

NORTHEAST SOUTH DAKOTA HEAD START PROGRAM, INC.

ATTENDANCE POLICY

When the monthly average daily attendance rate in a Center-based program falls below 85%, the program will analyze the causes of absenteeism.

Documentation of daily attendance for each child will be maintained in the computerized child tracking system (Child Plus).

The Head Start Family Services Coordinator will make a home visit or other direct contact after a child has three consecutive days of unexcused absence. If absences are due to family circumstances, appropriate family support measures will be initiated. All family support measures initiated due to attendance problems will be documented in Child Plus. Parent(s) are informed that failure to contact the Center/Home Base unit may result in the child being dropped from the program.

When chronic absenteeism persists, the Office Manager, upon recommendation of the staffing team, sends a letter to the family stating the child has been placed on the program's waiting list and their slot given to another child. This policy will be implemented in the following situations:

- a. Children who have unexcused absences in excess of 2 weeks;
- b. Children who have excused absences in excess of 3 weeks (will not apply to long-term illnesses);
- c. Children whose attendance has fallen below 85% for 2 consecutive months for causes other than illness.

The Office Manager must be contacted to review the situation before the child is dropped from the program. The Office Manager will also discuss the situation with the Executive Director, Education and/or Family Services Managers.

3/8/2011

Date: _____

To the Parents of: _____

The purpose of this letter is to encourage you to contact the Head Start Center within 3 days of receipt of this letter to discuss your child's chronic absenteeism and his/her return to the classroom/home base. We realize children are absent for various reasons. We want to work with you and, if possible, provide assistance or referrals to resolve problems that result in your child not attending the program.

Please contact the Center/Home Visitor within 3 days. Your child will be withdrawn from the program if you fail to reply to this letter. Please call, come by the Center or let us know how we can work with you so that your child remains in the program. Thank you.

Contacts:

Center/Home Base Name: _____

Center/Home Visitor Address/Telephone Number:

Family Services Coordinator: _____

Teacher/Home Visitor:
