

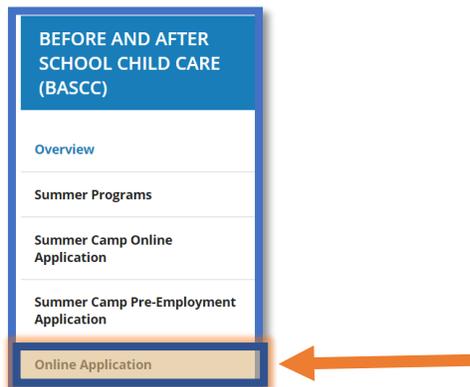
SBO Parent/Guardian Application Instructions

Before you begin:

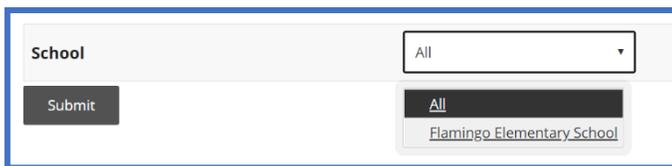
- Parents must register online
- Google Chrome is required
- Incomplete applications are deleted daily at midnight
- Parents must use 10-digit FSI number (ex: 0610000000)
- You must do a new application even if the student went to the childcare program the previous year.

Instructions:

- 1) Open Google Chrome (must use this browser)
- 2) Go to www.basccbroward.com
- 3) Select "Online Application"



- 4) Select your child's school

A screenshot of a web form for selecting a school. It features a 'School' label, a 'Submit' button, and a dropdown menu. The dropdown menu is open, showing 'All' as the selected option and 'Flamingo Elementary School' as a visible option below it.

- 5) Click the icon to go to application site

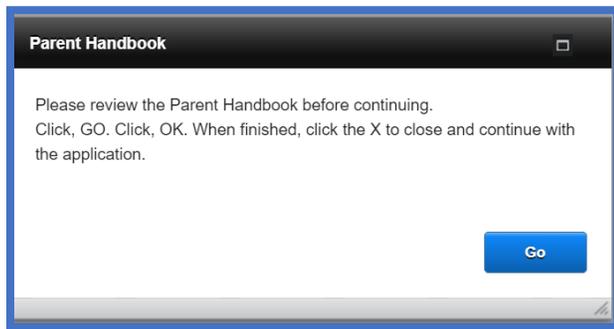


6) Parent/Guardian login

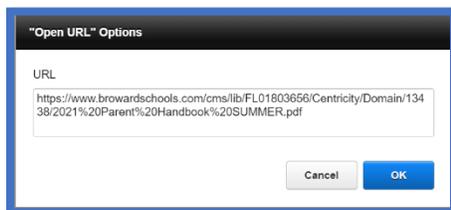
- Login name: web
- Password: **LEAVE IT BLANK (no password is required)**

A login form titled "Sign in to open 'Program Data Management System'". It features two input fields: the first is labeled "web" and the second is labeled "Password". Below the fields is a blue button labeled "Sign In".

7) Read through the pop-up window and select "Go"

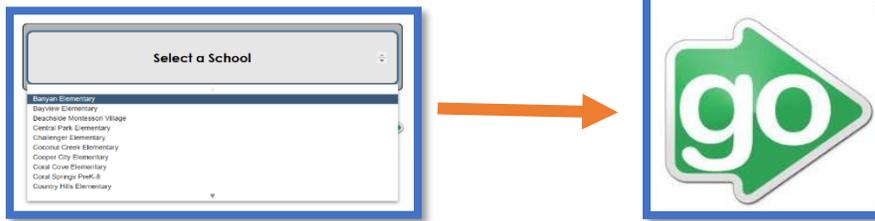


8) Read through the pop-up window and select "OK". This will open the parent handbook in a separate pop-up window. Save, print or read through it, then continue.

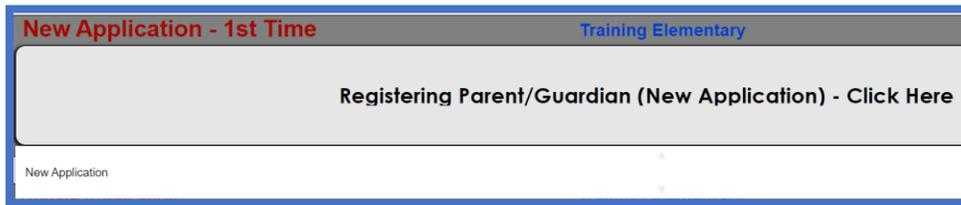


9) Click "Select a School" button and choose your school.

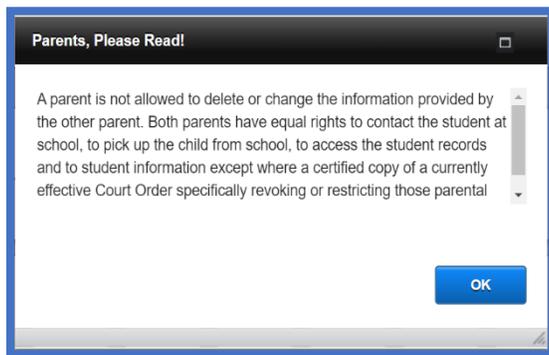
- Next, select the green "go" button.



