

Carteret Board of Education
2026-2027 BEFORE & AFTER SCHOOL PROCEDURE & PAYMENT AGREEMENT

Before Care begins at 7:00 AM; After Care ends at 6:00 PM. There are **no** "DAILY DROP-INS" permitted and no daily fees. All children must be signed in to Before Care and signed out of After Care each day. The program is available to students in Pre-K (**provided fully potty-trained**) through Grade 6. Your child(ren) may begin the program two (2) days after the registration form and payment are received. There will be no exceptions.

Breakfast is available to the Before Care students to purchase, and the price is based on your free/reduced/full pay lunch status. A snack is provided for each child during After Care at no additional cost. The Payments Schedule is as follows:

Program	5 Days/Week Monthly Fee	4 Days/Week Monthly Fee	3 Days/Week Monthly Fee	2 Days/Week Monthly Fee	1 Day/Week Monthly Fee
Before	\$ 126.00	\$ 112.00	\$ 97.00	\$ 84.00	\$ 69.00
Before – 2 nd Child	\$ 126.00	\$ 112.00	\$ 97.00	\$ 84.00	\$ 69.00
After	\$ 258.00	\$ 218.00	\$ 181.00	\$ 141.00	\$ 100.00
After – 2 nd Child	\$ 247.00	\$ 208.00	\$ 168.00	\$ 130.00	\$ 90.00
Before/After	\$ 298.00	\$ 251.00	\$ 204.00	\$ 159.00	\$ 112.00
Before/After – 2 nd Child	\$ 277.00	\$ 241.00	\$ 194.00	\$ 148.00	\$ 102.00

On **scheduled** delayed openings, Before Care will be available at the regularly scheduled time at no extra charge. There will be no Before Care available during instances of delayed openings due to inclement weather. On Early Dismissals/Abbreviated Sessions, After Care will be available at dismissal at no extra charge. The only exception will be Early Dismissal/Abbreviated Session before a holiday -- notification will be given to parents/guardians.

Tuition will not be prorated for months of partial attendance and will not be refunded for any reason once the month begins. Tuition is calculated on 180 days of school and is the same each month regardless of the number of school days in the month.

Payments can be made **online** via a credit or debit card at <https://carteretschools.schoolcashonline.com/>. Regardless of when during the month a child begins or ends the program, full payment for that month must be made. Payments will not be prorated. **All payments are due before the start of month that services will be rendered. For example, the month of October must be paid on or before September 30th, the month of November must be paid on or before October 31st, etc. This will be strictly enforced. It is your responsibility to send in your payment on time; monthly invoices will not be issued.** If your account falls in arrears more than 5 days, your child will be suspended from the program until such time as the account is brought current.

If your child's enrollment in the Carteret Board of Education Before & After School Program is subsidized through Community Child Care Solutions, please note that you have an additional administrative responsibility before services can begin.

It is your sole responsibility to ensure that Mrs. Androvich receives a copy of your final, approved subsidy contract. Mrs. Androvich requires this documentation to calculate your official monthly co-payment amount.

Please email your final contract directly to Mrs. Androvich at **kandrovich@carteretschools.org** as soon as it is issued by the agency.

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Late fees will be assessed at \$20.00 for minutes 1-15 late; an additional \$20 for minutes 16-30 late; and an additional \$20.00 for minutes 30-45 late. All late fees will be due with the next month's tuition. If the late payment is not received the following month, your child will be suspended from the program until said fee is paid. For example, if you are late and pick up your child at 6:21, you will receive a late notice fee of \$40.00. This will occur each and every time that you are late picking up your child.

This is a reminder that **any and all monthly and/or permanent changes to your child's schedule—such as days off and/or services—must be submitted by email to Mrs. Androvich at kandrovich@carteretschools.org**. Phone calls, notifications to program staff or the school, and update forms sent from home **do not constitute official notice** to this office and will not result in schedule changes being processed.

Please note that you will be held responsible for monthly payments if written notification is not received prior to the requested change, as our program staffing is based on enrollment numbers.

Additionally, you are still responsible for informing your child's teacher of any daily and/or permanent changes to their schedule.

This is to confirm that I have read the above payment and attendance procedures and do hereby agree to follow said procedures.

Parent/Guardian Name: _____
(Please Print)

Parent/Guardian Signature: _____ Date: _____

Phone Number: _____ Email: _____

Child(ren)'s Name

Kimberley Androvich – kandrovich@carteretschools.org
(732) 541-8960 x-6005

Student Weekly Schedule Selection

Please check the boxes for the days and sessions your child will attend.

