



## Summit Hill School District 161 Preschool Program Information

**Our Mission:** In collaboration with our families and the community, we will provide positive early learning experiences which will enable all students to develop foundational skills for future success.

**Our Vision:** To provide students with developmentally appropriate early learning opportunities which will challenge them to grow and develop as learners while providing optimal preparation and readiness for the transition to kindergarten.

**Our Curriculum:** The Preschool Program utilizes a comprehensive curriculum that uses familiar children's literature to provide a solid educational foundation of the basic skills necessary for children to be successful in kindergarten. All instructional units include activities for the common domains of speech/language, cognitive, gross motor, fine motor, daily living skills, and socialization. Children will acquire these skills through a balance of teacher-directed and child-initiated learning opportunities. Children are taught in small group, large group and individualized settings which promote independence, problem solving, cooperative learning, and self-confidence. Progress is monitored to ensure that all children are learning and acquiring skills/concepts being taught. Information from assessments is reviewed by staff and used to guide instructional planning within the classroom.

**Our Staff & Classes:** All of our dedicated and nurturing teachers are licensed by the Illinois State Board of Education. Each of the preschool classrooms has a maximum of 17 students and is staffed with a certified early childhood teacher and a paraprofessional. There are twelve regular education tuition students and up to five students with special needs in each classroom. A nurse is also on staff.

**Residency Requirements:** All families must reside and prove residency within Summit Hill School District 161 boundaries for their child to attend the Summit Hill 161 Preschool Program.

**Tuition-Based Preschool Program Requirements:** Enrollment is open to students between the ages of three and five as of September 1, 2023. Students must be 3 years of age on or before September 1, 2023 to attend. Students are required to be potty trained prior to the first day of school to participate in the program.

**Preschool Program Hours:** Students attend five days per week for 2 ½ hours per day following the district calendar. The morning session is from 8:30-11:00 am and the afternoon session is from 12:00-2:30 pm. Each session has a limited number of openings.

Session preferences will be considered in order registration forms and payment are received.

**Transportation:** Parents are responsible for providing transportation for their child.

**Location:** The program location will be at:

Dr. Julian Rogus Elementary School  
20027 S. 88<sup>th</sup> Ave  
Frankfort, IL 60423





## Summit Hill School District 161 Preschool Program Information

### Registration Process:

Registration is open to the community starting February 13, 2023. It will be a two-step process.

**Step one:** Families must set up an appointment to begin the registration process. The appointment must be scheduled through the Summit Hill School District 161 website ([www.summithill.org](http://www.summithill.org)) appointment system. When you are on the home page of the district website scroll down and click on Student Registration, choose ***Click Here to Setup a Registration Appointment. This appointment schedule is for Pre K and Kindergarten registration. Select an open appointment time slot on or after February 13<sup>th</sup> and in comment section put Preschool registration.***

**Step two:** At this appointment you will be asked to complete a condensed version of the Preschool registration form. New student registration will require an original county certified birth certificate, original residency documents and the initial monthly tuition payment for of \$275.

You will be given a username and password to complete an online registration form with additional information needed for our Powerschool student information system.

***Payments will be processed when step one and step two are completed to indicate a spot in the program has been secured.***

Preschool openings will be filled on a first come, first served basis according to the **date and time the registration process (step one and two), with payment is received and completed.** Parents will be notified with a confirmation letter in the beginning of April verifying acceptance in program indicating AM or PM spot.

**Tuition:** Tuition is \$2750 per year, payable in ten payments of \$275 as outlined on the promissory note. For families enrolling more than one child, full tuition will apply to the first child and a 10% discount will be applied to the tuition for each additional child enrolled. The first monthly tuition payment of \$275 must be paid at the time of registration. The remaining nine payments of \$275 each are due by the first day of the month beginning in September (ex. Payment made end of August is for September) with the final payment due before May 1, 2024. A promissory note is required unless tuition is paid in full at the time of registration. There is no tuition reduction for non-attendance, illness, etc. All payments including the first monthly payment can be done through our online payment option. It is located on the bottom of the Summit Hill School District 161 website ([www.summithill.org](http://www.summithill.org)) home page under quick links.

