

Withdrawal Notice

(All Withdrawals require a two week notice)

Child's Name: _____ Today's Date: _____

Last Day to Attend: _____ Child's Class: _____

Reason for Withdrawal: _____

Little Doves is always looking for ways to improve our center. While your child was in our care, how could we have served you better? _____

What are our strengths as a center? _____

Parent's Signature: _____ Date: _____

Please return this form to the director or place it in the tuition box.