

## NEDP Extra Day Request Form

(24 hour notice appreciated)

### NEDP Copy

My child attends the NEDP program at \_\_\_\_\_ school. I, \_\_\_\_\_, Parent /Guardian

am requesting additional care for my child, \_\_\_\_\_ for the following day(s):

\_\_\_\_\_. I understand that there is an additional fee of \$25.00 per day.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

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## NEDP Extra Day Request Form

### Financial Manager's Copy

Participant's Name: \_\_\_\_\_ School: \_\_\_\_\_

Number of days requested \_\_\_\_\_ x \$25 = \$ \_\_\_\_\_ Dates of requested days: \_\_\_\_\_

Site Coordinator's Initials: \_\_\_\_\_ Date: \_\_\_\_\_

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## NEDP Extra Day Request Form

### Parent Copy

Your request for additional care has been:

\_\_\_\_\_ Denied due to: \_\_\_\_\_

\_\_\_\_\_ Approved. We are looking forward to seeing your child on: \_\_\_\_\_

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| <b>Please remember to send a note to your child's teacher.</b> |
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Participant's Name: \_\_\_\_\_

Extra Day Fee: \$25.00

Number of days requested \_\_\_\_\_ x \$25.00 = \$ \_\_\_\_\_

**Extra Day Fee will appear on your next tuition invoice.**

Site Coordinator's Initials: \_\_\_\_\_ Date: \_\_\_\_\_