

# Child's Schedule Change

Child's Name: \_\_\_\_\_ Class: \_\_\_\_\_

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Care that is NO longer needed (Month/Day): \_\_\_\_\_

CARE NEEDED (Month/Day & In/Out Times): \_\_\_\_\_

\_\_\_\_\_

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FOR OFFICE USE ONLY:

Recorded by: \_\_\_\_\_

\_\_\_\_\_ Jan's Roster

\_\_\_\_\_ Sign In/Out Book

\_\_\_\_\_ Note to Classroom ~ Teachers, please make the above changes to your class roster. Thanks!