

SUMMER 2019
SCHEDULE CHANGE FORM

**Final changes to your child's summer schedule
need to be submitted by Friday, May 24, 2019.**

Student's Name: _____ Date: _____

	monday	tuesday	wednesday	thursday	friday	Notes:
week 01 (06/24-28)	06/24 <input type="checkbox"/>	06/25 <input type="checkbox"/>	06/26 ful	06/27 <input type="checkbox"/>	06/28 <input type="checkbox"/>	_____
week 02 (07/01-05)	07/01 <input type="checkbox"/>	07/02 <input type="checkbox"/>	07/03 <input type="checkbox"/>	07/04 closed	07/05 closed	_____
week 03 (07/08-12)	07/08 <input type="checkbox"/>	07/09 <input type="checkbox"/>	07/10 ful	07/11 <input type="checkbox"/>	07/12 <input type="checkbox"/>	_____
week 04 (07/15-19)	07/15 <input type="checkbox"/>	07/16 <input type="checkbox"/>	07/17 ful	07/18 <input type="checkbox"/>	07/19 <input type="checkbox"/>	_____
week 05 (07/22-26)	07/22 <input type="checkbox"/>	07/23 <input type="checkbox"/>	07/24 ful	07/25 <input type="checkbox"/>	07/26 <input type="checkbox"/>	_____
week 06 (07/29-08/02)	07/29 <input type="checkbox"/>	07/30 <input type="checkbox"/>	07/31 ful	08/01 <input type="checkbox"/>	08/02 <input type="checkbox"/>	_____
week 07 (08/05-09)	08/05 <input type="checkbox"/>	08/06 <input type="checkbox"/>	08/07 <input type="checkbox"/>	08/08 ful	08/09 <input type="checkbox"/>	_____
week 08 (08/12-16)	08/12 <input type="checkbox"/>	08/13 <input type="checkbox"/>	08/14 <input type="checkbox"/>	08/15 <input type="checkbox"/>	08/16 ful	_____

ADDITIONAL INFORMATION:

Initials:

*** 3-day minimum per week.**

Summer Day-Camp Schedule Change Form