**Please be sure to select registration 2023-24 (preschool full month) enter child's name in comment section.**





## Summit Hill School District 161 Preschool Program Information

### Residency Documents required for new students only:

1. Your child's original county certified birth certificate (with certification seal)

#### Residency Document Category 1

(Provide **One Document** from This Group)

- a. Most recent property tax bill (homeowners) showing parent as taxpayer
- b. Current mortgage statement or mortgage coupon book (homeowners)
- c. Closing Papers - closing must have occurred before registration (NEW STUDENTS ONLY)
- d. Signed, dated and notarized lease agreement and proof of last month's payment (renters) Housing letter (military personnel)
- e. If parent is not the actual homeowner or renter, the owner of the property **and** the parent of the child must prove residency by providing a **completed and notarized Affidavit of Residency Part 1 and Part 2 form. This can be found on the district website.**

#### Residency Document Category 2

(Provide **Two Documents** from This Group)

- a. **Driver's License and one of the following documents:**
- b. Most recent Gas, Electric or Water Bill or official start notice
- c. Current vehicle registration
- d. Current homeowners or renters insurance policy and premium receipt
- e. Current Department of Illinois Human Services Letter (DHS)

**For questions regarding registration, residency, payment questions, etc.,  
please call Lisa Drenner at 815-469-9103**

**or email [ldrenner@summithill.org](mailto:ldrenner@summithill.org)**

**For questions regarding curriculum email:**

**[kzylka@summithill.org](mailto:kzylka@summithill.org)**



# Summit Hill School District 161

815.469.9103 Frankfort, Illinois 60423

## 2023-2024 TUITION BASED Pre-School Registration Form

<b>Name of Student:</b> (As it appears on the Birth Certificate)			<b>Circle One:</b>	
<div>_____</div> <div>First Name                      Middle Name                      Last Name</div>			AM      PM	
			<b>Circle One:</b> Male      Female	
<b>School Child Will Attend:</b> Dr. Julian Rogus School			<b>Circle One:</b> New Student      Returning Student	
<b>Student Address:</b>		<b>Birth Date:</b>		
<b>City:</b> <b>Zip:</b>		<b>Home Phone:</b>		
<b>Child Lives With (circle all that apply):</b> Father      Mother      Foster Parents Stepfather      Stepmother      Other:		<b>Status of Natural Parents (circle all that apply):</b> Married      Living Together      Mother Deceased Divorced      Living Apart      Father Deceased		
<b>List siblings names and ages:</b>				
<b>Please supply information for parents with whom the child is living:</b>				
Father's Full Name:		Mother's Full Name:		
Father's or Mother's Street/City Address (if different than above)				
Cell Phone Number Father:		Cell Phone Number Mother:		
Does family have access to email? <b>Circle One:</b> YES or NO				
Email Father:		Email Mother:		
Are there any custody arrangements, which would prohibit either parent from access to the student or the student's records? (Legal documents <u>must be filed</u> with the school for enforcement.) <b>Circle One:</b> YES NO If yes, please describe:				
<b>In case of emergency:</b> Please list the names of two friends or relatives who live in the area and who could be contacted in case of an emergency:				
Name #1		Name #2		
Relationship #1:		Relationship #2:		
Phone #1		Phone #2		
Address #1(street, city, zip)		Address #2(street, city, zip)		
<b>A person who knowingly or willfully presents to any school district any false information regarding the residency of a pupil for the purpose of enabling that pupil to attend any school in that district without the payment of a non-resident tuition charge shall be guilty of a Class C misdemeanor (105 ILCS 5/10-20.12b f).</b>				
<b>In case of an emergency,</b> and if we are unable to contact parents, do we have your permission to send this child by ambulance or other means to a local medical facility, and for the doctors there to treat this child? <b>Circle one:</b>  YES I give my permission to medical authorities to treat my child in case of an emergency. NO I do not give my permission to medical authorities to treat my child in case of an emergency.				
_____ <b>Parent/Guardian Signature (Required to process registration)</b>			_____ <b>Date of Registration</b>	

**SIS Early Childhood Information Collection**  
**(REQUIRED by Illinois State Board of Education as of 1/1/2018)**

*To be completed by parent/guardian at time of registration for program. Responses are required to each statement.*

