

BASEC at Chenery
 Schedule Change/Withdrawal Request
 Date _____

Student's name _____

Current Schedule

M T W TH F

Please Change To The Following Schedule Below

M T W TH F

Withdrawn

Effective Date: _____

This schedule change must be approved by the Director. You will be notified of this approval. Once enrolled, your child's schedule is set until the January change date. In January, you may adjust the schedule without consequence. If you choose to change your schedule at any other time, your tuition deposit will be forfeited.

Parent/Gaurdian Signature _____

Director Approval _____

Date _____

Notes: