



OFFICE OF THE SUPERINTENDENT OF SCHOOLS
ARCHDIOCESE OF NEW YORK

1011 First Avenue, New York, New York 10022 Phone: (212) 371-1000 Fax: (212) 317-9236

September 3, 2019

Dear Catholic School Families,

I am blessed and excited to welcome your family back to school for the 2019-20 academic year. Our tireless, dedicated team of professional Catholic educators have been working throughout the summer to prepare for yet another year where your child will encounter Christ each day and will experience academic excellence.

As a lifelong Catholic educator, this time of year fills me with excitement and anticipation of the great successes our students will achieve. We will no doubt find ourselves continuing on an upward trajectory, as our technology-driven curriculum enables teachers to tailor the learning experience for each child based upon his or her specific needs.

This upcoming school year will see a continued focus on teaching the whole child, addressing the physical, emotional and mental health of our students. We will also continue to enhance resources for special education, after school programs and early childhood education. All of these programs and services support the foundation of our mission; imparting the Catholic values handed down by the greatest teacher of all, Jesus Christ.

Catholic schools have been leading the way since we established organized education in New York City more than two centuries ago. Today, that tradition continues as we carry on the legacy of Saint Elizabeth Ann Seton, Saint Frances Cabrini and those who have followed to sustain academic excellence synonymous with our great institutions.

I wish your family all the very best and God's blessings for a safe, healthy and successful school year.

Sincerely,

Mr. Michael J. Deegan
Interim Superintendent of Schools
Archdiocese of New York



Milk will be available beginning September 9th. If you would like your child to receive milk, the cost is \$65.00 for the year (which comes out to approximately \$.36 per day). This is due by September 6, 2019. There will be no refunds for absences, snow days, or days when your child decides not to have milk. The \$65.00 fee covers the entire school year; no partial payments will be accepted.

Milk

Please sign my child up for milk. Enclosed is \$65 to cover the cost of the entire school year.

Child's Name: _____

Grade: _____

(Please check one – if you do not choose, your child will receive milk, not chocolate milk.) Please note, whatever flavor choice you make, it is for the year.

____ Milk

____ Chocolate Milk

Kingston Catholic School

Back to School

NIGHT



Tuesday, September 10, 2019

6:00 -6:30 Refreshments and Meet & Greet in the gym

Classroom Meeting Times:

6:30

Mrs. Scanlon - Pre-K Classroom

Mrs. Geskie – Kindergarten

Mrs. Heaney - 1st Grade

Ms. DiIulio - 2nd Grade

Mrs. Dotterer - 3rd Grade

1st Floor

Mrs. Ressa - 4th Grade

Ms. Metelski - 5th Grade

2nd Floor

Ms. Knowles - 6th Grade

Mrs. Balcanoff- 7th Grade

Mrs. Mino- 8th Grade

Garden Level

7:00 (Session repeated)

Mrs. Scanlon – Pre-K Classroom

Mrs. Geskie – Kindergarten

Mrs. Heaney – 1st Grade

Ms. DiIulio – 2nd Grade

Ms. Dotterer – 3rd Grade

1st Floor

Mrs. Ressa – 4th Grade

Ms. Metelski – 5th Grade

2nd Floor

Ms. Knowles – 6th Grade

Mrs. Balcanoff – 7th Grade

Mrs. Mino – 8th Grade

Garden Level



Back to School Night Childcare September 10th



During Back to School Night, Babysitting will be available. This service is open to currently enrolled KCS students.

Please return to school:

My Family will be using the Back to School Night Childcare.

Family Name: _____

+

Children's Names: _____ Grades: _____



Kingston Catholic School Extended Day Program

The extended day program is held on each regularly scheduled school day from 3:00-6:00 p.m. On the half days the program runs from 12:20-6:00 p.m.

