SCHEDULE CHANGE / WITHDRAWAL NOTICE Mary Linsmeier Schools, Children's Edu-care

Child's Name (first	& last)		Date			
Parent's Name (first			Center Location			
☐ Infant/Toddler ☐ 2+, Not Pott			ty-trained Preschool		☐ Grade School	
 Schedule Chang Up to two chang Additional chang 	es in schedule		nt plans in a twe	elve month per	iod will be at no c	harge
Old Schedule From:	Monday	Tuesday	Wednesday	Thursday	<u>Friday</u>	
То:						
New Schedule From:						
То:						
Transportation	· ·	one way two way	•	one way two way	<u> </u>	
Date change is eff Withdrawal not You must give a wrist not given, you wi	otice:	porary Wit	thdrawal \Box	Permanent W	the notice	
Last day your child	will attend: _					
Please let us know y	our reason fo	r withdrawin	ng:			
Parent's Signature				Director's	Initials:	