## Fox Chapel Area School District Pre-Kindergarten Program PARENTAL COMMITMENT FORM 2023-2024 SCHOOL YEAR

By signing this form, I understand that I am making a commitment as a parent to the Fox Chapel Area School District Pre-Kindergarten Program.

- 1. I understand that my child will attend Kerr Elementary School for the Pre-Kindergarten program and return to his/her home school for the remaining elementary years.
- 2. I understand that my child must be toilet-trained in order to be eligible for the program. Training pants are not permitted and my child is able to use the bathroom without adult assistance.
- 3. I understand that I must be able to provide transportation to and from school for my child every day.
- 4. I understand that after 10 absences, my child may be withdrawn from the program.
- 5. I understand that the program runs five days a week from 8:30 a.m. to 3 p.m. and follows the Fox Chapel Area School District school calendar.
- 6. I understand that parental involvement is highly correlated with success at school. I will support my child by attending the parent involvement offerings hosted by the school. This can include, but is not limited to, literacy and math family nights, parent/teacher conferences, etc.
- 7. I understand that if my child has any academic/behavior/attendance concerns I will address my concerns directly with the classroom teacher. Appropriate interventions/strategies will be implemented. If documented interventions are unsuccessful, a formal conference with the building principal, parents, student, and teacher will take place, and may result in withdrawal from the program.

Thank you for your interest in the FCASD Pre-Kindergarten program! We are here to support your child as he/she develops skills that will positively affect your child for the rest of his/her life.

## Please sign and return this form to Dr. Ashley Constantine, Executive Director of Elementary Education and Instruction.

I have read/acknowledged the Pre-Kindergarten Parental Commitment Form.
Child's Name
Current Home School
Parent/Guardian (printed name)
Parent/Guardian Signature Date
District Staff Signature Date



## **FCASD PRE-KINDERGARTEN WEBSITE:**

prek.fcasd.edu

## **CONTACT INFORMATION**

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