

# Island City Academy Latchkey Program



Welcome to the Island City Academy Latchkey Program for the 2022-2023 school year. The Latchkey Program is courtesy of Island City Academy and is available to grades K-8 for the convenience of the parents. Latchkey is licensed by the Michigan Department of Human Resources and services children who are 5-14 years of age.

The program is designed to provide a safe, healthy, caring and fun-filled atmosphere for children while promoting education, literacy, social and emotional growth.

The Latchkey Program will operate from 6:45 am until the start of the school day and after school until 5:45 pm on days when school is in session. Latchkey will be open on early release days and half days of school. The Latchkey program will NOT be open on scheduled days off and snow days.

Parents must sign their child into the Latchkey Program in the morning and sign their child out in the afternoon. Only authorized adults will be permitted to sign out a child from the program.

## **LATCHKEY STAFFING**

The Latchkey staff is a dedicated team with great patience and a caring attitude toward all children and parents. The staffing for the program is one adult for every eighteen children. Staff is required to be certified in both CPR and First Aid. A minimum of 16 hours of professional development per year is also required for all staff members to assure the wellbeing of the children. Every staff member is required to have a Child Abuse/Neglect Clearance from the Department of Human Services on file prior to working in the Latchkey Program.

## **Billing Procedures**

All payments are required upon receipt of invoices which are sent home every two weeks. If necessary, other payment arrangements maybe be made by contacting the school office.

**Island City Academy  
Latchkey Registration  
2022-2023**

Child's Name \_\_\_\_\_ Grade in Fall \_\_\_\_\_

**Parent's Name** \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

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

Employer's Name \_\_\_\_\_ Work Phone \_\_\_\_\_

**Parent's Name** \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

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

Employer's Name \_\_\_\_\_ Work Phone \_\_\_\_\_

Teacher's Name \_\_\_\_\_

Child's Health Insurance \_\_\_\_\_ Policy # \_\_\_\_\_

**Persons to contact if parent cannot be reached**

Name \_\_\_\_\_ Phone \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_

I have received and read the program guidelines and billing procedures.

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date

## Good Health and Immunization Waiver

My child, \_\_\_\_\_, is currently up-to-date on all required immunizations and currently in good health. Any health restrictions, allergies and/or medications taken by the child, or any special needs are listed below.

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\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date

## Picture and Video Release

My child, \_\_\_\_\_, may be photographed or video-taped while in the Latchkey program for use in posters, scrapbooks, video presentations, slide presentations, or class work that will be used for the promotion of the Latchkey program.

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date

## Parent Handbook

I am aware that the Parent Handbook for Latchkey is available on the school's web page and that I may request a printed copy if I choose to.

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Date

## Child Custody and Release Policy

Only those persons listed on the emergency card and legal parents or guardians may take a child from the Latchkey Program. According to licensing regulations, either parent may take the child from Latchkey, unless there is a court order prohibiting one parent from visitation rights. ALL PERSONS PICKING UP CHILDREN FOR THE PARENTS (OR PARENTS NOT NORMALLY PICKING UP THE CHILD) WILL BE ASKED TO SHOW A PICTURE IDENTIFICATION. If an emergency arises and a person not appearing on the emergency card must pick up the child, please contact the Latchkey Supervisor.

A Child Custody Court Order IS on file that affects pick up \_\_\_\_\_  
A Child Custody Court Order is NOT on file that affects pick up \_\_\_\_\_

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date

## Medicine at School

Medicines that are to be given in the Latchkey Program must be accompanied by an Island City Academy Medicines at School form (available in the office), completed and signed by the child's physician and parent. Medicine must be in original container. This rule applies to prescription and over-the-counter medications. All medications will be given by a fully trained member of the Latchkey staff or Island City Academy employee.

## Incident, Accident, injury, Illness

In the case of any of the following the administrator will report to the child's parent and the department, directly via phone, or e-mail within 24 hours:

- A child is lost or left unsupervised
- An incident involving an allegation of inappropriate contact.
- A fire on the premises of the center that requires the use of the fire suppression equipment or results in the loss of property.
- The center is evacuated for any reason.

## Parent Notification of the Licensing Notebook Requirement

Child Care Organization Act, 1973, Public Act 116

All child care centers must maintain a licensing notebook which includes all licensing inspection reports, special investigation reports and all related corrective action plans (CAP). The notebook must include all reports issued and CAPs developed on and after May 27, 2010, until the license is closed.

- This center maintains a licensing notebook of all licensing inspection reports, special investigation reports and all related corrective action plans.
- The notebook will be available to parents for review during regular business hours.
- Licensing inspection and special investigation reports from the past two years are available on the Bureau of Children and Adult Licensing website at [www.michigan.gov/michildcare](http://www.michigan.gov/michildcare).

I have read the above statement issued by Island City Academy.

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_