



Alternative Suspension and Accountability Program (A.S.A.P)

Located at ESCAPE YFGK
202 E. 32nd Street / Holland, MI 49423
Monday – Friday 9:00am to 1:00pm

Dear Parent/Legal Guardian,

ESCAPE YFGK has developed an alternative program for students who are either suspended or expelled from school. This program provides a safe and educational environment for students while they serve their time out of school. We aim for peace, restoration, academic progress, and holistic growth.

A.S.A.P. is a free program offered to students in the Holland/Zeeland/West Ottawa communities between 6th and 12th grade. Students will need to be reinstated prior to graduation in order to earn their diploma. **Placement in the A.S.A.P. is subject to approval by staff and dependent on program capacity.** Applicants will be placed on a waiting list if the program is full at time of application.

To apply and participate in the program:

1. Parent/Guardian must complete attached forms
2. Parent and student must schedule and attend an intake meeting
3. Student participates in goal setting during their time in ASAP
4. Student is expected to follow all rules, expectations and participate in ASAP activities/field trips

For more information about A.S.A.P. or to enroll your student, please call 616-396-4481 ext. 205 or email our Education Director at education@escape-out.org.

Sincerely,

Escape Ministries Staff



Student Code of Conduct

Safety:

- I understand that possession of **weapons** of any kind on Escape property will result in dismissal.
- I understand that the possession of **medication, illegal substances, alcohol, or vape/dab pens**, on Escape property will result in immediate dismissal.
- I understand that **violence or violent threats** of any kind will result in immediate dismissal.
- I understand that, for the safety of myself and others, I am not allowed to transport other students to and from Escape.
- I will not engage in **public display of affection** or inappropriate touching, whether wanted or unwanted, on Escape property.

Ownership:

- I understand that I will be expected to continue completing assignments & putting forth effort unless instructed otherwise.
- I will accept assignments and tasks **without complaining**, working agreeably with staff & volunteers.
- I understand that I will be expected to be alert throughout the day and need to **be well-rested**.
- I will keep my workspace organized, know my logins and passwords, and **clean up my space**.
- I understand listening to music is a privilege and is only allowed after meeting individual daily assignment goals that are discussed with my Escape Learning Coach.
- I understand that copying test and/or assignment questions from the internet, or another student, is considered plagiarism and is not permitted.
- I understand that the attendance points are here to support my learning and keep me accountable to my schedule and absences.

Communication:

- I will communicate with Escape staff when I am not feeling well or needing to “tap out”.
- I will not use **offensive language** of any kind.
- I understand that my **cell phone will be collected** at the start of the academic school day.

Respect:

- I agree to abide by these guidelines while in the Escape parking lot, in the Escape building, while using Escape transportation services, and/or on an off-campus trip with Escape.
- I know and agree that I **will not eat or drink in the van** (only water is allowed).
- I will be responsible for my trash in the van and **help keep the vans clean**.

Dress Code:

- I understand that I am not permitted to wear tank tops, muscle shirts, running shorts, pajama bottoms, see through clothing, or clothing that exposes the midriff or cleavage.
- I understand that shorts, skirts, and dresses must extend below my fingertips.
- I understand that I will have to wear my pants at or above the waist.
- I understand that the clothes I wear need to be free from offensive or inappropriate content. I understand that if a staff asks me to change it is because it is violating the dress code and I will need to change into what is provided at Escape or make arrangements in a timely manner.

I, _____ understand that I need to follow the Code of Conduct and if I am not following the Code of Conduct, I understand that I will be receiving attendance penalty points which could affect my placement in ASAP.



Attendance:

Prompt attendance at all work sessions and other scheduled **A.S.A.P.** commitments are required. The learning experience is central to educating young people in the practice of articulating their ideas, expressing understanding, seeking clarification, and absorbing information. Additionally, regular attendance is seen as a clear expression of dedication to the A.S.A.P program and is reviewed as part of their petition to return to their school.

Students who miss more than the equivalent of 6 full days of school may be dismissed from the program based on a review by the Education Director and Learning Coaches.

Daily Schedule Penalty Points	
9:00am – 9:10am	Arrive, Breakfast, Hangout (.25pt)
9:10am – 9:20am	Morning Meeting (.25pt)
9:20am – 10:20am	Work Session 1 (1pt)
10:20am – 10:25am	Break (.05pt)
10:25am – 11:15am	Work Session 2 (1pt)
11:15am – 11:45am	Lunch (.25pt)
11:45am – 12:25pm	Work Session 3 (1pt)
12:25pm – 12:30pm	Break (.05pt)
12:30pm – 12:50pm	Work Session 4 (1pt)
12:50pm – 1:00pm	Clean up/Dismissal (.15pt)

Total: 5 points

Points will reset at the start of every semester.



