



VACATION NOTIFICATION FORM

Account _____ Year _____

Please read the policy stated below and sign. The form will be placed in your file until needed.

This form must be filled out when your child/ren is on vacation. You are given five days of vacation each year. When taken, these days will receive full credit. Days cannot roll over each year. You may have fewer days in your first year, depending on which month your child is enrolled. Those days cannot cover the last days of childcare, any delinquent payments, or any unexpected absences.

This form must be completed and turned in five business days before the scheduled vacation date begins to receive the proper reduced rate.

Your starting amount of vacation days have been prorated to _____ day(s) until next January.

Prorated days are based on the first month of attendance.

- January - February 5 days
- March – April 4 days
- May – June 3 days
- July – August 2 days
- November – December 0 days

Please fill out the chart below when needing to give notice. When needed, please request this form. If you have more than one child and not all children will be taking the day(s) off, please indicate which child will be taking off. Although not all your children may be taking time off, it is still counted for the entire family.

| Vacation No.# | Date of Notice | Date of Vacation | Parent initials |
|----------------------|-----------------------|-------------------------|------------------------|
| 1 | | | |
| 2 | | | |
| 3 | | | |
| 4 | | | |
| 5 | | | |

By signing this form, I've thoroughly read and understand this policy. If payment is not made as instructed above, it may result in my child/ren being removed from the preschool roster.

Parent Guardian Signature

Date

