

Change of Schedule

Child's Name: _____ Child's Classroom: _____

Current Schedule: **M T W R F** Full Day__ Half Day__

New Schedule: **M T W R F** Full Day__ Half Day__ Date of Change: __/__/__

Reason for Change: _____
(***Schedules cannot be changed from week to week. All changes must be semi-permanent.***)

Parents Signature _____ Date: __/__/__



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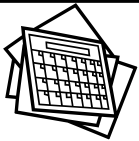
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