Child's Name: _____ Grade/School: _____

Session	Mon	Tue	Wed	Thu	Fri	Total Days/Week
Before Care Only	☐	☐	☐	☐	☐	
After Care Only	☐	☐	☐	☐	☐	
Both (Before & After)	☐	☐	☐	☐	☐	

This is a reminder that **any and all monthly and/or permanent changes to your child's schedule—such as days off and/or services—must be submitted by email to Mrs. Androvich at kandrovich@carteretschools.org**. Phone calls, notifications to program staff or the school, and update forms sent from home **do not constitute official notice** to this office and will not result in schedule changes being processed.

Parent/Guardian Signature: _____

ENROLLMENT APPLICATION

Name Of Child:	Birthdate:	Enrollment Date:
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PARENT/GUARDIAN INFORMATION	<i>Please check the box (☐) to indicate the primary residence of the child listed above.</i>			
	☐ PARENT/GUARDIAN # 1		☐ PARENT/GUARDIAN # 2	
	Name:		Name:	
	Relationship:		Relationship:	
	Cell Phone:		Cell Phone:	
	Home Phone:		Home Phone:	
	Home Address:		Home Address:	
	Employer Name:		Employer Name:	
	Employer Phone:		Employer Phone:	
	Employer Address:		Employer Address:	
E-Mail Address:		E-Mail Address:		

EMERGENCY CONTACTS	Persons authorized to pick up your child and/or contact in case of emergency if neither parent is available to assume responsibility for the child.					
	Contact Name #1:		Contact Name #2:		Contact Name #3:	
	Relationship:		Relationship:		Relationship:	
	Cell Phone:		Cell Phone:		Cell Phone:	
	Home Phone:		Home Phone:		Home Phone:	
	Employer Phone:		Employer Phone:		Employer Phone:	

CUSTODY	Name of person PROHIBITED from picking up your child:	
	If a non-custodial parent has been denied access, or granted limited access, to the child by a court order, please submit documentation to this effect for the center to maintain a copy on file, and to comply with the terms of the court order.	

PERMISSIONS	☐ I give permission for my child to participate in <u>WALKING TRIPS</u> within the center's neighborhood, using routes that pose no known safety hazards to children, with the understanding that the walk involves no entrance into another facility unless otherwise indicated.	☐ I <u>DO NOT</u> permission for my child to participate in <u>WALKING TRIPS</u> within the center's neighborhood, using routes that pose no known safety hazards to children, with the understanding that the walk involves no entrance into another facility unless otherwise indicated.
	☐ I give permission for my child to be <u>PHOTOGRAPHED</u> during normal daycare hours, field trips, or activities and understand that photographs may be used in promoting child care services, either in print or on the Internet.	☐ I <u>DO NOT</u> give permission for my child to be <u>PHOTOGRAPHED</u> during normal daycare hours, field trips, or activities and understand that photographs may be used in promoting child care services, either in print or on the Internet.

RECEIPT OF POLICIES	I (we) attest that all of the information on this application is accurate, and that I (we) have received the following information: ☐ Center Policies and Procedures ☐ Information to Parents Document ☐ Policy on the Expulsion of Children from Enrollment ☐ Policy On The Use Of Technology And Social Media ☐ Policy On The Management Of Illnesses/Communicable Diseases ☐ Policy On The Release Of Children ☐ Policy on the Methods of Parental Notification of Injuries (if applicable) ☐ Other: _____ ☐ Other: _____
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MEDICAL INFORMATION	Child's Health Care Provider:	
	Health Care Provider Phone:	
	Health Care Provider Address:	
	Name Of Insurance Company/Hmo:	
	Group #:	
	Identification #:	
	Subscriber's Name On Insurance Card:	
	Known Allergies (including medication):	
	Medication My Child Is Taking:	
List Special Conditions, Disabilities, Medical/Physical Restrictions, Medical Information For Emergency Situations:		

HEALTH STATEMENT	As the parent/guardian of the above named child, I certify that he/she is in good physical health and may participate in the normal activities of the program and has no conditions or specific needs that require specific accommodations, unless otherwise indicated in the medical information provided above or an attached Universal Health Record or a Care Plan for Children with Special Health Needs. Parent/Guardian Initials: _____
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EMERGENCY TREATMENT	As the parent(s)/ legal guardian(s) of the above named child, I (we) attest that the information above is correct. I (we) authorize the child care center staff to obtain emergency treatment for my child and understand that I (we) shall be promptly notified. Parent/Guardian Initials: _____
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Parent/Guardian Signature #1:	Date:	Parent/Guardian Signature #2:	Date:
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PARENTAL AUTHORIZATION FOR EMERGENCY TREATMENT

