

Christ Church Children's Center

"PARTIAL WITHDRAWAL" Request Form For SUMMER 2022

**MUST be submitted to CCCC Office
NO LATER THAN April 13, 2022**

Today's Date: _____

Child's Name: _____

The day and time that I am **requesting** for my child to attend **during** the Partial Withdrawal is:
(Please be sure to choose one of the days that is covered by your regular contract. Other days will NOT be approved.)

1st Choice: M T W Th F Arrival time: _____ Departure time: _____
(Circle only ONE day)

2nd Choice: M T W Th F Arrival time: _____ Departure time: _____
(Circle only ONE day)

3rd Choice: M T W Th F Arrival time: _____ Departure time: _____
(Circle only ONE day)

Circle: YES NO My child WILL / Will NOT contract for the Center's breakfast program for the PW Day:

___ My child will not attend daycare during the Partial Withdrawal, but I will pay the weekly Partial Withdrawal fee to hold his/her space.

I understand that my participation in Christ Church Children's Center Partial Withdrawal Program will be for consecutive weeks throughout the summer. These weeks will be between Monday, June 6, 2022 through Friday, August 19, 2022.

I also understand all CCCC policies for the Partial Withdrawal Program as outlined in the Parent Handbook and on the CCCC Fee Schedule will be enforced. Payment is due each Friday of partial withdrawal. The fee per child is \$57 per week with not other discounts offered during that time.

Additionally, I understand that any and all requests for care (besides the approved, scheduled Partial Withdrawal Day) MUST be submitted on the "Temporary Change of Schedule Request" form for the CCCC management to review and approve for care availability.

OFFICE USE ONLY

DATE: _____

TO: _____

FROM: CCCC Office

Your request for the Partial Withdrawal Program for Summer 2020:

_____ HAS BEEN APPROVED for the following day/times _____

Signed, _____

Center Director Signature

Date returned: _____

Staff Initials _____

Copy Given: _____

Staff Initials _____