

Dear Parents,

Welcome to SCJN CARES Program. My name is Lauren Iacovone and I am the CARES Director. For those of you who do not know me, I teach the PreK3 Full Day Program. I am sending this letter for those of you that are planning to send your child/children to our Before and After School Programs. It is really important that we have the information on your child/children before their start date. Please plan to complete the registration form and return to myself or the school office before the start of school.

CARES will be held in the Preschool classrooms starting on Monday, September 8th. When picking up your child, please either ring the bell at Door F, the Preschool Drop Off door, located directly off of Highland Road or call the CARES phone when you are at the door and a staff member will let you in to pick up your child.

Attached to this email are the CARES forms. Information can also be found on the school website under Admissions for those who are new to the program and under the Parent Portal. Please send the forms in an envelope marked Mrs. Iacovone/CARES before your child's start date. If you have any questions about the program at all, please feel free to contact me.

Thank you,

Mrs. Lauren Iacovone

lauren.iacovone@scjnschool.org

Welcome to the 2025-2026 CARES Program at SCJN!

Here are some notes about this year's CARES program:

1. Please pack a snack and drink for your child(ren) for CARES each day that they are attending. This snack should be separated from their school snack/lunch and clearly marked, so it does not get eaten before CARES. Also, remember, the water fountains will be turned off, so children can only refill their water bottles at the fountains, not drink from the fountain.
2. CARES will be held in the PreK classroom. There are plenty of toys and games to play with.
3. Pick up: Pick up instructions will be emailed to all families that register for CARES. 4. It is our goal to get the children outside for play time each day as long as the weather cooperates. We will have the playground accessible and children will be allowed to use hula hoops, balls, etc. outside also.
5. Students in grades 1st-8th will do their homework immediately following school. Teachers are there to assist if there are questions, but they do not check all the homework. Parents are responsible for checking homework. All studying must be done at home.
6. Should you need to contact CARES while your children are there, or if the CARES staff needs to contact you, the CARES phone will be used. That phone number is: 484-447-2597.
7. The rates this year will be: \$15 per hour for one child, \$20 per hour for a family (2 or more children). Please keep in mind that we fairly prorate the hourly charge based on the time that your children attend. This is something most schools do not do. If this is a financial burden in any way, please contact Mrs. Ciminera to discuss it. 8. Any CARES questions or correspondence can be directed to Mrs. Iacovone at lauren.iacovone@scjnschool.org.

Ss. Colman John Neumann School

C.A.R.E.S

Registration Form

2025-2026

Family Name (Please print): _____

Children attending—Name and grade:

Child	Grade

Father's Name: _____

Mother's Name: _____

Home address: _____

Email address(es): _____

Cell Phone # (Mother) _____ Cell Phone # (Father) _____

Work # (Mother) _____ Work # (Father) _____

In Case of Emergency

CARES staff will act in the best interest of the child. We will call 911 and request that the child be transported to the closest emergency room.

Please add an Emergency Contact Name and Phone Number (in the case parents cannot be reached).

Sign Out

The following individuals (in addition to parents) may sign my child(ren) out of CARES

1. _____
2. _____
3. _____

Please list names of individuals with custody or visitation issues of which CARES staff should be aware. Please attach supporting documentation if necessary.

Medical Information

Please list specific medical issues of which the CARES staff should be aware of (allergies, use of inhalers, chronic conditions, etc.). It is important to clearly name and describe any allergies. Finally, if your child takes medication during school hours, or has an inhaler at school, please indicate this below.

Name	Condition	Medication/Instructions

****We understand schedules change and families may need to make adjustments to the information asked on this form. This information helps us plan for staffing, you can always change your timing!

Parent Signature _____ Date _____