The weekly sign-up sheet for the program will specify the days your child(ren) will attend and the pick-up time each day. The sign-up sheet will be posted on the website on Wednesday under “weekly envelope”. In order for your child to be given a space in the following week’s program, the envelope must be returned to school by Friday. Payment must accompany all requests for program use. As the number of spaces available is limited, fees paid to the program are nonrefundable and nontransferable, even if your child does not attend on a day that you reserved a space. (The only exceptions are snow days and early closings.)

An emergency card will be kept on file with the Extended Day Program separate from the school’s records. Please be sure that emergency phone numbers enable us to reach someone at all times.

An annual non-refundable registration fee of \$20.00 per family is required. The fee schedule for the Extended Day Program is as follows:

1 Child	Additional Children
\$15.00 per day	\$13.00 per day each additional child
\$65.00 per week	(2) \$110/week (3) \$150/ week (4) \$160/week
\$80.00 per week w/a Half Day	(2)\$140/week (3) \$180/week (4) \$190/week
\$30.00 Half Day only	(2)\$55 (3)\$80 (4) \$105

Late pick up fee: Families arriving after 6:00 p.m. will be billed an additional \$25.00 per half hour.

Extended Day activities will include snack time, outdoor playtime, indoor games, use of computer lab, gym and library, arts and crafts, story time and more. An opportunity for quiet study and homework will be provided. The Extended Day Program staff cannot guarantee homework completion.

Students must provide their own snack daily, as well as lunch and snack on First Fridays. “Play clothes” are the most practical choice for our program. Students in grades K-8 may bring a change of clothes if they wish. Pre-K students do not need to change.

Pick up for the Extended Day Program is at the back doors of the school. Parking is available in the back parking lot. We ask that you enter the lot with care and watch for children, as we are frequently “at play” there.

As stated above, payment is made in advance to the main office by Friday of the previous week with envelopes marked KCS Extended Day Program. Checks are made payable to Kingston Catholic School.

**Before care is available Monday through Friday starting at 7:30am.
The fee is \$15 for the week regardless of how many days are needed.**

Kingston Catholic School After School Program

2019-2020 School Year

There is a \$20.00 per family nonrefundable registration fee for this program payable at the beginning of the year if you ever intend to use the program.

Fee Paid: _____ Date: _____

REGISTRATION INFORMATION:

Name _____ Grade _____ D.O.B. _____

Address: _____ Home Phone #: _____

Child/Children Ride - Bus #: _____ or Car _____

Please indicate when your child will use the program:

____ Full week after-school program
____ Partial program on a regular basis
____ Occasional use of program
____ Half-days

Parent/Guardian: _____ Work Hours: _____
Business: _____ Work Phone: _____

Parent/Guardian: _____ Work Hours: _____
Business: _____ Work Hours: _____

Person to be contacted in an emergency (Relative, neighbor or friend who can pick up child).

Name: _____ Phone #: _____

Child's Physician: _____ Phone #: _____

ALLERGIES OR EXISTING MEDICAL CONDITIONS: _____

MEDICATION NEEDED DURING AFTER-SCHOOL PROGRAM: ____YES ____NO

Please list individuals who may pick up your child other than yourself. (Photo ID will be required.)

1. _____	5. _____
2. _____	6. _____
3. _____	7. _____
4. _____	8. _____

I give my child _____ permission to attend the KCS After-school Program.

PARENT'S SIGNATURE

**KINGSTON CATHOLIC SCHOOL
WEEKLY SCHEDULE FOR EARLY DROP OFF**

***Early Drop off time is 7:30am
The Cost is \$15 per week***

FAMILY NAME _____

September 9, 2019

WEEK OF _____

Parent/Guardian, kindly indicate in the appropriate box name and grade,
And please mark the days you need early drop off.

Child's Name & Gr. Mon. Tues. Wed. Thurs. Fri.

Early Drop Off Time					

RETURN TO SCHOOL BY **Friday** ALONG WITH PAYMENT.

PARENT SIGNATURE _____

KINGSTON CATHOLIC SCHOOL WEEKLY SCHEDULE FOR EXTENDED DAY PROGRAM

FAMILY NAME _____

September 9, 2019

WEEK OF _____

Parent/Guardian - kindly indicate in the appropriate box name, grade and pick-up time.

