



Father Andrew White, S.J. School

LEADERSHIP ✦ FAITH ✦ ACADEMICS

2026 - 2027 Father Andrew White School Extended Day Program

Welcome to the Father Andrew White Extended Day Program. The purpose of this program is to provide quality, affordable childcare before and after school for FAW families. Our program's objective is to inspire children to learn, grow and reach their full potential in a safe environment. Both programs are available for students in PK - 8th grades.

Registration Fee

All payments and fees for the Extended Day Program are **NON-REFUNDABLE, including the registration fee and first month's payment required at the time of registration.** All children, including those who are in the Drop-In Program, must have a completed registration on file. The fee will be billed through FACTS prior to the start of the school year or at the time of registration. **A total of 60 spots are available for Aftercare and 15 spots for Before Care.**

Billing for Extended Care Programs

Program charges will be applied monthly and billed through FACTS. Monthly payments begin in October or at the time that a student begins attending. The last payment is due in May.

Those enrolled in the program, either full or part time, will be charged the agreed rate whether or not they use the program for the entire month. Any students that are not enrolled in the Full-Time or Part-Time program will be charged the Drop-In rate.

ALL payments and fees for the Extended Day Program are NON-REFUNDABLE. Written notice of a change to your family's extended care schedule or withdrawal from the program must be submitted to the Aftercare Director and School Bookkeeper. **Thirty days written notice is required for any changes in extended care schedules or withdrawals.** You will only be allowed to change your extended care schedule ONCE every school year. (For example: if you wish to change from a daily/drop-in plan to a monthly full time plan you can only do it once, it must be in writing, and it must be done thirty days before your expected change.) *Drop-in payments will be billed on FACTS. The Director must be notified 24 hours prior to using drop in care to ensure proper staffing. You must also email the office and the homeroom teacher that your child will be attending aftercare on the desired date so that they will be properly dismissed.

2026 - 2027 Extended Care Rates

AFTER CARE RATES

Full - Time (Mon-Fri):	Part - Time (3 days or less/week):	Drop - In Rate:
1 child: \$285/month	1 child: \$225/month	1 child: \$35/day
2 children: \$530/month	2 children: \$365/month	2 children: \$55/day
3 children: \$675/month	3 children: \$430/month	3 children: \$70/day

BEFORE CARE RATES

Full - Time (Mon-Fri):	Part - Time (3 days or less/week):	Drop - In Rate:
1 child: \$150/month	1 child: \$90/month	1 child: \$20/day
2 children: \$280/month	2 children: \$165/month	2 children: \$30/day
3 children: \$410/month	3 children: \$230/month	3 children: \$40/day

CHILDREN ENROLLED IN BOTH BEFORE AND AFTER CARE RATES

Full - Time (Mon-Fri):	Part - Time (3 days or less/week):
1 child: \$390/month	1 child: \$285/month
2 children: \$650/month	2 children: \$530/month
3 children: \$900/month	3 children: \$785/month

Parent's Guide to Regulated/ Licensed Child Care

[https://earlychildhood.marylandpublicschools.org/system/files/filedepot/2/guide to regulated child care.pdf](https://earlychildhood.marylandpublicschools.org/system/files/filedepot/2/guide%20to%20regulated%20child%20care.pdf)

Late Pickup Fee

Students will be signed into aftercare by school staff; parents will be responsible for signing students out of aftercare with a designated aftercare staff member. **There is a \$1 per minute late fee for any child not picked up by 5:30 pm.** This fee will also be billed to your FACTS account. The time that the child was signed out on the checkout sheet will be used to determine the late fee charge. Please be considerate of the staff who have extended their day to take care of your children. Frequent late pick up will be grounds for dismissal from the program.

