The Jewish Congregation of New Paltz HEBREW SCHOOL INFORMATION 2023-2024

Please review the general class schedule below, noting the start dates and times.

Our Chaverim Arts class is for pre-school through 2nd graders and their parents. The class is open to members and non-members and highlights the arts and holidays. For more information contact Scott Minkoff at sminkoff@gmail.com.

Registration forms must be filled out and returned promptly for <u>all</u> classes, along with the corresponding tuition/fee payment and membership forms.

If you have any questions, please contact the JCNP office, 845-255-9817 <u>jcnpoffice@gmail.com</u> or Jamie Scarpati at <u>scarpatifamily@gmail.com</u>.

2023-2024 CLASS SCHEDULES

Class	Day	Time	Start Date
Pre-K, 1, 2 (Chav. Arts)	TBD	TBD	TBD
Grade 3 (Gimmel)	Thursday	4:00 p.m. – 5:30 p.m.	9/21/22
Grade 4 (Dalet)	Thursday	4:00 p.m. – 5:30 p.m.	9/21/22
Grade 5 (Hey)	Thursday	4:00 p.m. – 5:30 p.m.	9/21/22
Grade 6 (Vav)	Thursday (w/ one Saturday per month)	3:30 p.m. – 5:30 p.m. 10:00 a.m. –11:30 a.m.	9/21/22
Grade 7 (B'ney Mizvah)	Thursday (w/ one Saturday per month)	3:30 p.m. – 5:30 p.m. 10:00 a.m. –11:30 a.m.	9/21/22

2023-2024 TUITION & FEES

Class	Tuition
Pre-K, 1, 2 (Chaverim Arts)	No Charge
Grade 3,4,5 (Gimmel, Dalet, Hey)	\$460
Grade 6 (Vav)	\$650
Grade 7 (B'ney Mizvah)	\$650 (+ \$1,500 tutoring*) = \$2,150

^{*}Tutoring fee may be different if alternative arrangements have been discussed with Rabbi Adam.

The Jewish Congregation of New Paltz HEBREW SCHOOL REGISTRATION FORM 2023-2024

Student's Name (1):				DOB:		
	First	Middle	Last			
Secular School:			Secular Gr	Secular Grade as of Sept. 2023		
Please register my o		Chaverim Arts	OR the following	OR the following Hebrew School		
	would n	nake your child's Heb	nmodations or strategion rew School experience	es that have been employed in other e more successful.		
Student's Name (2):	First	Middle	Last	DOB:		
Secular School:			Secular Grade as of Sept. 2023			
Please register my c Class/Grade			OR the following I	Hebrew School		
	would n	nake your child's Heb	nmodations or strategic rew School experience	es that have been employed in other e more successful.		
Parent/Guardian (1)			Daytime P	hone:		
Address:Street Email:		City	Zip	none:		
Occupation:			Employer:			
* May we email y	ou as a m	ethod of contact for class ar	nouncements, information, et	c? Yes No No		
Parent/Guardian (2)			Daytime P	hone:		
Address:		City	Home Ph	none:		
Street Email:			Zip Mobile P	hone:		
Occupation:			Employer:			
* May we email y	ou as a m	ethod of contact for class ar	nouncements, information, et			

The Jewish Congregation of New Paltz HEBREW SCHOOL EMERGENCY/PERMISSION FORM 2023-2024

My child, in grade, is in good physical health and does not have any physical disabilities which require attention, unless otherwise noted below on this form, or submitted in writing.
It is my understanding that all medical attention and/or health care needed, if necessary, in an emergency will be billed to me.
Signature of parent or guardian
Full name of child
Medical insurance and policy number
Doctor's Name:Phone number:
Special information, allergies, etc
Please submit any special instructions in writing to the Hebrew school office and your child's teachers.
Emergency Contacts
Name:Relationship to child:
Phone:Cell:
Name:Relationship to child:
Phone:Cell:
Permission to walk to Shul
Please initial here, allowing your child to walk from school to the Community Center.
Permission for Photographs and Publicity
Please initial here, allowing us to put pictures of your child, individually, in group settings, or with other students, on our website and/or other publicity materials for education and advertising purposes.
Permission to include in Class List
Please initial here, to allow us to publish your child's name, your name and your contact information in a class list to be distributed to your child's class only.
Pickup from Hebrew School
Please indicate who, other than parents/guardians and emergency contacts, is authorized to pick up your child from Hebrew School. Anyone not named here <i>must</i> be identified <i>by you</i> , in advance, to Djuna and/or your child's teacher.

The Jewish Congregation of New Paltz HEBREW SCHOOL BEHAVIOR POLICY 2023-2024

Hebrew school students are expected to show respect for their teachers and fellow classmates, for learning and the traditions they are studying and to understand the behavior that is expected of them.

All of our teachers work to create classroom environments that are conducive to learning and safe for students to take the risks necessary for learning and engaging. With the guidance of the Hebrew School Committee, teachers have the discretion to implement natural consequences to match any classroom misbehavior (see below). If, however, students persistently disrupt a class, parents will be held accountable and the Hebrew School Committee will review the students' suitability for the class.

Please review these rules with your child. Both student and parent should sign below to acknowledge receipt and discussion of this behavior policy.

Classroom rules include, but are not limited to:

- Be cooperative
- Use proper language in class
- Be prepared
- Be an active listener
- Follow safety rules
- Turn assignments in on time
- Demonstrate respect for yourself, teachers, classmates, property, and materials
- Follow the teacher's instructions during work time.
- Keep your hands, feet and objects to yourself
- Raise your hand and wait to be called on before you speak
- Ask permission to leave the classroom

CONSEQUENCES will be administered after a child is reminded of the class rules more than once. These consequences may include, but are not limited to:

- Removal from the classroom so that the student can regroup and rejoin class
- Restricted activity or losing a privilege
- Student apology to teacher and/or class
- Contract [between teacher and pupil]
- Letter home to parents
- Phone call to parents; may require immediate pick-up from Hebrew School.
- Student-parent-teacher-Hebrew School Committee member conference
- Parental attendance in class with student

Date:		
Student Name:	Student Signature:	
Parent Name:	Parent Signature	