Please X the days you need aftercare.


Child's Name & Grade	Mon.	Tues.	Wed.	Thurs.	Fri.
Pick up time					

RETURN TO SCHOOL BY Friday ALONG WITH PAYMENT.

PARENT SIGNATURE _____

For those parents who need a receipt other than your check, fill in the form below and tear it off for your records. This will serve as your receipt for the aftercare program:

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**Kingston Catholic School Aftercare Receipt**

Family Name: \_\_\_\_\_ Child's Name: \_\_\_\_\_

Week Of: \_\_\_\_\_ # of Days Used: \_\_\_\_\_

Amount Paid: \_\_\_\_\_ Cash \_\_\_\_\_ Check (Check #: \_\_\_\_\_)

Kingston Catholic School's



Please join us.....

Grandparent's (or aunt, uncle, friend)  
for

Mass (9:00 a.m.)

&

Open House

Friday, September 13<sup>th</sup>

Celebrate Mass with us at St. Mary's  
Church at 9:00 a.m.

Then...tour the school & visit your  
grandchildren's classrooms

All of our KCS grandparents are invited  
to join us for this special day.

# KINGSTON CATHOLIC SCHOOL

\*These are the only gym clothes students are allowed to wear

\*Please make checks payable to: Kingston Catholic School

## GYM UNIFORM ORDER FORM

### CHECK THE CORRECT SIZE

|             |       | 6-8 | 10-12 | 14-16 | S | M | L | XL | XXL | Quantity | Price<br>Each | Total |
|-------------|-------|-----|-------|-------|---|---|---|----|-----|----------|---------------|-------|
| T-Shirt     | Youth |     |       |       |   |   |   |    |     |          | \$12          |       |
| Navy w/Gold | Adult |     |       |       |   |   |   |    |     |          |               |       |
| Sweat Shirt | Youth |     |       |       |   |   |   |    |     |          | \$18          |       |
| Navy w/Gold | Adult |     |       |       |   |   |   |    |     |          |               |       |
| Gym Shorts  | Youth |     |       |       |   |   |   |    |     |          | \$12          |       |
| Navy W/Gold | Adult |     |       |       |   |   |   |    |     |          |               |       |
| Sweat Pants | Youth |     |       |       |   |   |   |    |     |          | \$18          |       |
| Navy W/Gold | Adult |     |       |       |   |   |   |    |     |          |               |       |

PRE-K DRESS      Size 4T      Size 5      (circle one)      \$15

### GRADES 5 THROUGH 8 ONLY: (CIRCLE THE CORRECT SIZE)

HOODED      Adult      S      M      L      XL      XXL      \$25  
SWEATSHIRT

MESH SHORTS      Adult      S      M      L      XL      XXL      \$18  
W/KCS LOGO

ORDER TOTAL \_\_\_\_\_

Student's Name \_\_\_\_\_ Grade \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



**KINGSTON CATHOLIC HOT LUNCH MENU**  
**Week of September 9, 2019+**

NAME(S) & GRADE(S) \_\_\_\_\_

---

**MONDAY**

Pizza,  
Veggie, Dessert

---

Yogurt,  
Fruit, Dessert

---

**TUESDAY**

Pasta & Garlic Knots  
Veggie, Dessert

---

Bagel W/Cream Cheese,  
Fruit, Dessert

---

**WEDNESDAY**

Chicken Fingers,  
Chips, Dessert

---

Yogurt,  
Chips, Dessert

---

**THURSDAY**

Meatball Sub,  
Chips, Dessert

---

Bagel W/Cream Cheese  
Chips, Dessert

---

**FRIDAY**

Pizza,  
Veggie, Dessert

---

Yogurt,  
Chips, Dessert

---

- **Each lunch is \$5.00.**
- Please remember to put your child's name and grade on this menu.
- Please remember to include your check.

A second slice of pizza may be ordered along with the first for an extra \$1.00 (unfortunately the "seconds for a dollar" option is not available with any other lunch).

