



**COOK'S HOME CHILD CARE AGENCY
CHILD CARE SCHEDULE REQUEST
January 2022**

SPECIAL DATES
Jan 1: New Year's Day (closed) *

| | |
|----------------------|--|
| CHILD'S NAME: | PARENT/GUARDIAN NAME (PRINTED): |
|----------------------|--|

Please indicate one of the following in EVERY weekday of the month: the daily hours of care needed OR check the box beside "NO CARE"

Month: **January 2022** **NOTE: January 30 & 31 are on the February 2022 calendar**

| | | | | | | |
|----------------|----------------|----------------|----------------|----------------|----------------|----------------------------------|
| | | | | | | SAT |
| | | | | | | Closed for New Year's Day |
| SUN | MON | TUE | WED | THUR | FRI | SAT |
| Time In | Time In | Time In | Time In | Time In | Time In | Time In |
| Time Out | Time Out | Time Out | Time Out | Time Out | Time Out | Time Out |
| NO CARE | NO CARE | NO CARE | NO CARE | NO CARE | NO CARE | NO CARE |
| SUN | MON | TUE | WED | THUR | FRI | SAT |
| Time In | Time In | Time In | Time In | Time In | Time In | Time In |
| Time Out | Time Out | Time Out | Time Out | Time Out | Time Out | Time Out |
| NO CARE | NO CARE | NO CARE | NO CARE | NO CARE | NO CARE | NO CARE |
| SUN | MON | TUE | WED | THUR | FRI | SAT |
| Time In | Time In | Time In | Time In | Time In | Time In | Time In |
| Time Out | Time Out | Time Out | Time Out | Time Out | Time Out | Time Out |
| NO CARE | NO CARE | NO CARE | NO CARE | NO CARE | NO CARE | NO CARE |
| SUN | MON | TUE | WED | THUR | FRI | SAT |
| Time In | Time In | Time In | Time In | Time In | Time In | Time In |
| Time Out | Time Out | Time Out | Time Out | Time Out | Time Out | Time Out |
| NO CARE | NO CARE | NO CARE | NO CARE | NO CARE | NO CARE | NO CARE |

I, hereby, confirm that the completed schedule request reflects my child care needs. I understand that I will be billed according to this schedule once it is approved. Additional days may be added **ONLY IF SPACE PERMITS**. Arriving unexpectedly cannot be permitted. Changes to the schedule (request to add days, cancel days, book vacation time) must be submitted in writing on the **Change to Schedule Form TWO** weeks before the change will occur. Full fees apply if notice is less than **TWO** weeks and when all "free" days are used.

Parent/Guardian Signature: _____ **Date:** _____

SUBMIT THIS COMPLETED SCHEDULE TO THE OFFICE BEFORE: December 13, 2021
***** SPACES LIMITED *****