<b>Child's Name:</b>	
<b>PRE-SCHOOL State of Illinois Required Information</b>	
<b>Family Structure:</b> <input type="checkbox"/> Both parents in the home <input type="checkbox"/> Single parent family <input type="checkbox"/> Lives with an adult other than guardian <input type="checkbox"/> Youth in care (foster care) <input type="checkbox"/> Parents have joint custody <input type="checkbox"/> Other: _____	<b>Early Head Start</b> Child received Early Head Start services prior to attending this preschool program, which may include home-based services, center-based services, or both.  <div style="text-align: right;"> <input type="checkbox"/> Yes      <input type="checkbox"/> No         </div>
<b>Licensed Child Care</b> Prior to attending this preschool program, the child was enrolled in a child care center licensed by IL DCFS. (Department of Children and Family Services).  <div style="display: flex; justify-content: space-between;"> <input type="checkbox"/> Family child care      <input type="checkbox"/> Center-Based         </div> <div style="text-align: center;"> <input type="checkbox"/> Did not attend a preschool         </div>	<b>Family Receiving (CCAP) subsidy</b> Assistance with paying for child care services for low income working families from the Child Care Assistance Program (CCAP) through the IL Department of Human Services.  <div style="text-align: right;"> <input type="checkbox"/> Yes      <input type="checkbox"/> No         </div>
<b>Child Welfare Involvement Within the Past Year</b> The child or their family has received services from the Department of Children and Family Services (DCFS), including foster care, intact family services or the parent has been a youth in care.  <div style="text-align: right;"> <input type="checkbox"/> Yes      <input type="checkbox"/> No         </div>	<b>Family has an Open Intact Family Services Case</b> The family has been assigned a caseworker by DCFS and is currently receiving or in the past year has received family services.  <div style="text-align: right;"> <input type="checkbox"/> Yes      <input type="checkbox"/> No         </div>
<b>Child has been a Youth in Care</b>  <div style="text-align: right;"> <input type="checkbox"/> Yes      <input type="checkbox"/> No         </div>	<b>Either parent of Child is Youth in Care</b>  <div style="text-align: right;"> <input type="checkbox"/> Yes      <input type="checkbox"/> No         </div>
<b>Child's Family is receiving WIC</b> WIC provides Federal grants to States for supplemental foods, health care referrals, and nutrition education for low income pregnant, breastfeeding, and non-breastfeeding postpartum women, and to infants and children up to age five who are found to be at nutritional risk.  <div style="text-align: right;"> <input type="checkbox"/> Yes      <input type="checkbox"/> No         </div>	<b>Child's Family is receiving TANF</b> The Temporary Assistance for Needy Families (TANF) program provides temporary financial assistance for pregnant women and families with one or more dependent children. TANF provides financial assistance to help pay for food, shelter, utilities, and expenses other than medical.  <div style="text-align: right;"> <input type="checkbox"/> Yes      <input type="checkbox"/> No         </div>
<b>Child's Family is receiving SNAP</b> The Supplemental Nutrition Assistance Program (SNAP) (formerly Food Stamps) helps low-income people and families buy the food they need for good health. Benefits are provided on the Illinois Link Card - an electronic card that is accepted at most grocery stores. The program is managed by the Food and Nutrition Service (FNS) of the United States Department of Agriculture. The Department of Human Services administers the program in Illinois  <div style="text-align: right;"> <input type="checkbox"/> Yes      <input type="checkbox"/> No         </div>	<b>Child's Family is receiving Housing Subsidy</b> Subsidized housing or social housing is government supported accommodation for people with low to moderate incomes. Forms of subsidies include direct housing subsidies, non-profit housing, public housing, rent supplements and some forms of co-operative and private sector housing.  <div style="text-align: right;"> <input type="checkbox"/> Yes      <input type="checkbox"/> No         </div>

**SIS Early Childhood Information Collection**  
**(REQUIRED by Illinois State Board of Education as of 1/1/2018)**

To be completed by parent/guardian at time of registration for program.

Size of Household/Family (how many people live in the house): \_\_\_\_\_

Annual Household Income: \$ \_\_\_\_\_

The child is from a family whose income is less than 50%, 100%, 200%, or 400% the poverty guidelines updated periodically in the Federal Register by the U.S. Department of Health and Human Services (HHS) under the authority of 42 U. S. C. 9902(2).

