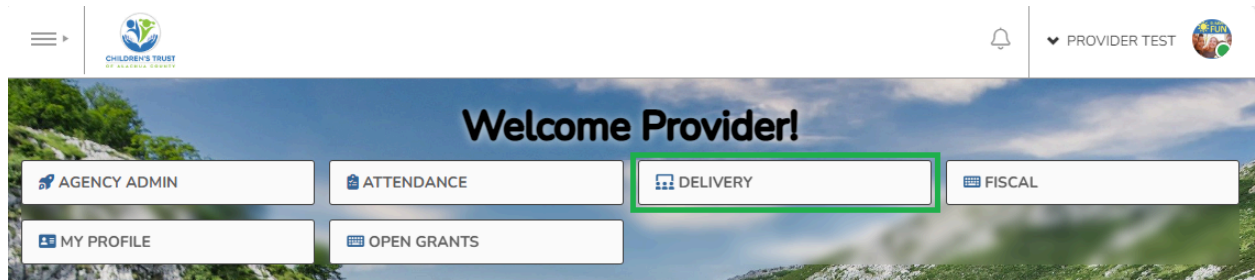
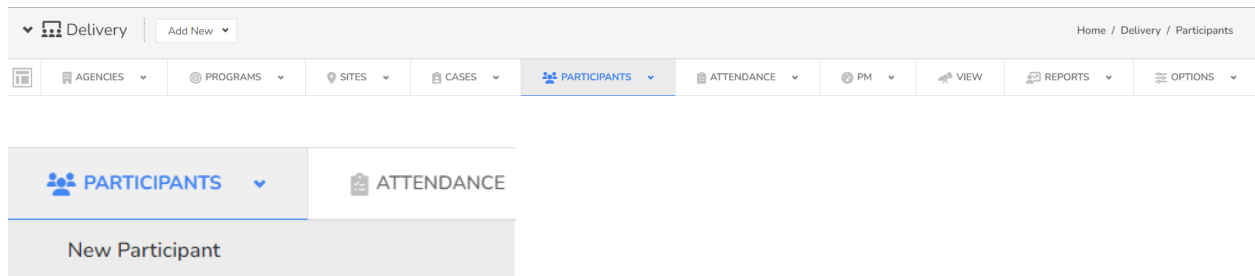


## Afterschool Programs -> Add a Participant

1) Click on **Delivery**.



2) Click on **Participants**, then New Participant



3) Select your Program Name and **Participant Type** of "Youth".

The screenshot shows the 'Participant' form. It has two main fields: 'Program \*' and 'Participant Type \*'. The 'Program \*' field is a dropdown menu with 'Select Program' as the current selection and a 'View Program' button next to it. The 'Participant Type \*' field is a dropdown menu with 'Y (Youth)' as the current selection.

4) **Add Participant Information.** Fields marked with an "\*" are required.

Please see the [CTAC Child Afterschool Enrollment Form – 2023-2024](#).

"Open Date" is the date the enrollment process was completed for the current school year.

## Participant

### Family/Household

Open Date \* 

First Name \*

Last Name \*

Middle Name

Date Of Birth \*

Gender \*

Race \*

Ethnicity \*

Language Spoken at Home \*

Is English Proficient

5) Add **Family/Household**. If this is the first child in the Family/Household added, select the “New Case” button. Otherwise, select the name of the Family/Household from the drop down.

Family/Household

Select Case



New Case

For the “**Household Title / Family Identifier**” provide a name that you recognize the Family/Household by, for instance, the Smith Household.

New Case

Program Case

**Household Title / Family Identifier \*** Simply a description of the Case, or an Identifier. Each case will automatically be assigned an ID, so this can be another way of identifying Cases.

**Program \***

Afterschool Program

For **“Referred From”** please mark the boxes to indicate how the family heard about the program. Select as many boxes as apply.

