

Month of : _____

Child's Name: _____

	Monday	Tuesday	Wednesday	Thursday	Friday	Total
						Week One
Week of: _____	_____ - 7:41 AM Hours: _____ 3:40 - _____ PM Hours: _____ <input type="checkbox"/> Requesting Full Day <input type="checkbox"/> Requesting Half Day	_____ - 7:41 AM Hours: _____ 3:40 - _____ PM Hours: _____ <input type="checkbox"/> Requesting Full Day <input type="checkbox"/> Requesting Half Day	_____ - 7:41 AM Hours: _____ 3:40 - _____ PM Hours: _____ <input type="checkbox"/> Requesting Full Day <input type="checkbox"/> Requesting Half Day	_____ - 7:41 AM Hours: _____ 3:40 - _____ PM Hours: _____ <input type="checkbox"/> Requesting Full Day <input type="checkbox"/> Requesting Half Day	_____ - 7:41 AM Hours: _____ 3:40 - _____ PM Hours: _____ <input type="checkbox"/> Requesting Full Day <input type="checkbox"/> Requesting Half Day	Total Hours: _____
						Week Two
Week of: _____	_____ - 7:41 AM Hours: _____ 3:40 - _____ PM Hours: _____ <input type="checkbox"/> Requesting Full Day <input type="checkbox"/> Requesting Half Day	_____ - 7:41 AM Hours: _____ 3:40 - _____ PM Hours: _____ <input type="checkbox"/> Requesting Full Day <input type="checkbox"/> Requesting Half Day	_____ - 7:41 AM Hours: _____ 3:40 - _____ PM Hours: _____ <input type="checkbox"/> Requesting Full Day <input type="checkbox"/> Requesting Half Day	_____ - 7:41 AM Hours: _____ 3:40 - _____ PM Hours: _____ <input type="checkbox"/> Requesting Full Day <input type="checkbox"/> Requesting Half Day	_____ - 7:41 AM Hours: _____ 3:40 - _____ PM Hours: _____ <input type="checkbox"/> Requesting Full Day <input type="checkbox"/> Requesting Half Day	Total Hours: _____
						Week Three
Week of: _____	_____ - 7:41 AM Hours: _____ 3:40 - _____ PM Hours: _____ <input type="checkbox"/> Requesting Full Day <input type="checkbox"/> Requesting Half Day	_____ - 7:41 AM Hours: _____ 3:40 - _____ PM Hours: _____ <input type="checkbox"/> Requesting Full Day <input type="checkbox"/> Requesting Half Day	_____ - 7:41 AM Hours: _____ 3:40 - _____ PM Hours: _____ <input type="checkbox"/> Requesting Full Day <input type="checkbox"/> Requesting Half Day	_____ - 7:41 AM Hours: _____ 3:40 - _____ PM Hours: _____ <input type="checkbox"/> Requesting Full Day <input type="checkbox"/> Requesting Half Day	_____ - 7:41 AM Hours: _____ 3:40 - _____ PM Hours: _____ <input type="checkbox"/> Requesting Full Day <input type="checkbox"/> Requesting Half Day	Total Hours: _____
						Week Four
Week of: _____	_____ - 7:41 AM Hours: _____ 3:40 - _____ PM Hours: _____ <input type="checkbox"/> Requesting Full Day <input type="checkbox"/> Requesting Half Day	_____ - 7:41 AM Hours: _____ 3:40 - _____ PM Hours: _____ <input type="checkbox"/> Requesting Full Day <input type="checkbox"/> Requesting Half Day	_____ - 7:41 AM Hours: _____ 3:40 - _____ PM Hours: _____ <input type="checkbox"/> Requesting Full Day <input type="checkbox"/> Requesting Half Day	_____ - 7:41 AM Hours: _____ 3:40 - _____ PM Hours: _____ <input type="checkbox"/> Requesting Full Day <input type="checkbox"/> Requesting Half Day	_____ - 7:41 AM Hours: _____ 3:40 - _____ PM Hours: _____ <input type="checkbox"/> Requesting Full Day <input type="checkbox"/> Requesting Half Day	Total Hours: _____
						Week Five
Week of: _____	_____ - 7:41 AM Hours: _____ 3:40 - _____ PM Hours: _____ <input type="checkbox"/> Requesting Full Day <input type="checkbox"/> Requesting Half Day	_____ - 7:41 AM Hours: _____ 3:40 - _____ PM Hours: _____ <input type="checkbox"/> Requesting Full Day <input type="checkbox"/> Requesting Half Day	_____ - 7:41 AM Hours: _____ 3:40 - _____ PM Hours: _____ <input type="checkbox"/> Requesting Full Day <input type="checkbox"/> Requesting Half Day	_____ - 7:41 AM Hours: _____ 3:40 - _____ PM Hours: _____ <input type="checkbox"/> Requesting Full Day <input type="checkbox"/> Requesting Half Day	_____ - 7:41 AM Hours: _____ 3:40 - _____ PM Hours: _____ <input type="checkbox"/> Requesting Full Day <input type="checkbox"/> Requesting Half Day	Total Hours: _____

There are no tuition reductions for illness or inclement weather (No credits applied for unused days)

Total for the Month: _____

Please round up to the nearest hour when calculating AM and PM times

It is the parents responsibility to inform us of half day schedule and all public calendar changes.

Monthly form can be found at Weecareinc.net or you may request a copy from the front desk.