TEMPORARY CHANGE OF SCHEDULE REQUEST FORM

TEMPORARY CHANGE OF SCHEDULE STIPULATIONS:

Today's Date (MM/DD/YYYY)

Parent/Guardian Signature

Parent/Guardian Email

- > This form must be submitted 2 weeks prior to new start time so we can have the proper staff ratio in place.
- > Changes to schedules, exceeding 3 weeks, require completion of a new Tuition Agreement Form.
- > Increased hours may be subject to additional fees.
- Families receiving subsidy funding must communicate schedule changes to their caseworker.

Child's Name			Age	
Reason for request				
Week of				
Day of the week	Dates	Requested Approximate Drop Off Time	Requested Approximate Pick Up Time	
Monday				
Tuesday				
Wednesday				
Thursday				
Friday				

Classroom



Date (MM/DD/YYYY)

Office Use Only					
☐ Approved ☐ Denied	Comments				
☐ Confirmation given to family	on:/	by:			
☐ Entered into Procare	on:/	by:			
☐ Entered into Tadpoles	on:/	by:			
☐ Information given to Classroom	on:/	by:			