

**RMS**  
**COOPERATIVE HOMEWORK ASSISTANCE PROGRAM (CHAP)**  
**2019-2020**

The primary goal of "Homework Room" continues to be student self-management. CHAP is a supportive program that provides structure and assistance that may, at times, be unavailable to students at home. It can also function as a prescribed study time for a student who is not demonstrating a responsible approach to completing required homework in a timely fashion. **Homework Room is not designed to provide after-care; it is not a detention hall; nor can it replace the importance of parental supervision of homework.**

After-school Homework Room operates Monday-Thursday, as long as a full day of school has preceded the scheduled session. This year, Homework Room will be scheduled from **2:25pm until 4:00pm**. Homework Room will begin **Monday, September 16<sup>th</sup>**.

Students may choose to attend Homework Room for any portion of its operating hours. Students often find that the quiet, supervised work time is adequate to complete or nearly complete their assigned homework, leaving them more free time for their families, friends and outside activities. Some students feel they are better able to concentrate on assignments in the Homework Room than at home, where distractions may abound. Additionally, teammates who are collaborating on a 'group project' find that Homework Room serves as a perfect meeting place.

Because Readington is a large district with no public transportation, Homework Room also helps facilitate our extra-curricular programs. If an activity or sport concludes at an early time, **students can work on assignments or read in Homework Room until their parents are able to call for them.** Conversely, if a sport begins at a later time, students have a quiet place to study or read until their coach calls for them.

Students must have written parental permission to attend Homework Room. The *Permission Form* is on the following page. This can be provided on an as-needed basis, or a 'blanket' permission form can be submitted at the start of the school year and will be kept on file by the Homework Room supervisors. **To ensure student safety, PARENTS (or designated responsible ADULTS) must sign their children out of the Homework Room in person. If you need to reach the homework room, please dial 908-534-2195, extension 3209.**

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**PERMISSION FORM**

\_\_\_\_\_  
**Student's Name (Last, First)**

\_\_\_\_\_  
**Grade**

My child has permission to attend the Cooperative Homework Assistance Program at Readington Middle School when needed.

I understand that CHAP operates on **Monday-Thursdays from 2:25pm-4:00pm** and that the CHAP supervisor will not release my child to anyone other than a parent or the adults listed below.

\_\_\_\_\_  
**Parent Name**

\_\_\_\_\_  
**Parent Name**

\_\_\_\_\_  
**Home Telephone Number**

\_\_\_\_\_  
**Home Telephone Number**

\_\_\_\_\_  
**Work Telephone Number**

\_\_\_\_\_  
**Work Telephone Number**

\_\_\_\_\_  
**Cell Number**

\_\_\_\_\_  
**Cell Number**

I give the following adults permission to sign my child out of the Cooperative Homework Assistance Program at RMS at any time during the 2017-2018 school year.

1. \_\_\_\_\_  
**Name**

\_\_\_\_\_  
**Relationship to Child**

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

2. \_\_\_\_\_  
**Name**

\_\_\_\_\_  
**Relationship to Child**

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

3. \_\_\_\_\_  
**Name**

\_\_\_\_\_  
**Relationship to Child**

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

\_\_\_\_\_  
**Parent/Guardian Signature**

\_\_\_\_\_  
**Date**