



Montessori of Alameda 21st Century School
Kid's on the Go

CHANGE OF SCHEDULE REQUEST FORM
(30 day notice required)

Child's Name: _____

Classroom: _____

Program: Infant & Toddler Preschool/Kindergarten/Primary

Current Schedule: _____

Schedule Change to Take Effect on: _____

Infant and Toddler				Preschool/Kindergarten/Primary					
<u>NEW SCHEDULE:</u>		<u>Cash/Checking / Credit Card</u>		<u>NEW SCHEDULE:</u>		<u>Cash/Checking / Credit Card</u>			
<input type="checkbox"/>	4	¼ days M-Th (8:00-3:30)	\$1,100	\$1,125	<input type="checkbox"/>	4	¼ days M-Th (8:00-3:30)	\$925	\$950
<input type="checkbox"/>	5	¼ days M-F (8:00-3:30)	\$1,150	\$1,175	<input type="checkbox"/>	5	¼ days M-F (8:00-3:30)	\$950	\$975
<input type="checkbox"/>	4	Full days M-Th (8:00-5:30)	\$1,300	\$1,325	<input type="checkbox"/>	4	Full days (8:00-5:30)	\$1025	\$1,050
<input type="checkbox"/>	5	Full days M-F (8:00-5:30)	\$1,500	\$1,525	<input type="checkbox"/>	5	Full days (8:00-5:30)	\$1,100	\$1,125
<input type="checkbox"/> Adding Before-Care (additional) \$100 /month (from 7:30 – 8 am)				<input type="checkbox"/> Adding Before-Care (additional) \$100/month (from 7:30 – 8 am)					

I, _____ (parent/s name), am requesting the above change of schedule. I am aware that there will be a change in our monthly tuition bill that corresponds to this request and that I will be immediately charged the difference that is now owed for the last month's tuition. If I decide to change the schedule mid-month, without giving 30 days notice, I am aware that I will still be charged the same amount as the school does not pro-rate tuition.

 Parent's Signature

 Date

For Admin Use ONLY

Approved By: _____ Approval Communicated: Parent Staff

Procare Updated: Ledger Updated Date: _____

Schedule Updated Date: _____

Last Month's Tuition Adjusted

NOTES: _____