Drop - In Procedures

In order for a child to participate in the Extended Day Drop-In program, a completed registration form, emergency form and registration fee must already be on file. Drop-In Fees will be billed to you on FACTS. **Please notify the director, office and homeroom teacher 24 hours prior to the date care is needed.**
office@fatherandrewwhite.org and shedd@fatherandrewwhite.org

Behavior Expectations / Discipline Policy

We do not use physical or verbal punishment under any circumstances. Behavior expectations will be the same as those during regular school hours. We use positive guidance and redirection and provide students with social scripts, problem solving techniques, self calming activities and choices. Extended care utilizes a similar Infraction or Behavior Reflection form as those used in school. **A more detailed behavior plan can be found in the FAW Parent Student Handbook.**

Screen Time Policy

FAW teachers and staff use technology as learning tools and a means of communication. We feel it's important to teach children how to use devices they will encounter in school, so they are given opportunities to use them for educational play and research. The use of televisions or computers for passive viewing is not part of the FAW curriculum.

Staffing

The FAW Extended Day program is staffed by employees who have completed the rigorous requirements of the Maryland State Department of Education's Office of Child Care and the Archdiocese of Washington. There will be one staff member for every 10 students participating in the program (4 year old group) and one staff member for every 15 students participating in the program (5 years and up).

Transportation, Drop Off and Pick Up Policy

A parent or authorized person must sign children in for Before Care and out for Aftercare each day. Please park in the lot behind the school. The doors will be locked. There is a video intercom to notify staff of your arrival. Your child will be picked up at the door for Before Care and signed in by the teacher. In regards to aftercare, staff will either let you in or bring your child/children to the door. Field trips are not a part of the afterschool program. There will be no transportation provided by the school at any time.

Homework

Students will be provided 45 minutes of quiet time for homework; however, **THE AFTER CARE STAFF IS NOT RESPONSIBLE FOR THE COMPLETION OF HOMEWORK ASSIGNMENTS.** Parents must ensure that the assignments are completed and checked at home daily. Those students who do not have homework will be engaged in quiet reading or quiet play at this time.

Other Information

There will be no Before or Aftercare on days school is closed due to inclement weather or emergency closings. If school closes early due to bad weather or other emergencies, children must be picked up or sent home on the bus; no Aftercare will be provided. For delayed openings, Before Care will be provided; however, it will adhere to the same delay: normal start time 7:00 am, a two hour delay would cause Before Care to start at 9:00 am. Aftercare will still be held on Early Dismissal Days (see schedule on the following page).

Contact Information

Aftercare Director - Mrs. Justine Shedd - shedd@fatherandrewwhite.org
Before Care - Mrs. Theresa Schmidt - schmidt@fatherandrewwhite.org
Office of Father Andrew White - office@fatherandrewwhite.org

2026-2027 FAW School Calendar

<https://fatherandrewwhite.org/school-calendar/>

2026-2027 School Year Schedule of Activities

Before Care Program

7:00 - 7:40 Breakfast may be provided by the parent to eat at school. Quiet play indoors or outdoors.

7:40 - 7:45 Clean up and look at a book until dismissed.

Aftercare Program

2:45 - 3:30 Homework group one 3rd - 8th grade

3:30 Snack

3:30 - 4:15 Homework group two K - 2nd grade

3:30 - 5:15 Outdoor play time or indoor activities

5:15 - 5:30 Clean up and pack up belongings

Early Dismissal Aftercare Program

12:45 - 1:15 Lunch (all children must bring their own lunch)

1:15 - 2:45 Play time - if weather permits play time will be outside.

2:45 - 3:45 Homework/quiet play time

4:00 Snack time (snack provided, parents provide a refillable water bottle)

4:00 - 5:15 Outdoor play time, or indoor group crafts/activities

5:15 - 5:30 Clean up and pack up belongings



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Extended Day Program Registration & Family Information 2026 - 2027 School Year

I wish to register my child(ren) for:

- | | |
|--|---|
| <input type="checkbox"/> After School Care - Full Time | <input type="checkbox"/> Before School Care - Full Time |
| <input type="checkbox"/> After School Care - Part Time | <input type="checkbox"/> Before School Care - Part Time |
| <input type="checkbox"/> Drop - In Before Care | <input type="checkbox"/> Before and After School Care - Full Time |
| <input type="checkbox"/> Drop - In After Care | <input type="checkbox"/> Before and After School Care - Part Time |

I DO NOT wish for my child(ren) to work on homework during after care.

I wish for my child(ren) to work on homework during after care.

