



## Building Brains Schedule Change Request

<b>Campus Attending:</b>		<b>Current Date:</b>			
<b>Child's Full Name:</b>		<b>Requested Start Date of Change:</b>			
<b>Child's Current Program:</b> <small>(Please Circle)</small>	Infant Care	Junior Preschool	Preschool		
<b>Current Schedule</b> <small>(Please Circle)</small>	Monday	Tuesday	Wednesday	Thursday	Friday
<b>New Schedule Requested</b> <small>(Please Circle)</small>	Monday	Tuesday	Wednesday	Thursday	Friday
<b>Second Choice</b> <small>(if we cannot accommodate your first choice)</small>	Monday	Tuesday	Wednesday	Thursday	Friday

**Notes:**

- Please note that for a 3-day schedule, we request that it includes a Monday or Friday

**Policies:**

- For changes requested less than 30 days prior to the first of the month, a 10% convenience charge will be applied (Expedited Schedule Change). All outstanding balances, including those incurred by the schedule change, must be cleared prior to the schedule change taking place. Your child's new schedule will not be accepted, and your child will not be accepted into care if an outstanding balance is present.
- All schedule changes must be submitted on or before the first business day of the month for approval PRIOR to the change going into effect.
- All schedule changes are subject to campus availability and formal approval by the registration department. Your child cannot attend the new schedule without formal approval.
- Please note all changes are implemented on the 1<sup>st</sup> of each month, as tuition is billed monthly.

Parent's Name: \_\_\_\_\_

Parent's Signature: \_\_\_\_\_

Reason for Change: \_\_\_\_\_

**\*Registration Department Please Fill in Below**

<b>Choice #1</b>	Approved   Denied	<b>Choice #2</b>	Approved   Denied
<b>New Schedule</b>			
<b>Signature</b>		<b>Entered into System</b>	