

## SCOPE STUDENT SERVICES SCHEDULE

Please complete this form and circle the days your child will be attending the SCOPE program. Return on or before the 15<sup>th</sup> of March to the Site Director.

Complete a separate calendar for each SCOPE program your child is enrolled in.

**NOTIFY THE SITE DIRECTOR & YOUR CHILD'S TEACHER OF ANY CHANGES IN THIS SCHEDULE.**

Circle one:                      Before school program                      After school program

Child's name: \_\_\_\_\_ Grade: \_\_\_\_\_ Home bus #: \_\_\_\_\_

Home school: \_\_\_\_\_ Program site: \_\_\_\_\_

**My child will attend the following clubs/activities at dismissal and to SCOPE afterwards:**

Club/Activity: \_\_\_\_\_ Location: \_\_\_\_\_

Date(s): \_\_\_\_\_

Start Time: \_\_\_\_\_ End Time: \_\_\_\_\_

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**After the Club/Activity, it is important for your child's Club/Activity leader to escort your child to the SCOPE Program.**

Note:  
Before  
completing  
please refer to  
the district  
calendar for any  
school closings,  
early dismissals,  
etc.  
**THERE IS NO  
SWITCHING  
DAYS.**

APRIL 2019				
M	T	W	TH	F
1	2	3	4	5
8	9	10	11	12
15	16	17	18	19
22	23	24	25	26
29	30			

Total Days Circled:

\_\_\_\_\_

Special notes for parents: \_\_\_\_\_

Parent's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**No payments will be accepted at the site and full payment is due on or before the 15<sup>th</sup> of every month in advance for the upcoming month. Pay online! Go to [scopeonline.us](http://scopeonline.us)**

Mail your non-refundable tuition payment direct to:

SCOPE Education Services  
General Post Office  
P.O. Box 30550

**SCOPE FEDERAL ID #: 11-2073576**

New York, NY, 10087-30550

PLEASE NOTE: 1. If you are part-time and add days after payment is submitted, please include the additional tuition in your next month's payment. 2. There are only two rates available: part time – or full time. There is no switching back and forth between rates. If a parent has been paying the part-time rate and wants to attend full-time, they can continue to pay the minimum monthly rate plus the daily rate for additional days or switch permanently to the full-time rate for the remainder of the year. Likewise, if a parent has been paying the full-time rate and their child will not be attending every day in a given month, they can continue to pay the full-time rate, or switch permanently to the minimum monthly rate plus the daily rate for additional days for the remainder of the year. Contact the SCOPE business office at (631) 360-0800, ext 207 to permanently change your rate.

## SCOPE STUDENT SERVICES SCHEDULE

Please complete this form and circle the days your child will be attending the SCOPE program. Return on or before the 15<sup>th</sup> of April to the Site Director.

Complete a separate calendar for each SCOPE program your child is enrolled in.

**NOTIFY THE SITE DIRECTOR AND YOUR CHILD'S TEACHER OF ANY CHANGES IN THIS SCHEDULE.**

Circle one:                      Before school program                      After school program

Child's name: \_\_\_\_\_ Grade: \_\_\_\_\_ Home bus #: \_\_\_\_\_

Home school: \_\_\_\_\_ Program site: \_\_\_\_\_

**My child will attend the following clubs/activities at dismissal and to SCOPE afterwards:**

Club/Activity: \_\_\_\_\_ Location: \_\_\_\_\_

Date(s): \_\_\_\_\_

Start Time: \_\_\_\_\_ End Time: \_\_\_\_\_

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**After the Club/Activity, it is important for your child's Club/Activity leader to escort your child to the SCOPE Program.**

Note:  
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etc.  
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SWITCHING  
DAYS.**

MAY 2019				
M	T	W	TH	F
		1	2	3
6	7	8	9	10
13	14	15	16	17
20	21	22	23	24
27	28	29	30	31

Total Days Circled:

\_\_\_\_\_

Special notes for parents: \_\_\_\_\_

Parent's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**No payments will be accepted at the site and full payment is due on or before the 15<sup>th</sup> of every month in advance for the upcoming month. Pay online! Go to [scopeonline.us](http://scopeonline.us)**

Mail your non-refundable tuition payment direct to:

SCOPE Education Services  
General Post Office  
P.O. Box 30550

**SCOPE FEDERAL ID #: 11-2073576**

New York, NY, 10087-30550

**PLEASE NOTE: There are only two rates available (part time or full time) and there is no switching back and forth between rates for the months of May and June.**

**SCOPE STUDENT SERVICES  
SCHEDULE**

Please complete this form and circle the days your child will be attending the SCOPE program. Return on or before the 15<sup>th</sup> of May to the Site Director.

Complete a separate calendar for each SCOPE program your child is enrolled in.

**NOTIFY THE SITE DIRECTOR & YOUR CHILD'S TEACHER OF ANY CHANGES IN THIS SCHEDULE.**

Circle one:                      Before school program                      After school program

Child's name: \_\_\_\_\_ Grade: \_\_\_\_\_ Home bus #: \_\_\_\_\_

Home school: \_\_\_\_\_ Program site: \_\_\_\_\_

**My child will attend the following clubs/activities at dismissal and to SCOPE afterwards:**

Club/Activity: \_\_\_\_\_ Location: \_\_\_\_\_

Date(s): \_\_\_\_\_

Start Time: \_\_\_\_\_ End Time: \_\_\_\_\_

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Note:  
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etc.  
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SWITCHING  
DAYS.**

JUNE 2019				
M	T	W	TH	F
3	4	5	6	7
10	11	12	13	14
17	18	19	20	21
24	25	26	27	28

Total Days Circled:

\_\_\_\_\_

Special notes for parents: \_\_\_\_\_

Parent's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Full payment is due on or before the 15<sup>th</sup> of every month in advance for the upcoming month. Payments will not be accepted at the program site. Tuition payments are accepted online with your child's student ID# (go to [www.scopeonline.us](http://www.scopeonline.us)) or by mail. Mail your non-refundable tuition check payment direct to:**

**SCOPE Education Services  
General Post Office  
P.O. Box 30550, New York, NY, 10087-30550**

**SCOPE FEDERAL ID# 11-2073576**

**There are only two rates available (part time or full time) and there is no switching for the month of June.**