



**at Waltham**

## **Request for Schedule Change**

Child's Name \_\_\_\_\_

Date \_\_\_\_\_

My child's **current** schedule is:

Monday	Tuesday	Wednesday	Thursday	Friday
___ to ___	___ to ___	___ to ___	___ to ___	___ to ___

I would like to **change** my child's schedule to:

Monday	Tuesday	Wednesday	Thursday	Friday
___ to ___	___ to ___	___ to ___	___ to ___	___ to ___

\_\_\_ **Permanent change:** I would like this change to start on \_\_\_\_\_.

\_\_\_ **Temporary change:** I would like this change from dates \_\_\_\_\_ to \_\_\_\_\_.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

*Please present this form to a member of the Admin team 30 days prior to a schedule change. An Admin member will sign the form if there is space available in the classroom to accommodate your request.*

This request is approved/denied based on availability and mandated ratios.

Current tuition: \$\_\_\_\_\_.

New Tuition: \$\_\_\_\_\_.

\_\_\_\_\_  
FOR OFFICE USE: RECEIVED BY \_\_\_\_\_ ON \_\_\_\_ / \_\_\_\_ / \_\_\_\_.

ENTERED IN BRIGHT STAR BY \_\_\_\_\_ ON \_\_\_\_ / \_\_\_\_ / \_\_\_\_.