

Franklin County Schools  
Extended School Program Statement of Understanding

1.8012.5 - Administrative Procedure

Please read and initial:

1. \_\_\_ My child has permission to participate in all ESP activities.
2. \_\_\_ I give permission for my child(ren) to be used in media releases that benefit the school or the school system. A signed Franklin County Schools Consent Form 40407.2 is on file at the school.
3. \_\_\_ I understand that all children are expected to follow the rules of the ESP center.
4. \_\_\_ I understand that all payments to the ESP must be made a month in advance by the due date. If payment is not made children will not be allowed to attend ESP until the month's fees are paid in full with a \$10 late fee.
5. \_\_\_ I understand to receive vacation credit I must notify the site director one week in advance by completing the "Advance Notification of Absence/Withdrawal/Change" form.
6. \_\_\_ I understand that I will assume all costs of injury to my child and property damages resulting from my child's actions. I waive, release and hold harmless the Franklin County School System from all legal and financial responsibilities.
7. \_\_\_ I will allow the use of my email to quickly receive updates when things change and to receive financial statements.  
Email: \_\_\_\_\_  
OR  
\_\_\_ I do not have an email account that can be used.
8. \_\_\_ I will allow the use of my cell phone number's text messaging to quickly receive updates when things change.  
Cell phone number: \_\_\_\_\_  
OR  
\_\_\_ I do not have a cell phone please call my home phone: \_\_\_\_\_
9. \_\_\_ I understand that it is my responsibility to update any information provided to the ESP staff.
10. \_\_\_ I was given the opportunity for an on-site visit\* (limited to essential visitors only) prior to my child enrolling and give permission for my child to participate in the personal safety curriculum.
11. \_\_\_ I have received the following: Parent Handbook with policies, procedures, and requirements of the Franklin County Schools Extended School Program.
12. \_\_\_ I received the following documentation: Child Abuse Awareness information and the Tennessee Department of Education Summary of Child Care Approval Requirements.
13. \_\_\_ I understand that I must come inside the ESP classroom to sign in my child upon arrival and sign out my child upon pickup.

Child's name: \_\_\_\_\_ Date: \_\_\_\_\_

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Signature of parent/guardian: \_\_\_\_\_