

## **GSCS Program Change Request Form**

I would like to requ	est the program	change indic	eated below for my child	
I understand that ch	anges normally	need to be fo	ormally requested by the	25th of each month and
the changes will tak	te place starting	on the first o	f the following month.	
Parent's Name:				
Parent's Signature:		Da	te:	
Please check one:	1	1		<del></del> -
Lamb Class	Lion Clas	ss	Eagle Class	
Please indicate req	uested schedule	2:		
Regular (M-F, 9-5)	*Half Day (M-F, 9-12:30)		*3 Day Week (T-Th, 9-5)	
* Subject to availab	ility and discreti	on of GSCS	management	
Additional Service	es:			
Morning Extended Care (8-9) \$150		l l	Afternoon Extended Care (5-5:30) \$100	