Part-Time to Full-Time Enrollment Form

Please use this form when upgrading from Part-time to Full-time enrolment in the program.

<u>Cost – Full-time Monthly Fee</u> Infant = \$1,132.37 (CWELCC Applied) Toddler = \$948.65 (CWELCC Applied) Preschool = \$764.17 (CWELCC Applied)			
		Child's Name:	
		I would like to commence full-time o	n
I understand that (please sign with in	itials)		
the full-time position will be applicable for the whole week attendance without any deduction for sick days or other form of absences.			
I will require approval from the changes to the enrolment if po	supervisor for my child to any future ossible.		
All stipulations of the original po	arent agreement remain intact.		
Once the start date for full-time that date.	e is decided, I cannot make changes to		
Parent Name:			
	Date:		
Office Use			
Part Time Started:	_ Part Time Ended:		
Change Approval Date:			
Supervisor Signature:	Date:		