Referred From

≡

Type To Filter

+

☐ Advertising - Online

☐ Advertising - Other Media

☐ Advertising - Signage/Flyers

☐ Afterschool Program

☐ Child Care

☐ Church or Faith-Based Organization

☐ DCF/Child Protective

☐ Enrolled Previously

Add the family’s **“Scholarship Eligibility”** information as applicable. Please mark all criteria that apply to the family/household.

Children In Household

whole numbers only

Adults In Household

whole numbers only

Annual Household Income

\$

Scholarship Eligibility \*

☐ Family below 200% of federal poverty guidelines

☐ Family between 200% - 400% of federal poverty guidelines

☐ Family receiving SNAP benefits

☐ Child has an Individualized Education Plan (IEP) and/or 504 Plan

☐ Child is in foster care or voluntary formal kinship care or under case management supervision

6) Enter **“Participant Residency”** information. Note: all participants must be Alachua County residents.

Address

City \*

Zip Code \*

7) Add **“Activity Services”** related information applicable to this participant based on your contract.

Current School \*

Current Grade \*

**Activity Services** Please check the boxes required for your program for which you will track attendance specific for this participant.

☐ Academic Support and Enrichment

☒ After School Program

☐ Career Exploration

☐ College Prep

☐ Family Engagement Event

☐ Field Trip

☐ Healthy Relationship Boundaries

☐ Healthy Social and Emotional Development

**All programs** will mark “**After School Program**” and document attendance for children and youth in grades K-12. Programs will document a “Field Trip” and “Family Engagement Event” as applicable for their contract based on their proposed scope and budget.

Programs serving **middle school students** are expected to provide the following services to middle school youth enrolled: (1) Transition to High School, (2) Career Exploration, (3) Healthy Relationship Boundaries, (4) Internet and Social Media Safety, and (5) Healthy Social and Emotional Development.

Programs serving **high school students** are expected to provide the following services to high school youth enrolled: (1) Career Exploration, (2) College Prep, (3) Workforce Development, (4) Leadership Development, (5) Life Management Skills, and (6) Academic Support and Enrichment.

8) Select the “**Participant Group**” and “**Site**” this participant is associated with.

**Groups** ⓘ Please check the box to signify the group this participant is associated with.

☐ Northwest Club Afterschool 2023-2024

☐ Woodland Park Afterschool 2023-2024

**Site**

9) Click on the **Save** Button.


After Saving, Go To

10) If you need to make corrections or changes after you save, select the **Modify** button.


BOBBIE FAKE (1009)

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[📅](#)
[👤](#)
[✎ Modify](#)
[📄 Participant Details](#)
[↔](#)

11) Click on the Participant's **Episode** Open Date.

EPISODES	
Dates	Reason
7/11/2023 - 	

12) Select the checkboxes to indicate the “**Scholarship Eligibility**” criteria that apply to this child/youth and indicate the documentation you received to verify eligibility.

Episode	
Open Date *	 07/11/2023
Scholarship Eligibility *	<div> <input checked="" type="checkbox"/> <a href="#">Family below 200% of federal poverty guidelines</a> </div> <div> <input type="checkbox"/> Family between 200% - 400% of federal poverty guidelines         </div> <div> <input checked="" type="checkbox"/> <a href="#">Family receiving SNAP benefits</a> </div> <div> <input type="checkbox"/> Child has an Individualized Education Plan (IEP) and/or 504 Plan         </div> <div> <input type="checkbox"/> Child is in foster care or voluntary formal kinship care or under case management supervision         </div>
Type of Documentation Provided	Tax Return 1040
Children In Household	<input type="text" value="3"/>
Adults In Household	<input type="text" value="2"/>
Annual Household Income	\$ <input type="text" value="38620"/>

13) As participants exit the program, or by the end of the school year enter a “**Close Date**” and a “**Closing Reason**”. Please add additional closing reason details that may be helpful.

Close Date		
Closing Reason		
Closing Reason Comments		