



A NJ Non-Profit Corporation  
Celebrating 25 Years of Caring for Children

# Haddonfield Child Care

## NOTIFICATION OF SCHEDULE CHANGE

**All schedule changes for a given month must be made in writing on this form.**

**Verbal changes to any HCC staff member will not be considered valid.**

**Decreases in schedule must be received in the HCC office by 3:00 p.m. on the 15<sup>th</sup> of the month (or the last previous business day) of the preceding month.**

If this form is not received by the deadline, you will be billed at the higher tuition rate, or assessed a \$50.00 processing fee, whichever is less.

Please complete a separate form for each child affected by the change in schedule.

No changes can be made once the month begins.

**Please note:** Changing to per diem status or withdrawing from the program are **not** considered “**schedule changes**”. Those status changes require **30 days notice** prior to the start of the month in which they will take effect.

Please make the following changes in schedule for my child \_\_\_\_\_ :  
Name of Child

### **CURRENT**

### **NEW**

<u>Days</u>	<u>Schedule</u>
Monday	_____
Tuesday	_____
Wednesday	_____
Thursday	_____
Friday	_____

<u>Days</u>	<u>Schedule</u>
Monday	_____
Tuesday	_____
Wednesday	_____
Thursday	_____
Friday	_____

I would like this change to be effective \_\_\_\_\_  
Date

Today's date \_\_\_\_\_  
Signature

### **FOR OFFICE USE ONLY**

Program Supervisor notified _____	Date _____	By _____
Attendance record changed _____	Date _____	By _____
Changed in billing system _____	Date _____	By _____