer skills

The CARES Tutoring Center exists as a resource for students who aspire to educational success. All others will be asked to permanently leave the program and parents will be notified immediately.