**Annual 2022 Poverty Guidelines for the 48 Contiguous States**

Household /Family Size	50%	100%	200%	400%
1	\$6,795	\$13,590	\$27,180	51,040
2	\$9,155	\$18,310	\$36,620	68,960
3	\$11,515	\$23,030	\$46,060	86,880
4	\$13,875	\$27,750	\$55,500	104,800
5	\$16,235	\$32,470	\$64,940	122,720
6	\$18,595	\$37,190	\$74,380	140,640
7	\$20,955	\$41,910	\$83,820	158,560
8	\$23,315	\$46,630	\$93,260	176,480
9	\$25,675	\$51,350	\$102,700	194,400
10	\$28,035	\$56,070	\$112,140	212,320

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For Evaluator Use Only:

- ☐ at 50% or below the Federal Poverty Level
- ☐ at 100% or below the Federal Poverty Level
- ☐ at 200% or below the Federal Poverty Level
- ☐ at 400% or below the Federal Poverty Level
- ☐ Above 400% Federal Poverty Level

# SUMMIT HILL SCHOOL DISTRICT 161

## *Home Language Survey*

The state requires the district to collect a Home Language Survey for every new student. This information is used to count the students whose families speak a language other than English at home. It also helps to identify the need for bilingual and English as a Second Language education services in the schools.

Please answer the questions below and return this survey to your child's school.

Student's Name: \_\_\_\_\_

Male ☐ Female ☐

1. ***Is a language other than English spoken in your home?***  
(Home Language)

\_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, identify what language is spoken: \_\_\_\_\_

2. ***Does your child speak a language other than English?***  
(Native Language)

\_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, please indicate what language the child speaks: \_\_\_\_\_

If the answer to either question is yes, the school will assess your child's English language proficiency. The school will measure your child's listening and speaking skills and, for students in grades 2 through 12, reading and writing skills.

3. ***Is student currently in an English Language Learner program?*** \_\_\_\_\_

4. ***Date student first enrolled in a U.S School:*** \_\_\_\_\_

5. ***Birthplace:*** \_\_\_\_\_  
City State

6. ***Date of Birth:*** \_\_\_\_\_

Signed: \_\_\_\_\_ Date: \_\_\_\_\_  
Parent or Guardian

**Residency in District 161 must be established for new students at the time of registration.**  
**Present Original, County Certified Birth Certificate (with certification seal).**

Provide One Document from Category 1 **and** Provide Two Documents from Category 2

**Residency Document Category 1**

(Provide One Document from This Group)

- a. Most recent property tax bill (homeowners) showing parent as taxpayer
- b. Current mortgage statement or mortgage coupon book (homeowners)
- c. Closing Papers - closing must have occurred before registration (NEW STUDENTS ONLY)
- d. Signed, dated and notarized lease agreement  
Expiration Date \_\_\_\_\_ and proof of last month's payment (renters) Housing letter (military personnel)
- e. If parent is not the actual homeowner, the owner of the property, **and** the parent must prove residency by providing **ONE** document from Category 1 and **TWO** documents from Category 2. **Affidavit of Residency Part 2 and Part 2 must be completed and notarized.**

**Residency Document Category 2**

(Provide Two Documents from This Group)

- a. **Driver's License and one of the following documents**
- b. Most recent Gas, Electric or Water Bill or official start notice
- c. Current vehicle registration
- d. Current homeowners or renters insurance policy and premium receipt
- f. Current Department of Illinois Human Services Letter (DHS)

***Checks made payable to Summit Hill School District 161***

		Amount Enclosed
Tuition = \$2750.00 per year (10 payments of \$275.00 each, first payment due at time of registration)		\$
TOTAL AMOUNT		\$

***For District Office Use Only***

**Date Received:** \_\_\_\_\_ **Check#** \_\_\_\_\_ **Check \$** \_\_\_\_\_ **Cash \$** \_\_\_\_\_

**Date entered:** \_\_\_\_\_





Whole-Child  
Safe-Inspiring  
Student-Growth

# Summit Hill School District 161

Arbury Hills School ▪ Frankfort Square School ▪ Indian Trail School  
Dr. Julian Rogus School ▪ Walker Intermediate School ▪ Summit Hill Jr. High

## Summit Hill School District 161

### Promissory Note

### 2023-2024 School Year

Student Name \_\_\_\_\_

On this date of \_\_\_\_\_, in return for valuable consideration received, the undersigned (the borrower) promises to pay Summit Hill School District 161 the sum of: \$2,750 per child (total of tuition fees).

