



# Serendipity Learning Center

410 Ridge Road, Fern Park FL, 32730 : 407.262.0010 : Fax- 407.205.0019

## Absence & Tardiness Policy

Daily attendance in the VPK program is necessary for optimal learning, however, you will be allowed (3) absences per month. Any absences beyond those require a written note from the parent for one of the following reasons:

- Illness or injury of the child or the child’s family member which requires hospitalization or bed rest;
- Physician or dentist appointment; Infectious disease or parasitic infestation;
- Funeral service, memorial service, or bereavement upon the death of the child’s family member;
- Compliance with a court order (e.g. visitation, subpoena);
- Special education or related services for the child’s disability;
- Observance of a religious holiday or service;
- Family vacation, not to exceed 5 excused absences per program year.

Please note: Absences of 5 consecutive instructional days will be considered a withdrawal from the VPK program at Serendipity Learning Center. Withdrawals from the VPK program will not be eligible for re-enrollment. Serendipity Learning Center will allow one documented 5-day absence during the 180 day instructional period. Documentation must be submitted in advance, explain the reason for the 5-day absence, and be dated and signed by the child’s legal custodial adult.

### Tardiness:

Programming begins promptly and when a child is late to class they miss important information. Children may be dismissed from the program once they are tardy more than 3 times.

### Verifying your child’s attendance and absences:

Serendipity Learning Center will notify you to stop by the office the end of each month. You will be given Form OEL-VPK 03L to review and confirm your child’s recorded attendance for the month. Your signature on this form will not only verify the attendance, but also will direct the Early Learning Coalition of Seminole to direct payment for the month’s VPK program for your child to Serendipity Learning Center, and that you continue to choose Serendipity Learning Center to provide your child’s VPK program for the upcoming month.

To participate in the VPK Program at Serendipity Learning Center, I agree to comply with the terms of this Absence and Tardiness Policy. My signature below is acknowledgement of my review and acceptance of the terms of this policy.

\_\_\_\_\_  
Child’s Name

\_\_\_\_\_  
Printed name of Parent/Guardian

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date