Name Of Child:	Birthdate:	Enrollment Date:
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PARENT/GUARDIAN INFORMATION	☐ PARENT/GUARDIAN # 1		☐ PARENT/GUARDIAN # 2	
	Name:		Name:	
	Relationship:		Relationship:	
	Cell Phone:		Cell Phone:	
	Home Phone:		Home Phone:	
	Home Address:		Home Address:	
	Employer Name:		Employer Name:	
	Employer Phone:		Employer Phone:	
E-Mail Address:		E-Mail Address:		

EMERGENCY CONTACTS	Persons authorized to pick up your child and/or contact in case of emergency if neither parent is available to assume responsibility for the child.					
	Contact Name #1:		Contact Name #2:		Contact Name #3:	
	Relationship:		Relationship:		Relationship:	
	Cell Phone:		Cell Phone:		Cell Phone:	
	Home Phone:		Home Phone:		Home Phone:	
	Employer Phone:		Employer Phone:		Employer Phone:	

CUSTODY	Name of person PROHIBITED from picking up your child:
	If a non-custodial parent has been denied access, or granted limited access, to the child by a court order, please submit documentation to this effect for the center to maintain a copy on file, and to comply with the terms of the court order.

MEDICAL INFORMATION	Child's Health Care Provider:	
	Health Care Provider Phone:	
	Health Care Provider Address:	
	Name Of Insurance Company/Hmo:	
	Group #:	
	Identification #:	
	Subscriber's Name On Insurance Card:	
	Known Allergies (including medication):	
	Medication My Child Is Taking:	
List Special Conditions, Disabilities, Medical/Physical Restrictions, Medical Information For Emergency Situations:		

AUTHORIZATION FOR EMERGENCY MEDICAL TREATMENT

As the parent(s)/ legal guardian(s) of the above named child, I (we) attest that the information above is correct. I (we) authorize the child care center staff to obtain emergency treatment for my child and understand that I (we) shall be promptly notified.

Parent/Guardian Signature #1:	Date:	Parent/Guardian Signature #2:	Date:
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MEDICAL DECLARATION STATEMENT FOR SCHOOL-AGE CHILD CARE

(AND/OR FOR CHILDREN ENROLLED IN PUBLIC OR PRIVATE SCHOOL)

CHILD'S NAME:	DATE OF BIRTH:	GRADE IN SEPTEMBER:

HEALTH STATEMENT (CHECK ONE)

- ☐ My child is in good health and can participate in the normal activities of the program and has no conditions or special needs that require special accommodations.
- ☐ My child can participate in the normal activities of the program but has conditions or special needs that require special accommodations as indicated below.

SCHOOL-AGE CHILD'S SPECIAL CONDITIONS OR NEEDS REQUIRING SPECIAL ACCOMMODATIONS

Please list any allergies, medical conditions, including chronic health problems (such as asthma, seizures), behavioral disorders, special needs, etc.

PARENT/GUARDIAN SIGNATURE:	DATE:

Carteret Public Schools Before and After Care Program

Policy on the Use of Technology and Social Media

The Carteret Public Schools Before and After Care program maintains a "no-use" policy regarding social media and personal electronic devices to ensure the safety and privacy of all students and staff.

- **Social Media:** The program does not operate any social media, networking pages, or external websites.
- **Official Communication:** All specific or personal communication between the program and parents will be conducted exclusively via face-to-face interaction, phone calls, or official district email.
- **Staff Device Policy:** Staff members are prohibited from using personal electronic devices while on duty. The only authorized device is the district-issued computer used specifically for student sign-in/sign-out procedures.
- **Student Device Policy:** Students participating in the program are not permitted to use personal electronic devices (cell phones, tablets, gaming devices, etc.).

Please sign and return indicating that you have read and understood the Before and After Care program policy on the use of technology and Social Media.

Parent/Guardian Name (Printed): _____

Parent/Guardian Signature: _____ Date: _____

FORM 6

PARENT

RECEIPT OF INFORMATION:

- ☐ Information to Parents Document
- ☐ Policy on the Release of Children
- ☐ Policy on Methods of Parental Notification
(Applicable only if a method other than a phone call is used to notify parents of an injury to a child's head, a bite that breaks the skin, a fall from a height, or an injury requiring professional medical attention.)
- ☐ Policy on Communicable Disease Management
- ☐ Expulsion Policy
- ☐ Policy on the Use of Technology and Social Media

I have read and received a copy of the information/policies listed above.

