



Vacation Request

I, _____, hereby request vacation credit for
Parent

_____ the week of _____ through _____.
Child

I acknowledge the conditions of this request which are:

- My child has been enrolled 12 consecutive months
- Two weeks' notice is required for vacation credit
- This form has been submitted and needs approval by management
- Vacation credit will only be given for a full week of absence, Monday through Friday
- My child will be absent for the entire calendar week shown above
- My account payment is current and paid in full
- I will have no payment due for the week my child is absent if this request is approved

Parent Signature

Date

For Office Use Only

Enrollment Date _____

Approved

Not Approved

Signature

Date

Posted to PC ____ Initials ____

Notified Teachers ____ Initials ____

Posted to Billing ____ Initials ____

Email ____ Initials ____

ACH ____ Initials ____