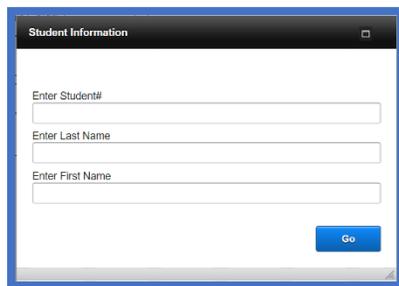
10) Select "Registering Parent/Guardian (New Application)– Click Here"



11) Read through the pop-up window and select "OK"



12) Enter student information on all fields. If you don't have a student number, please contact the site supervisor.



13) Fill out all the fields then select "Next"

Grade: Application 2021-2022 Before and After School Child Care Program

Parent/Guardian 1 Password (created by parent):

Application #: 0701011668

Student # Home School:

Child's Name: Last First Starting Date:

Date Of Birth: Age: Gender:

Height: Weight: Eye Color: Hair Color:

Race: White Native American Asian Black Multiracial Other

Ethnicity: Non-Hispanic or Non-Latino Hispanic or Latino

Child Lives with: Both Parents Father Shared Custody Mother Guardian Other

LIST ALL SIBLINGS ATTENDING PROGRAM AT THIS TIME:

Next

Student

14) Fill out all the fields then select "Next"

Registration 2021-2022 Before and After School Child Care Program

Student # Child's Name:

Are you a Broward County School Employee? Yes No If yes, enter your personal #

Do you work in the following fields: first responder or healthcare? Yes No

Name (First) (Last) Cell Phone

Primary Address Cell Phone Provider

City State Zip Work Phone

HomePhone

Click here if the Registering Adult address is the same as the Second Adult.

Name (First) (Last) Cell Phone

Second Address Cell Phone Provider

City State Zip Work

HomePhone

List Email Addresses:

Can your child be photographed? Yes No

Next

15) Fill out the fields then select "Next"

- If any options are "Yes", parent/guardian must add information in pop window (see Figure A)

Registration 2021 Summer Camp

Student # Child's Name:

Family Doctor: Doctor Phone#:

Important medical concerns we should be aware of (conditions, medications, health history, etc.):

Does your child have any medical concerns? Yes No If Yes,

Does your child have allergies? Yes No If Yes,

Does your child take any medications? Yes No If Yes,

Does your child have any special concerns we need to be aware of? Yes No If Yes,

Does your child have any special needs we should be aware of? Yes No If Yes,

Does your child receive any special services during the school day? Yes No If Yes,

Next

Medical Conditions

Figure A

Does your child have any medical concerns? Yes No If Yes, [Click Here To Add The Medical Concern](#)

Medical Concerns
Tell us about your child's medical concerns.

16) Fill out all the fields then select "Next".

- Email verification and Signature (Print Name) must be filled out.
- Must have at least one other authorized release/contact in addition to the parents/guardians.
 - If you do not have an alternative pickup, please add Broward Sheriff's Office (BSO).

Application
2021-2022
Before and After School Child Care Program

Student # Child's Name:

The Parent/Guardian Authorized Release / Contact MUST be a person other than the Parent/Guardian 1 and 2. If no one is listed, than Local Police MUST be listed. The person MUST be listed on the top line.

Name	Relationship	Home Phone	Work or Cell Phone

I declare this information to be true and correct. I will notify the Supervisor immediately of any changes.

Print Name _____ Relationship to child _____ Date 7/6/21

Application #: **0701011668**

Thank you for submitting an application to enroll your child in a BASCC program. Your application has been submitted. This does not guarantee enrollment in the program. Your application will now enter the review process. Please check your email for further information and confirmations.

We recommend saving a screenshot of this page, and reviewing the important information below:

- Due to COVID-19, spaces are limited.
- Save your confirmation number for reference.
- A confirmation email will be sent after application has been received.
- A second confirmation email will be sent if/when the application has been accepted.
- Allow five business days for processing.

Please verify your email address below:

Email:

Email Verification: _____

Upon entering the program, all students begin a two-week trial period. If the program cannot meet the student's needs, the student may be withdrawn.

I declare this information to be true and correct. I agree that my electronic signature is legal and binding. It is equivalent to my handwritten signature.

Signature (Print Name): _____

Next

17) Fill out all the fields then select "Next". All the pink fields are required.

Student # 9123456789 Child's Name: Bob Smith
 Home School Training Elementary Date: 03/14/2021

By initiating and signing this form, I acknowledge that I have read and understand the following:

- The policies and procedures that have been outlined in the Parent Handbook are in place to ensure the safety and well-being of my child while attending the program. I have read them and agree to follow them. I have also discussed the rules of the program with my child.