Child(ren)'s Name: _____

Parent/Guardian's Name: _____

Signature

Date

Register for SchoolCash Online today

It's fast, easy & free

Create an account today so that you can be notified via email and pay for your child(ren) before and after school fees.

Why register?

- 24/7 shopping convenience
- Secure, contactless & easy-to-use
- Manage all of your child(ren)'s school activity fees from a single account
- Check your account history at any time
- View & print receipts as needed
- Eliminates the need for your child(ren) to carry cash

How to register

Go to **SchoolCash Online Registration Instructions** and click **Register**.

- Enter your first name, last name, email address, and create a password
- Select a security question
- Select **Yes** to receive email notifications (note that you will not receive any promotional emails)
- You will receive a confirmation via email. Check your Spam folder if you don't receive it.
- Use your email address and password to log in to your account.

How to add children to your account

- Sign in to **SchoolCash Online**:
<https://carteretschools.schoolcashonline.com/>
- At the top of the page, navigate to **My Account**.
- From the dropdown menu, select **My Students**.
- Click to add a child:
 - Type your school board name.
 - Choose your school from the list.
 - Enter your child's details. You may add up to 8 students to your account.
 - Click **Confirm**.

How to make a payment

- Select the item which you would like to purchase & click **Add to Cart**.
- Once you have finished adding items to your cart, click **Continue** to make a payment.



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INFORMATION TO PARENTS

Under provisions of the **Manual of Requirements for Child Care Centers (N.J.A.C. 3A:52)**, every licensed child care center in New Jersey must provide to parents of enrolled children written information on parent visitation rights, State licensing requirements, child abuse/neglect reporting requirements and other child care matters. The center must comply with this requirement by reproducing and distributing to parents and staff this written statement, prepared by the Office of Licensing, Child Care & Youth Residential Licensing, in the Department of Children and Families. In keeping with this requirement, the center must secure every parent and staff member's signature attesting to his/her receipt of the information.

Our center is required by the State Child Care Center Licensing law to be licensed by the Office of Licensing (OOL), Child Care & Youth Residential Licensing, in the Department of Children and Families (DCF). A copy of our current license must be posted in a prominent location at our center. Look for it when you're in the center.

To be licensed, our center must comply with the Manual of Requirements for Child Care Centers (the official licensing regulations). The regulations cover such areas as: physical environment/life-safety; staff qualifications, supervision, and staff/child ratios; program activities and equipment; health, food and nutrition; rest and sleep requirements; parent/community participation; administrative and record keeping requirements; and others.

Our center must have on the premises a copy of the Manual of Requirements for Child Care Centers and make it available to interested parents for review. If you would like to review our copy, just ask any staff member. Parents may view a copy of the Manual of Requirements on the DCF website at <http://www.nj.gov/dcf/providers/licensing/laws/CCCmanual.pdf> or obtain a copy by sending a check or money order for \$5 made payable to the "Treasurer, State of New Jersey", and mailing it to: NJDCF, Office of Licensing, Publication Fees, PO Box 657, Trenton, NJ 08646-0657.

We encourage parents to discuss with us any questions or concerns about the policies and program of the center or the meaning, application or alleged violations of the Manual of Requirements for Child Care Centers. We will be happy to arrange a convenient opportunity for you to review and discuss these matters with us. If you suspect our center may be in violation of licensing requirements, you are entitled to report them to the Office of Licensing toll free at 1 (877) 667-9845. Of course, we would appreciate your bringing these concerns to our attention, too.

Our center must have a policy concerning the release of children to parents or people authorized by parents to be responsible for the child. Please discuss with us your plans for your child's departure from the center.

Our center must have a policy about administering medicine and health care procedures and the management of communicable diseases. Please talk to us about these policies so we can work together to keep our children healthy.

Our center must have a policy concerning the expulsion of children from enrollment at the center. Please review this policy so we can work together to keep your child in our center.

Parents are entitled to review the center's copy of the OOL's Inspection/Violation Reports on the center, which are available soon after every State licensing inspection of our center. If there is a licensing complaint

investigation, you are also entitled to review the OOL's Complaint Investigation Summary Report, as well as any letters of enforcement or other actions taken against the center during the current licensing period. Let us know if you wish to review them and we will make them available for your review or you can view them online at <https://childcareexplorer.njccis.com/portal/>.

