



Hourly Childcare Center Change of Hours Request Form

This form is to request any changes in regular care hours.

This form does not guarantee requested hours and is for students who are currently registered for regular care with the Hourly Child Care Center.
(this does not include back-up care)

Parent's Name: _____ Date: _____

W# (Required): _____ Wildcat Email (Required): _____

Name(s) of Child(ren): _____

Requested Schedule

Is this a permanent change for the semester? Yes__ No__ If "No", please list the dates for the temporary changes below:

Start Date: _____ End Date: _____
(month/day/year) (month/day/year)

Fall Spring Summer

Monday	Tuesday	Wednesday	Thursday	Friday

Note: Parents will be notified via phone or email within two working days if requests have been approved.

I acknowledge that this form does not guarantee the changes I have requested.

Parent Signature: _____ Date: _____

Approver Signature: _____ Date: _____