

SSP PARENT AIDE AGREEMENT
Parent and Staff: Partners Who Care

OPPORTUNITIES:

Stepping Stones Preschool is a Parent Participation Preschool. We encourage our parents to become involved in every aspect of your preschooler's world. When you agree to become a Parent Aide, you are given the opportunity to be a part of one of your child's first experiences outside the home.

Nothing can compare to the feelings you get when your child lets you know how happy he/she is to have you at their school or the first time a child runs across the playground and gives you a big hug.

RESPONSIBILITIES:

Along with opportunities, there are responsibilities. This school depends on you to make a difference. This PARENT AGREEMENT outlines your responsibilities. Please read it carefully before you make the choice to participate or not to participate in the program.

In order to qualify for the Parent Participation Aide Credit I AGREE TO:

1. Participate as a Parent Aide in the classroom, playroom, nursery or kitchen, 2 (two) times per month during the preschool year if my child attends preschool 2 (two) times a week, 3 (three) times per month if my child attends preschool 3 days a week, 4 (four) times per month if my child attends preschool 5 days a week. This is to facilitate a low child/adult ratio, help meet the needs of the children, and to add that special kind of caring that brought you to Stepping Stones in the first place.
I will be in the class room by 8:40 am or 12:10 pm to receive instructions.
When you agree to aide more than the required aiding days each month, you receive additional credit each time you aide towards your child's tuition.
2. Obtain a current TB skin test (as per State Health Requirements). I understand that a TB test must be done at my own doctor's office before the first day of school. You must bring proof of this test to the preschool office.
3. Arrange for another person to aide for me on days I am scheduled, but can not be present. I understand that it is necessary for me to find a replacement for my scheduled aide day(s), or I may trade days with another Participation Parent. I understand that I will be provided with a Parent Participation Directory to help me replace myself if needed. I understand that I will be charged a fee of \$20.00 (twenty dollars) if I make no effort to replace myself.
4. Notify the Stepping Stones office of any changes to my address or phone number.
5. Attend the special PARENT PARTICIPATION WORKSHOP in late August. This workshop will cover my responsibilities in the classroom and give me a chance to experience typical preschool activities.
6. Turn in all state required paperwork to the office by the 1st day of school (or no later than 30 days after registration if registering mid-year). If all paperwork is not turned in by the above dates, you will be switched to non-participating rate.

I understand that any picture taken of me or my child maybe used for publicity purposes.

Please Print Name _____

I AGREE to participate in the Parent Aide Program.

Signed: _____ Date _____

I choose NOT TO participate in the Parent Aide Program.

Signed: _____ Date _____