Our center must cooperate with all DCF inspections/investigations. DCF staff may interview both staff members and children.

Our center must post its written statement of philosophy on child discipline in a prominent location and make a copy of it available to parents upon request. We encourage you to review it and to discuss with us any questions you may have about it.

Our center must post a listing or diagram of those rooms and areas approved by the OOL for the children's use. Please talk to us if you have any questions about the center's space.

Our center must offer parents of enrolled children ample opportunity to assist the center in complying with licensing requirements; and to participate in and observe the activities of the center. Parents wishing to participate in the activities or operations of the center should discuss their interest with the center director, who can advise them of what opportunities are available.

Parents of enrolled children may visit our center at any time without having to secure prior approval from the director or any staff member. Please feel free to do so when you can. We welcome visits from our parents.

Our center must inform parents in advance of every field trip, outing, or special event away from the center, and must obtain prior written consent from parents before taking a child on each such trip.

Our center is required to provide reasonable accommodations for children and/or parents with disabilities and to comply with the New Jersey Law Against Discrimination (LAD), P.L. 1945, c. 169 (N.J.S.A. 10:5-1 et seq.), and the Americans with Disabilities Act (ADA), P.L. 101-336 (42 U.S.C. 12101 et seq.). Anyone who believes the center is not in compliance with these laws may contact the Division on Civil Rights in the New Jersey Department of Law and Public Safety for information about filing an LAD claim at (609) 292-4605 (TTY users may dial 711 to reach the New Jersey Relay Operator and ask for (609) 292-7701), or may contact the United States Department of Justice for information about filing an ADA claim at (800) 514-0301 (voice) or (800) 514-0383 (TTY).

Our center is required, at least annually, to review the Consumer Product Safety Commission (CPSC), unsafe children's products list, ensure that items on the list are not at the center, and make the list accessible to staff and parents and/or provide parents with the CPSC website at <https://www.cpsc.gov/Recalls>. Internet access may be available at your local library. For more information call the CPSC at (800) 638-2772.

Anyone who has reasonable cause to believe that an enrolled child has been or is being subjected to any form of hitting, corporal punishment, abusive language, ridicule, harsh, humiliating or frightening treatment, or any other kind of child abuse, neglect, or exploitation by any adult, whether working at the center or not, is required by State law to report the concern immediately to the *State Central Registry Hotline, toll free at (877) NJ ABUSE/(877) 652-2873*. Such reports may be made anonymously. Parents may secure information about child abuse and neglect by contacting: DCF, Office of Communications and Legislation at (609) 292-0422 or go to www.state.nj.us/dcf/.

EXPULSION POLICY

NAME OF CENTER: CBOE

Unfortunately, there are sometimes reasons we have to expel a child from our program either on a short term or permanent basis. We want you to know we will do everything possible to work with the family of the child(ren) in order to prevent this policy from being enforced.

The following are reasons we may have to expel or suspend a child from this center:

IMMEDIATE CAUSES FOR EXPULSION:

- The child is at risk of causing serious injury to other children or himself/herself.
- Parent threatens physical or intimidating actions toward staff members.
- Parent exhibits verbal abuse to staff in front of enrolled children

PARENTAL ACTIONS FOR CHILD'S EXPULSION:

- Failure to pay/habitual lateness in payments.
- Failure to complete required forms including the child's immunization records.
- Habitual tardiness when picking up your child.
- Verbal abuse to staff.
- Other (explain)

CHILD'S ACTIONS FOR EXPULSION:

- Failure of child to adjust after a reasonable amount of time.
- Uncontrollable tantrums/ angry outbursts.
- Ongoing physical or verbal abuse to staff or other children.
- Excessive biting.
- Other (explain)

SCHEDULE OF EXPULSION:

If after the remedial actions above have not worked, the child's parent/guardian will be advised verbally and in writing about the child's or parent's behavior warranting an expulsion. An expulsion action is meant to be a period of time so that the parent/ guardian may work on the child's behavior or to come to an agreement with the center. The parent/guardian will be informed regarding the length of the expulsion period and the expected behavioral changes required in order for the child or parent to return to the center. The parent/guardian will be given a specific expulsion date that allows the parent sufficient time to seek alternate child care (approximately one to two weeks' notice depending on risk to other children's welfare or safety). Failure of the child/parent to satisfy the terms of the plan may result in permanent expulsion from the center.

