



ANKENY  
COMMUNITY SCHOOL DISTRICT

Before & After-School Program

Alternate Activity Form  
Student to Participate in Alternate Before/After Hours Program

Complete and return this form to the Before/After-School Program site leader.

We understand your child may have the opportunity to participate in experiences outside of the Before & After-School Program (B/ASP) at his/her school during B/ASP hours. We don't want to limit experiences for your child, but need to ensure he/she continues to be safe and accounted for during before/after-school hours.

Complete and return this form to your child's B/ASP site leader before the alternate experience begins. When your child is not participating in the alternate experience, he/she will go to the B/ASP as regularly scheduled. *See the B/ASP Student-Parent Handbook for more information.*

For questions, call 515.965.9600 ext. 55015 or email [basp@ankenyschools.org](mailto:basp@ankenyschools.org).

Please release my child to participate in the program called \_\_\_\_\_ at my child's school during the Before/After-School Program on the following days and times:

Days (circle all that apply): Monday Tuesday Wednesday Thursday Friday

Start DATE: \_\_\_\_\_ End DATE: \_\_\_\_\_

Start TIME: \_\_\_\_\_ End TIME: \_\_\_\_\_

Name of the adult responsible for my child during this time: \_\_\_\_\_

When this program ends each day, my child will re-enter the Before/After-School Program \_\_\_ Yes \_\_\_ No  
If yes, it is the alternate activity leader's responsibility to accompany the student to the B/ASP and check him/her in with a B/ASP employee.

Parent Initial

\_\_\_\_\_ I understand that I am choosing for my child to participate in an alternate program during before/after school hours and my Before/After-School Program tuition will not change because of this activity.

Student Name \_\_\_\_\_ Grade \_\_\_\_\_ School \_\_\_\_\_

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_

Ankeny Community School District does not discriminate based on race, color, creed, religion, national origin, sex, gender identity, age, disability, marital status, sexual orientation, physical attributes, physical or mental ability or disability, ancestry, political party preference, military affiliation, socioeconomic status, or familial status. Inquiries or grievances may be directed to Kenneth Morris, Jr., Director of Equity, 306 SW School Street, P.O. Box 189, Ankeny, IA, 50021-0189, (515) 965-9600, [kenneth.morris@ankenyschools.org](mailto:kenneth.morris@ankenyschools.org); or the Iowa Civil Rights Commission, Grimes State Office Building, Des Moines, IA, 50319-0201, (515) 281-4121; or the U.S. Department of Education, Office for Civil Rights, 500 West Madison Street, Suite 1475, Chicago, IL 60661.