**LUNCH MENU MUST BE IN BY *FRIDAY* MORNING ALONG WITH PAYMENT –**  
**THANK YOU FOR YOUR COOPERATION**

***Lunch menus will not be accepted on Monday morning so please***  
***plan accordingly***



159 Broadway (Elementary)  
Kingston, NY 12401  
KingstonCatholic.org  
Phone: (845) 331-9318  
Fax: (845) 331-2674

# Kingston Catholic School

The Catholic School Region of Ulster/Sullivan/Orange Counties

Mrs. Jill Albert, Principal

September 2019

Dear Parents/Guardians,

Although we may not realize it, asbestos is a common material in almost every building in our society. It is a fireproofing material; it is found in floor tiles; it is used as an acoustical material to deaden sound. Under certain conditions, however, when it is damaged, asbestos can prove to be a concern.

Because of this concern, the Federal Government asks every school in the country to conduct an inspection for all asbestos-containing materials.

The inspection of our school is done annually. It reveals asbestos-containing materials in the floor, boiler room and some insulated pipes. "It is," as the Environmental Protection Agency states, "important to note that not all friable asbestos-containing material need be removed from the schools." One such material has been identified; a program can be implemented to insure that the material is maintained in good condition, and that appropriate precautions are followed when the material is disturbed for any reason.

Every year the Archdiocese sends an inspector to check conditions in our school. Once again, Kingston Catholic School is in compliance with all state regulations and safety conditions. Each year it is my duty to report this to you. Thank you.

Sincerely,  
*Jill Albert*

Jill Albert  
Principal

JA:dg



## Attention all KCS Volunteers!

If you plan on volunteering at KCS in any capacity (lunchroom, playground, classrooms, field trips KCS Family Organization activities) you must complete the Archdiocesan Safer Spaces Training. (Once you have completed the Training, you do not have to do it again.)

To register and view the online course, go to  
[archny.org/safe-environment-program](http://archny.org/safe-environment-program)

*(Follow the prompts for “Safe Environment Program” on the left side, click on **Online “Safer Spaces” Training** and follow the directions to register for the course.)*

A background check form must also be filled out. These will be available in the office.

Once these requirements are filled, you will be able to volunteer at Kingston Catholic School

**Student Information Card**

Child's Name \_\_\_\_\_ Birthdate \_\_\_\_\_  
 Name to be used at school: \_\_\_\_\_

Mother's Name \_\_\_\_\_ Father's Name \_\_\_\_\_  
 Home Phone \_\_\_\_\_ Home Phone \_\_\_\_\_  
 Cell Phone (\_\_\_\_) \_\_\_\_\_ Cell Phone (\_\_\_\_) \_\_\_\_\_  
 Work Phone (\_\_\_\_) \_\_\_\_\_  
 Email Address \_\_\_\_\_  
 Email Address \_\_\_\_\_

How will your child go home the FIRST day of school?  
☐ Parent ☐ Daycare \_\_\_\_\_ ☐ YMCA ☐ Other \_\_\_\_\_

How will your child go home after the first day?  
☐ Parent ☐ Daycare \_\_\_\_\_ ☐ YMCA ☐ Other \_\_\_\_\_

Sample

©2016time4kindergarten.com

## EMERGENCY CARD INFORMATION

**Please return the enclosed  
emergency card by Friday,  
September 20<sup>th</sup>.**

Thank you for your attention to this  
matter.



# *Save the Date!*

*KCS*

*“Set the Night to Music”*

*Cocktail Party/Silent Auction Event*

*November 9, 2019*

*The Capital Tavern at Wiltwyck Golf Club*

*7-10pm*

*Come support our school! There are many ways to win!*

-Passed Appetizers & Harvest Table

-Cocktails/Cash Bar

-Music through the Decades

-Silent Auction

- Raffle Table

-Lotto Board Raffle

-Wine/Spirit Pull

*-More exciting things to come...please save the date!*

For more information contact: Kourtney Fall: [kourtneyfall@gmail.com](mailto:kourtneyfall@gmail.com) or  
Alyson Reidy: [cherriesdeli@yahoo.com](mailto:cherriesdeli@yahoo.com)





CATHOLIC SCHOOLS *in the*  
ARCHDIOCESE *of* NEW YORK  
Faith-Based. Future-Focused.



