

Moving on Up!

New Classroom Form

St. Peter Community Child Care Center (SP3C)

Please complete this form before your child transitions to their new classroom.

Parent / Guardian Information

Parent / Guardian Name(s)

Tentative Start Date

Child Transitioning Classrooms

Child's First and Last Name

Age

Date of Birth

New Classroom (select one)

☐ Infant

☐ Toddler

☐ Preschool

☐ Pre-K

☐ School Age

Our Schedule Will Be

Please provide expected arrival and departure times to help SP3C plan classroom staffing.

Day

Arrival time

Departure time

Monday

Arrive:

Depart:

Tuesday

Arrive:

Depart:

Wednesday

Arrive:

Depart:

Thursday

Arrive:

Depart:

Friday

Arrive:

Depart:

Schedule:

☐ Same weekly

☐ Varies weekly

☐ Varies monthly

Updates About Your Child

Anything new you would like us to know as your child transitions classrooms?

Parent / Guardian Signature

Date