Child's Name _____ Date of Birth _____ Grade _____

Allergies _____

Child's Name _____ Date of Birth _____ Grade _____

Allergies _____

Child's Name _____ Date of Birth _____ Grade _____

Allergies _____

Child's Name _____ Date of Birth _____ Grade _____

Allergies _____

Mother's Name _____ Mother's Cell Phone _____

Father's Name _____ Father's Cell Phone _____

Secondary Phone Number _____

Those allowed to pick up my child(ren) - please include the phone number where they can be reached:

Name _____ Phone _____

Name _____ Phone _____

In the event of an emergency early school closing my child(ren) should:

- ride the bus home be picked up at school

A non-refundable registration fee and one month of before/aftercare per family must accompany this registration. *Billed via FACTS account

Those enrolled in the full time or part time program will be charged the agreed rate whether they use the program for the entire month or not. By signing below I authorize Father Andrew White School to release a copy of the Emergency Release Form and any patient medical information/medication on my child to the Extended Day Personnel. Also, by signing below, I acknowledge I have read, and accept the Extended Care Program Rates, Policies, and guide to regulated child care.

Parent/Guardian Signature _____

Date _____

CACFPErollment: Yes: No:

Meals your child will receive while in care:

Bk LN SU AM Snk PM Snk Evng Snk

EMERGENCY FORM

INSTRUCTIONS TO PARENTS:

- (1) Complete all items on this side of the form. Sign and date where indicated. Please mark "N/A" if an item is not applicable.
- (2) If your child has a medical condition which might require emergency medical care, complete the back side of the form. If necessary, have your child's health practitioner review that information.

NOTE: THIS ENTIRE FORM MUST BE UPDATED ANNUALLY.

Child's Name _____ Birth Date _____
 Last First

Enrollment Date _____ Hours & Days of Expected Attendance _____

Child's Home Address _____
 Street/Apt. # City State Zip Code

Parent/Guardian Name(s)	Relationship	Contact Information		
		Email:	C:	W:
			H:	Employer:
		Email:	C:	W:
			H:	Employer:

Name of Person Authorized to Pick up Child (daily) _____
 Last First Relationship to Child

Address _____
 Street/Apt. # City State Zip Code

Any Changes/Additional Information _____

ANNUAL UPDATES

 (Initials/Date) (Initials/Date) (Initials/Date) (Initials/Date)

When parents/guardians cannot be reached, list at least one person who may be contacted to pick up the child in an emergency:

1. Name _____ Telephone (H) _____ (W) _____
 Last First

Address _____
 Street/Apt. # City State Zip Code

2. Name _____ Telephone (H) _____ (W) _____
 Last First

Address _____
 Street/Apt. # City State Zip Code

3. Name _____ Telephone (H) _____ (W) _____
 Last First

Address _____
 Street/Apt. # City State Zip Code

Child's Physician or Source of Health Care _____ Telephone _____

Address _____
 Street/Apt. # City State Zip Code

In EMERGENCIES requiring immediate medical attention, your child will be taken to the NEAREST HOSPITAL EMERGENCY ROOM. Your signature authorizes the responsible person at the child care facility to have your child transported to that hospital.

Signature of Parent/Guardian _____ Date _____

INSTRUCTIONS TO PARENT/GUARDIAN:

- (1) Complete the following items, as appropriate, if your child has a condition(s) which might require emergency medical care.
- (2) If necessary, have your child's health practitioner review the information you provide below and sign and date where indicated.

Child's Name: _____ Date of Birth: _____

Medical Condition(s): _____

Medications currently being taken by your child: _____

Date of your child's last tetanus shot: _____

Allergies/Reactions: _____

EMERGENCY MEDICAL INSTRUCTIONS:

(1) Signs/symptoms to look for: _____

(2) If signs/symptoms appear, do this: _____

(3) To prevent incidents: _____

OTHER SPECIAL MEDICAL PROCEDURES THAT MAY BE NEEDED: _____

COMMENTS: _____

Note to Health Practitioner:

If you have reviewed the above information, please complete the following:

Name of Health Practitioner

Date

Signature of Health Practitioner

(_____) _____
Telephone Number