



CHANGE OF SCHEDULE

Student's Name: _____ **Teacher's Name:** _____

Current Schedule: M T W TH F

FULL DAYS

1/2 DAYS

New Schedule: M T W TH F

FULL DAYS

1/2 DAYS

Potty Trained ~ Rate Change



I UNDERSTAND THAT MY CHILD'S SCHEDULE CAN ONLY BE CHANGED AS ROOM IS AVAILABLE AND UPON APPROVAL OF THE DIRECTOR.

Requested Effective Date: _____ **Parent Signature** _____

OFFICE USE:	
Director Approval: _____	Date: _____
<input type="checkbox"/> New Billing Entered <input type="checkbox"/> No Billing Change <input type="checkbox"/> New Categories Entered	

NOTICE OF WITHDRAWAL

Student's Name: _____ **Date:** _____

Teacher's Name: _____

I HEREBY GIVE MY 2 WEEKS NOTICE TO WITHDRAW MY CHILD FROM SCHOOL AS OF _____ (CHILD'S LAST DAY)

I understand that I am responsible for any outstanding fees or property belonging to Happy Harbor Preschool and that I must return or pay the above stated before my child's last day of attendance.
Thank you!

REASON FOR WITHDRAWAL:

FINANCIAL MOVED OUT OF THE AREA OTHER: _____

UNHAPPY WITH SCHOOL - PLEASE EXPLAIN: _____

Parent Signature _____ **Date:** _____

OFFICE USE:	
<input type="checkbox"/> Balance Cleared <input type="checkbox"/> Non-Current Status Date Entered: _____	Notes: _____