



WITHDRAWAL AND CHANGE OF ENROLLMENT

- Complete the information below by hand or computer
- There is a \$25 fee to add or change classes
- Must be submitted two-weeks in advance to effective date
- Return to Gina Hatcher ghatcher@uppc.org, or leave in the SCP Mailbox.

Student Name _____	Today's Date _____
Parent/Guardian Name(s) _____	
Email(s) _____	
Phone Number(s) _____	Effective Date _____

Please **WITHDRAW** my child from

Class _____

Morning Care ___ Monday ___ Tuesday ___ Wednesday ___ Thursday ___ Friday

Enrichment ___ Monday ___ Tuesday ___ Wednesday ___ Thursday ___ Friday ___ Fri AM

Afternoon Flex ___ Monday ___ Tuesday ___ Wednesday ___ Thursday ___ Friday

Please **ADD / ENROLL** my child in

Class _____

Morning Care ___ Monday ___ Tuesday ___ Wednesday ___ Thursday ___ Friday

Enrichment ___ Monday ___ Tuesday ___ Wednesday ___ Thursday ___ Friday ___ Fri AM

Afternoon Flex ___ Monday ___ Tuesday ___ Wednesday ___ Thursday ___ Friday

REFUND OF TUITION POLICY: If necessary, a prorated refund will be issued on any pre-paid tuition if at least a two weeks advance *Withdrawal and Change of Enrollment* notice is given.

Submitting this form does not necessarily guarantee program enrollment. SCP Staff will contact you with the enrollment decision and any necessary tuition payment and/or fee information.

FOR OFFICE USE ONLY	Date Received _____	<input type="checkbox"/> \$25 Fee	<input type="checkbox"/> No Fee
____ SCP Administrator/Approved	Notes _____		
____ SCP Accounts Coordinator	_____		
Date Email Sent: _____	_____		
Refund Amount: _____	_____		
Date Refund Completed: _____	_____		