

1225 Gill Ave Madera, CA 93637

(559)661-0779

## Child(ren)'s School Schedule

The following information is needed in order to determine the accurate amount of hours for subsidized childcare services. Please fill in the following information for each child of school age & answer <u>ALL</u> of the questions.

	Parent Name:		School Year
CHILD #1	Name:	Age:	Child is in the After-School Program?
	School Name:	Grade:	YES (until what time:p.m.) D NO Current Need (check one)
	Schedule: Start Time:	End Time:	Only during School Year
	Early Out Day: M TO W THO FO	Early Out End Time:	
CHILD #2	Name:	Age:	Child is in the After-School Program?
	School Name:	Grade:	YES (until what time:p.m.)  NO Current Need (check one)
	Schedule: Start Time:	End Time:	Only during School Vear
	Early Out Day: M T T W TH F	Early Out End Time:	
CHILD #3	Name:	Age:	Child is in the After-School Program?
	School Name:	Grade:	YES (until what time:p.m.)  D NO Current Need (check one)
	Schedule: Start Time:	End Time:	□ Only during School Year □ Year Round
	Early Out Day: M TO W THO FO	Early Out End Time:	
CHILD #4	Name:	Age:	
	School Name:	Grade:	YES (until what time:p.m.)  NO Current Need (check one)
	Schedule: Start Time:	End Time:	Only during School Year
	Early Out Day: M T T W TH F	Early Out End Time:	Year Round None of the above:
CHILD #5	Name:	Age:	Child is in the After-School Program?
	School Name:	Grade:	YES (until what time:p.m.)  D NO Current Need (check one)
	Schedule: Start Time:	End Time:	<ul> <li>Only during School Year</li> <li>Year Round</li> </ul>
	Early Out Day: M TT W TH F	Early Out End Time:	□ Year Round □ None of the above:

Signature:

Date: \_