

CHILD SCHEDULE CHANGE REQUEST

Toddler, Preschool and Pre-Kindergarten Programs

SCHEDULE CHANGE POLICY: If you wish to change your child's schedule, you must give two weeks written notice to the office. Schedule changes are <u>not guaranteed and are subject to availability</u>. Please note that this may result in a reassessment of your Final Balance Deposit, based on the tuition of the new schedule.

| Child's Name | | | | Room # |
|---|------------------|---------------------------------------|-------------------------------|--|
| Current Schedule: | DAYS: | 5 Day Program | 🛯 3 Days (M, W, F) | 🖵 2 Days (Tu, Th) |
| | HOURS: | 🖵 Full Day (7am - 6p | om) 🛛 🖵 Mornings (8 | :30am - 12:30pm) |
| Requested Schedule | Change Date | // | | |
| New Schedule: | DAYS: | 5 Day Program | 🛾 3 Days (M, W, F) | 🗅 2 Days (Tu, Th) |
| | HOURS: | 🖵 Full Day (7am - 6p | om) 🛛 🛛 Mornings (8 | :30am - 12:30pm, ages 3+ only) |
| Please accept this sc | hedule change | request as my two we | eks' notice as required | by the Admission Agreement. |
| Parent Signature | | | | _ Date// |
| | | OFFICE USE ONLY | BELOW THIS LINE | |
| Received Date | <u> </u> | Effective C | Change Day:/_ | / |
| Current Tuition \$ | | _ New Tuitic | on \$ | _ |
| Current FBD \$ | | FBD +/- \$ New FB | | D \$ |
| | | | | |
| × | | | | |
| We have received your schedule change request for | | | | ROOM # |
| Based on our current | availability, yo | ur new schedule will be | gin on | |
| Your new monthly tui | tion will be \$ | | This schedule change | resulted in a reassessment of your |
| | | is due on alance. If you are not e | // enrolled in RapidTuitio | Your account will automatically n, please submit payment on or |