



# Starfish Social Services

## Programme Withdrawal Form

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Please select all the programme(s) you would like to withdraw your child(ren) from:

- Before School Care       Afterschool Care       Holiday Programme

I, \_\_\_\_\_ (print parent name) will be withdrawing my

Child(ren) \_\_\_\_\_ (print child(ren)'s name)

Today's Date: \_\_\_\_\_ Our last day of child care will be \_\_\_\_\_ (date).

Please accept this as my TWO WEEK'S NOTICE for withdrawal of my child/children.

Reason(s) for leaving:

- Moving    Child aging out    Challenging Behavior  
 Rates are too high    Policy Issues    Change in child care needs  
 Other (please explain): \_\_\_\_\_

To help us serve our parents and children better and continue growing, please answer the following:

Would you refer me?  Yes  No, why not: \_\_\_\_\_

Would you use me again?  Yes  No, why not: \_\_\_\_\_

Comments or suggestions: \_\_\_\_\_  
\_\_\_\_\_

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Provider Signature: \_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_\_ I have received ALL personal belongings.

Supervisors Comments:

Supervisors Signature: \_\_\_\_\_ Date: \_\_\_\_\_