

30-DAY NOTICE

"LEAVE OF ABSENCE"

From Children's Center at Caltech

Child Name: _____ Classroom: _____

Parent Name: _____ Phone (during leave): _____

Email (during leave): _____

Leave Starting: _____

Expected Date of Return: _____ (must be over one month)

Reason for Leave: _____

PARENT ACKNOWLEDGEMENT: I understand that the space(s) cannot be held open in our absence and that there is no guarantee that a space(s) will be available for my child(ren) when we return. Our name will be returned to the wait list. A leave will not be accepted for less than one month.

Parent Signature: _____ Date: _____

Parent Signature: _____ Date: _____