A CHILD WILL NOT BE EXPELLED IF A PARENT/GUARDIAN:

- Made a complaint to the Office of Licensing regarding a center's alleged violations of the licensing requirements.
- Reported abuse or neglect occurring at the center.
- Questioned the center regarding policies and procedures.
- Without giving the parent sufficient time to make other child care arrangements.

PROACTIVE ACTIONS THAT CAN BE TAKEN IN ORDER TO PREVENT EXPULSION:

- Try to redirect child from negative behavior.
- Reassess classroom environment, appropriateness of activities, supervision.
- Always use positive methods and language while disciplining children.
- Praise appropriate behaviors.
- Consistently apply consequences for rules.
- Give the child verbal warnings.
- Give the child time to regain control.
- Document the child's disruptive behavior and maintain confidentiality.
- Give the parent/guardian written copies of the disruptive behavior that might lead to expulsion.
- Schedule a conference including the director, classroom staff, and parent/guardian to discuss how to promote positive behaviors.
- Give the parent literature of other resources regarding methods of improving behavior.
- Recommend an evaluation by professional consultation on premises.
- Recommend an evaluation by local school district study team.

Policy on the Management of Communicable Diseases

If a child exhibits any of the following symptoms, the child should not attend the center. If such symptoms occur at the center, the child will be removed from the group, and parents will be called to take the child home.

- Severe pain or discomfort
- Acute diarrhea
- Episodes of acute vomiting
- Elevated oral temperature of 101.5 degrees Fahrenheit
- Lethargy
- Severe coughing
- Yellow eyes or jaundiced skin
- Red eyes with discharge
- Infected, untreated skin patches
- Difficult or rapid breathing
- Skin rashes in conjunction with fever or behavior changes
- Skin lesions that are weeping or bleeding
- Mouth sores with drooling
- Stiff neck

Once the child is symptom-free, or has a health care provider's note stating that the child no longer poses a serious health risk to himself/herself or others, the child may return to the center unless contraindicated by local health department or Department of Health.

EXCLUDABLE COMMUNICABLE DISEASES

A child or staff member who contracts an excludable communicable disease may not return to the center without a health care provider's note stating that the child presents no risk to himself/herself or others.

Note: If a child has chicken pox, a note from the parent stating that all sores have dried and crusted is required.

If a child is exposed to any excludable disease at the center, parents will be notified in writing.

COMMUNICABLE DISEASE REPORTING GUIDELINES

Some excludable communicable diseases must be reported to the health department by the center. The Department of Health's Reporting Requirements for Communicable Diseases and Work-Related Conditions Quick Reference Guide, a complete list of reportable excludable communicable diseases, can be found at:

http://www.nj.gov/health/cd/documents/reportable_disease_magnet.pdf.

POLICY ON THE RELEASE OF CHILDREN

Each child may be released only to the child's parent(s) or person(s) authorized by the parent(s) to take the child from the center and to assume responsibility for the child in an emergency if the parent(s) cannot be reached.

If a non-custodial parent has been denied access, or granted limited access, to a child by a court order, the center shall secure documentation to that effect, maintain a copy on file, and comply with the terms of the court order.

If the parent(s) or person(s) authorized by the parent(s) fails to pick up a child at the time of the center's daily closing, the center shall ensure that:

1. The child is supervised at all times;
2. Staff members attempt to contact the parent(s) or person(s) authorized by the parent(s); and
3. An hour or more after closing time, and provided that other arrangements for releasing the child to his/her parent(s) or person(s) authorized by the parent(s), have failed and the staff member(s) cannot continue to supervise the child at the center, the staff member shall call the *24-hour State Central Registry Hotline 1-877-NJ-ABUSE (1-877-652-2873)* to seek assistance in caring for the child until the parent(s) or person(s) authorized by the child's parent(s) is able to pick-up the child.

If the parent(s) or person(s) authorized by the parent(s) appears to be physically and/or emotionally impaired to the extent that, in the judgment of the director and/or staff member, the child would be placed at risk of harm if released to such an individual, the center shall ensure that:

1. The child may not be released to such an impaired individual;
2. Staff members attempt to contact the child's other parent or an alternative person(s) authorized by the parent(s); and
3. If the center is unable to make alternative arrangements, a staff member shall call the *24-hour State Central Registry Hotline 1-877-NJ-ABUSE (1-877-652-2873)* to seek assistance in caring for the child.

For school-age child care programs, no child shall be released from the program unsupervised except upon written instruction from the child's parent(s).