September 2019

Dear Parents:

Did you know your child(ren) can benefit from:

- Smart Boards and Science Kits
- Virtual Learning System for Students
- Free Extended Year Summer Programs
- Professional Development for Teachers and Principals
- E-Rate Funding for Technology
- Technology Coaches & Online Programs
- School Scholarships & Grants

A portion of the funding for these important educational programs is made available through **your hard-earned tax dollars. Every family contributes and every student can benefit, regardless of income level. OUR SCHOOL CAN BE ELIGIBLE FOR UP TO \$2,000 per student for each form returned!**

Here is how your child can take advantage of one or more of these resources:

**In order to determine eligibility for these programs, parents must fill out the attached form IN ITS ENTIRETY and return it to your child's teacher by September 13, 2019.**

**Please list all the names of children attending our school on the application and complete all questions on the form.**

**This form is not shared with anyone. It is for school personnel to determine what programs your child and the school is eligible.**

Thank you for your cooperation and please do not hesitate to contact me if I may be of further assistance. If you would like additional clarification or information, you may also e-mail Michael Coppotelli, Associate Superintendent for Public Policy and Student Services at [MCoppotelli@archny.org](mailto:MCoppotelli@archny.org)

Sincerely,

Principal



**EACH RETURNED SURVEY COULD PROVIDE UP TO \$2000**  
**FOR EACH STUDENT RETURN TO SCHOOL September 13, 2019**

1. Use the chart below to answer the questions in item #1. (Include all members who live in your household)

Is your family income less than the amount in column A?

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

Is your family income less than the amounts in columns B?

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

Is your family income less than the amounts in columns C?

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

2. Are you receiving assistance under the Temporary Assistance to Needy Families (TANF) program?

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

3. Are any of your children eligible to receive medical assistance under the Medicaid program?

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

4. What School and Grade(s) is(are) your child(ren) in?

School Name \_\_\_\_\_ Grade(s) \_\_\_\_\_

Home Address (required): \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Complete last section below:

| Household Size                         | A        | B        |         |         | C        |         |         |
|----------------------------------------|----------|----------|---------|---------|----------|---------|---------|
|                                        | Annual   | Annual   | Month   | Week    | Annual   | Month   | Week    |
| 1                                      | \$12,490 | \$16,237 | \$1,354 | \$313   | \$23,107 | \$1,926 | \$445   |
| 2                                      | \$16,910 | \$21,983 | \$1,832 | \$423   | \$31,284 | \$2,607 | \$602   |
| 3                                      | \$21,330 | \$27,729 | \$2,311 | \$534   | \$39,461 | \$3,289 | \$759   |
| 4                                      | \$25,750 | \$33,475 | \$2,790 | \$644   | \$47,638 | \$3,970 | \$917   |
| 5                                      | \$30,170 | \$39,221 | \$3,269 | \$755   | \$55,815 | \$4,652 | \$1,074 |
| 6                                      | \$34,590 | \$44,967 | \$3,748 | \$865   | \$63,992 | \$5,333 | \$1,231 |
| 7                                      | \$39,010 | \$50,713 | \$4,227 | \$976   | \$72,169 | \$6,015 | \$1,388 |
| 8                                      | \$43,430 | \$56,459 | \$4,705 | \$1,086 | \$80,346 | \$6,696 | \$1,546 |
| For each additional family member add: | \$4,420  | \$5,746  | \$479   | \$111   | \$8,177  | \$682   | \$158   |

**ALL QUESTIONS MUST BE ANSWERED COMPLETELY**

**To protect your privacy, this will be detached from this form once the schools records that a family returned it and the data aggregated.**

**Student (s) Name(s)** \_\_\_\_\_

**Public School District** \_\_\_\_\_