

School Out Days -- Please complete this form indicating the "school out days" that you are requesting full-time child care for any school-aged children.

Park School District 2012-13

Place an "X" by each school out day that you are requesting child care coverage for your school-aged child(ren): _____

- _____ Monday, September 3 (Labor Day)
- _____ Monday, September 17 (ES-Staff Development)
- _____ Friday, October 12 (ES Conferences)
- _____ Friday, October 19 (Teacher Work Day)
- _____ Wednesday-Friday, November 21-23 (Thanksgiving Break)
- _____ Monday, December 24 – Friday, January 4 (Winter Break)
- _____ Monday, January 21 (Dr. King Day)
- _____ Monday, February 18 (Presidents' Day)
- _____ Friday, February 22 (ES Conferences)
- _____ Friday, March 8 (Teacher Work Day)
- _____ Monday-Friday, April 8-12 (Spring Break)
- _____ Monday, April 15 (Teacher Contract Day)
- _____ My child(ren) do not follow this schedule
- _____ **Summer Break:**
Please indicate schedule needed for summer: ____FT ____PT
____MON ____TUES ____WED ____THURS ____FRI

If your child (ren) does/do not follow any of these schedules, you must provide a copy of the school calendar indicating which days child care is requested.

I will inform you within three (3) days of any schedule changes that may be needed. **By signing this form, I understand that I may not qualify for CCAP services due to a change in circumstances.**

Parent Printed Name _____ SSN _____

Parent Signature _____ Date _____