Virtual Appointments: Students may request a virtual tutoring session with their Learning Coach. The Learning Coach will extend a 15-minute time window from their start time. If a student does not show up within that 15-minute time window, or communicate before the scheduled meeting, they will receive 1 attendance point.

Excused Absences: Students may request permission to miss school for an outside obligation. These may include but are not limited to court appearances, medical/dental appointments, school hearings or family vacation. These requests must be made in advance by a parent/guardian via phone call or email.

Unexcused Absences and Tardiness: Students who miss school without proper notification or special permission will accumulate attendance points for all missed obligations. Students who arrive late to school will receive attendance points equivalent to the level of tardiness. Please see the Attendance Points and Tracking policy below for a more complete description of the policy and the consequences of unexcused absences.

Attendance Points and tracking:

15pts (the equivalent of 3 days) - Education Director calls home to notify family

20pts (the equivalent of 4 days) - A level 1 write up is issued and a student meeting Education Director or their Learning Coach

25pts (the equivalent of 5 days) - A level 2 write up is issued, the student is required to serve an after school make up session and the student meets with the Education Director.

30pts (the equivalent of 6 days) - A level 3 write up is issued and the student is considered for dismissal. If dismissed, the student is responsible for setting up a disciplinary hearing.

Tardiness/Other:

Swearing/Profanity -0.50pts

Miss the bus0.50pts

Cellphones: All students have been made aware and have agreed to the cell phone policy. If a student refuses to turn it in the morning or if it is found on the student/in the student's possession the student will be asked to turn the phone in. If the student does this willingly, no further action will be taken. If not, the Education Director or Learning Coach will call home.

Afterschool forgiveness: Students may utilize the afterschool forgiveness option twice a semester. In order to remove 5 attendance points from their total, **they are able to stay after school during the Escape Zone Tutoring Program.** They must participate for two consecutive days (Tuesday *and* Thursday). They are able to utilize this forgiveness option twice and will not be allowed anything more than that.



Three Way Contract

It takes a **team** to make this work. No one wants to be kicked out of school, but we're going to make the best of it we can. By signing this contract, you agree to doing your part.

Student Commitment

I, _____, understand the rules and expectations and agree to always follow them. I am going to be respectful, ready to learn, safe, and present. I will trust that staff are working in my best interest. My presence will only affect the progress and growth of those around me in a positive way. I will communicate clearly, often, and respectfully with Escape staff and my parent/guardian, knowing that we are all on the same team for my success. I understand that if I fail to follow with the rules and expectations that there will be disciplinary action that could result in dismissal from the program.

Signature

(Student)

Date

Parent/Guardian Commitment

I, _____, understand the rules and expectations and agree to help my child follow them. I will do my best to ensure that my student receives an adequate amount of sleep each night, wears clothing that abides by the dress code, and is transported to and from Escape on-time (if providing my own transportation). I understand that I am expected to communicate with the Education Director in advance about any absences or appointments. I will notify the Education Director before 7:00am if my student does not require Escape's Transportation services that day. I understand that if my child fails to follow the rules and expectations, that there will be disciplinary action that could require my participation OR that could result in dismissal from the program.

Signature

(Parent/Guardian)

Date

Escape Staff Commitment

I, _____, understand the rules and expectations and agree to hold the student accountable to them. As a staff we accept the student for who he/she is and commit to caring for the student as best we can, working towards their peace, restoration, academic progress, and holistic growth. We will communicate with the student and with parent/guardian, as often as necessary, knowing that we are on the same team for the success of the student.

Signature

(Escape Staff)

Date



Intake Student Survey

1) On a scale 1-10 how do you feel about being dismissed from school?

1- Not concerned

5- Neither good nor bad

10 - I feel horrible...

2) How was your attendance prior to your suspension/expulsion?

3) On average, throughout the school week how many days do you feel happy or positive?

4) How are you doing in school?

a) A-B's

b) B's-C's

c) C's-D's

d) Failing most of my classes

5) How do you feel about school? What classes do you enjoy? What classes do you find challenging?

6) Can you list 3 things you are proud of? Things you are proud you have done or accomplished?

7) Where is your safe place?

8) What things help you feel less stressed or anxious?



Student and Family Information Form

Which program(s) will the student be participating in? (check all that apply)

A.S.A.P. (Mon-Fri) Tutoring (Tu/Th) The FAM. (Mon) Career Connections (Summer)

Student Name: _____

Date of Birth: _____ Age: _____

Complete Address: _____

Student Phone: (_____) _____ Student Email: _____

School Attending/Last Attended: _____ Grade: _____

Reason for Suspension/Expulsion: _____

Length of Suspension/Expulsion: _____ Return Date: _____

Does the student receive any specialized services (ex. ELL, IEP, 504, ESS)? YES NO

If YES, please explain (if your student has an IEP, please provide a copy):

Is the student currently taking any medication? YES NO

If YES, please list all medications below:

Does the student have any ALLERGIES or CONDITIONS we should know about? (ex. ADD, ADHD, Asthma, Anxiety, Depression, Suicidal, Drug Use) Please explain:

***Please be aware that Escape Ministries/A.S.A.P. Staff will NOT administer any medication without doctor consent. This includes over-the-counter medicines. Students may NOT self-administer any medication while at Escape.**



1st Parent/Guardian Name: _____ **Relation to Student:** _____

1st Parent/Guardian Email: _____ **Phone:** (____) _____

Current Workplace: _____ **Current Workplace Phone Number:** (____) _____

2nd Parent/Guardian Name: _____ **Relation to Student:** _____

2nd Parent/Guardian Email: _____ **Phone:**(____) _____

Current Workplace: _____ **Current Workplace Phone Number:** (____) _____

Emergency Contact Name (Required): _____ **Relation to Student:** _____

Emergency Contact Email: _____ **Phone:** (____) _____

Current Workplace: _____ **Current Workplace Phone Number:** (____) _____

Emergency Contact Name (Optional): _____ **Relation to Student:** _____

Emergency Contact Email: _____ **Phone:** (____) _____

Current Workplace: _____ **Current Workplace Phone Number:** (____) _____

The following information will not be used individually, but grouped together for grant purposes and kept confidential:

How many people are in your household? Adults: _____ **Children (under the age of 18):** _____

Does your child receive free or reduced lunch? Yes No

What is your yearly household income? below \$5,000 \$5,000-\$9,999 \$10,000-\$24,999

\$25,000-\$49,999 \$50,000 or above



Parent/Guardian Liability of Release and Release of Information Form

_____ I give my permission for my child to participate in Escape Ministries activities and programs. I **accept responsibility in the unlikely event that an accident might take place.** I hereby certify that I carry health and/or accident insurance for my child and that I am solely responsible for the cost of health care for my child, even as a result of my child's participation in programs or activities.

_____ I give permission for Escape Ministries personnel to provide **transportation** for my child using Escape vehicles while my child is involved in programs, activities, and field trips related to Escape. I also understand that my dependent will be under Escape supervision throughout the duration of any off-campus activities.

_____ I **release** Escape Ministries and their respective staff, volunteers, partners, and Board members (collectively "Providers") from all liability for the injury or property loss/damage that could result from participation in activities conducted by or on behalf of Escape Ministries whether on Escape property, or at any off-site activity.

_____ I give permission to allow Escape Ministries staff, volunteers, and partnering organizations to use my **child's image and first name** to appear in photo, video and text in **print, website, and social media.**

_____ I agree to assume all risks associated with participation in Escape Ministries' **West Side Boxing & Fitness Program** ("Activities") and to release Escape Ministries, their staff, Board members, and volunteers from any claims arising out of, or in any way related to, the Activities or the premises on which the Activities are conducted.

_____ I give permission for ongoing **communication** (in person, emails, phone, or online) to take place between Escape Ministries staff/Board, School District staff, probation officers, CPS/DHS/CMH case workers and counselors/therapists. This communication includes, but is not limited to, academic progress (grades, teacher comments/concerns, attendance), behavioral issues, and any specialized learning services such as ELL, IEP or 504.

_____ I give my consent to allow my child to **complete a survey** and/or evaluation and to be included in any reporting deemed necessary by Escape Ministries or School District Staff with the knowledge and understanding that confidentiality will be upheld.

_____ In case of a serious accident or illness to my child, I authorize Escape staff and my child's physician to **give any necessary treatment** to my child, understanding Escape will communicate with me as soon as possible in an emergency. I agree that I am solely responsible for updating medical information to Escape.

My signature certifies that I **have read and understood this release** and that I am surrendering forever any claim and/or right to seek legal action leading up to and including financial gain.

Signature: _____ **Printed Name:** _____ **Date:** _____

