

Child's Schedule Change

Your Name: _____ Today's Date: _____

Child's Name: _____

Date/s to be REMOVED: _____

Date/s & Times to be ADDED: _____



➔➔➔ 2-week notice is required for changes. ←←←

If sufficient notice is not given, no credit will be given for days removed.

For OFFICE Use ONLY:

Date received: _____

Recorded by: _____

Jan's Roster

Master Projection Sheet

Sign In/ Out Book

Note To Classroom