#### Monthly Payment Schedule:

**\$275** (1<sup>st</sup> payment to be completed at time of registration)

**\$275** minimum payment due per child for subsequent payments due by the first of each month until final balance has been paid in **FULL** with all payments to be completed for each child by **May 1, 2024**. Additional payments can be completed via Credit/Debit by going to the RevTrak webstore link located on the district's website at <http://www.summithill.org> OR you may make payments via Cash or Check and bring to or send payment to:

Summit Hill School District 161  
Attn: Preschool Tuition Fee Payments  
20100 S Spruce Drive  
Frankfort, IL 60423

#### Terms of Repayment:

The loan shall be repaid under the following terms:

Should the borrower default on the payments to be paid in full by **May 1, 2024**, the remainder of the loan balance will be transferred for collections using appropriate methods including but not limited to the Illinois Comptroller Local Debt Recovery Program. The borrower agrees to pay all cost and expenses incurred for the collection of this note. Tuition will not be prorated due to non-attendance. Borrower shall pay a late charge equal to five (5) percent of any part of the indebtedness not paid within fifteen days following the due date thereof ("late charge").

If a monetary default shall occur, the failure of Summit Hill School District 161 to promptly exercise its right to declare Indebtedness to be immediately due and payable shall not constitute a waiver of such right in connection with that monetary default, or any future monetary default.



# Summit Hill School District 161

Arbury Hills School ▪ Frankfort Square School ▪ Indian Trail School  
Dr. Julian Rogus School ▪ Walker Intermediate School ▪ Summit Hill Jr. High

The rights or remedies of Summit Hill School District 161 proved herein shall be cumulative and concurrent and may be pursued singly, successively, or together against Borrower, and any other funds, property or security held by Summit Hill School District 161 for payment of Indebtedness or otherwise, at the sole discretion of Summit Hill School District 161. The failure of Summit Hill School District 161 to exercise any such right or remedy shall, in no event, be construed as a waiver or release of said rights or remedies or the right to exercise the same at any later time.

In the event that this Note is placed in the hands of any attorney for collection or is collected by action hereon, the Borrower shall pay all costs of collection, including attorneys' fees.

This Note may not be amended, modified, or changed nor shall any wavier of any of the provisions hereof be effective, except only by any instrument in writing, signed by the party against whom enforcement of any wavier, amendment, change or discharge is sought.

This Note shall be governed and construed in accordance with the laws of the State of Illinois, without regard to its conflict of laws and principles, and whenever possible, each provisions of this Note shall be interpreted in such a manner as to be effective and valid pursuant to applicable law; PROVIDED HOWEVER, that if any provision hereof shall be prohibited or invalid pursuant thereto, the same shall be ineffective only to the extent of such prohibition or invalidity without prohibiting or invalidating the remainder of such provision or the remaining provisions hereof.

Borrower hereby waives presentment, protest and notice of dishonor and consent to any and all renewals, extensions or modification of the terms hereof, including the terms or times for repayment, and agrees to any such renewal, extension or modification of the terms hereto or time for payment or the release or the substitution of any security for Principal Amount or any other indulgences shall not otherwise affect the liability of Borrower for the payment of Indebtedness, and any such renewals, extensions or modifications may be made without notice to the Borrower.

Nothing contained herein to the contrary notwithstanding shall be deemed to release, affect or impair Indebtedness or the rights of Summit Hill School District 161 to enforce its remedies pursuant hereto including, without limitation, the right to pursue remedy for injunctive or other equitable relief.

Borrower's name:

Social security number: \_\_\_\_\_ (required for debt recovery purposes in the event payment is not completed as agreed upon in the terms of repayment)

Initials signifying agreement to repayment terms: \_\_\_\_\_

Date: \_\_\_\_\_