In addition, I understand some of my responsibilities include, but are not limited to:

- I must present my photo identification for pick-up verification.
- I must notify the supervisor, directly, if my child will not be attending the program.
- My child will be expected to behave in accordance with the "Code of Student Conduct" for Broward County Public Schools.
- All payments for Before and After School Child Care Programs must be made in advance of receiving childcare.
- Failure to pay in advance will result in dismissal from the program. Payment due dates are given to parent/guardians upon registration. Fees must be paid on or before the scheduled, "Last Day to Pay"
- I must pick up my child(ren) on time. Failure to do so may result in dismissal from the program. A late pick-up fee of \$15.00, per 15-minute increments, per family, will be charged. These fees must be paid prior to the next period payment.
- If my child is on the Broward Free/Reduced Meal Program, funds may be available for partial summer scholarship. It is my responsibility to request this information and provide necessary documents for the application.
- It is my responsibility to keep my own records and receipts for income tax purposes.
- It is my responsibility to follow SBCC COVID-19 guidelines.

I agree that my electronic signature is legal and binding. It is equivalent of my handwritten signature:

Parent/Guardian Signature: _____ Date: 03/29/2021

18) Checkmark a selection in each section.

- Choice 1 will be the default if a selection is not made.

Before & After School Child Care (BASCC) Media Release Form (SummerCampOnly)

As a parent of a student enrolled in a BASCC program, I understand that my child may be photographed, videotaped or interviewed by the news media or by the School District for informational and/or promotional purposes. I understand that pictures and interviews may be used on the District's website, in School District publications, external publications and electronic/social media as indicated below.

You Must Make a Choice in Both Section A and Section B
 (If no choice is marked in both sections, then the choice will default to Choice #1)

Section A - External Outlets/Media

Please Check Choice #1 or Choice #2

- 1 I WILL permit my student to be photographed, videotaped, and/or interviewed by the news media when the news media has secured proper authorization from Broward County Public Schools.
- 2 I WILL NOT permit my student to be photographed, videotaped, and/or interviewed by the news media.

Section B - BASCC Programs - Broward County Public School

Please Check Choice #1 or Choice #2

- 1 I WILL permit my student to be photographed, videotaped, and/or interviewed for school publications, such as newsletters, school program and/or District websites, social media/BECON TV, or for other communication tools by Broward County Public Schools or its approved vendors. I understand the District may be required to release this information if requested by the media or other members of the public (i.e., public records requests). *Note: Student's name and grade, teacher's name, and school's name may be released in order to facilitate school-based publications.*
- 2 I WILL NOT permit my student to be photographed, videotaped, and/or interviewed for school publications, such as school newsletters, school program and/or District websites, social media/BECON TV, or for other communication tools by Broward County Public Schools or its approved vendors.

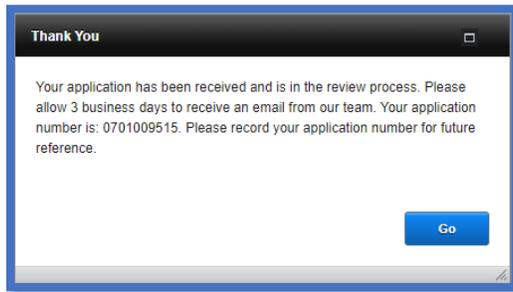
Bob Smith Student Name (PRINT) Bob Smith Student Signature 03/29/2021 Date
 Tom Smith Parent Guardian (PRINT) Tom Smith Parent/Guardian Signature 03/29/2021 Date

Complete Application

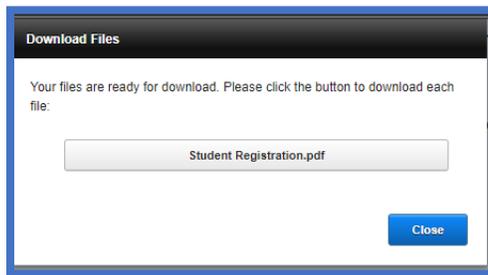
19) Select "Complete Application"



20) Read pop-up then select "Go". Write down your application number.

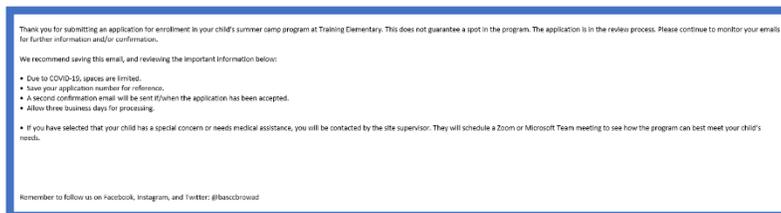


21) The parent/guardian can download a pdf copy of the student application to their electronic device.



22) The email address used for the application will receive a confirmation of submission.

- A site supervisor will send a second email confirming enrollment or waitlist in the program



Important Reminders:

- Ensure you provide a monitored email address. Updates and communication regarding your child's application to the program will arrive via email.
- Initialing all the items on the last page of the registration form acknowledges you have read and agree to the items in the Parent Handbook.
- Sign the page by typing your first and last name where indicated.
- You will receive an email within three business days from your program's childcare supervisor, informing you if your child had been accepted into the program or placed on the waitlist.
- All communication will include your application number. Please make a note of it.
- If you are accepted, you will need to make your payment in the e-Store.
- If your child is put on a waitlist, the supervisor will contact you when space becomes available.
- If you have any questions, please contact your school and speak with the childcare supervisor.