

## 10.14 Notification of Leaving Form

[Name of provider] Notification of Leaving Form

[Address]

[Telephone number and email address]

[Charity Number and/or Company Registration Number]

You are required to provide us with at least one month's notice of withdrawing your child. If insufficient notice is given you will be responsible for the full fees for your child for one month from the date of notice. Please refer to our terms and conditions for full details.

A final invoice will be issued reflecting the fees chargeable for the remaining period that your child attends - together with any previously invoiced amounts which remain outstanding.

I confirm that \_\_\_\_\_ *(insert child's name)* will be leaving

[insert name of provider] \_\_\_\_\_ *(insert date)* and hereby give the  
on

required one month's notice period.

Name of parent/guardian \_\_\_\_\_

Signed \_\_\_\_\_ Date \_\_\_\_\_

Because we are always seeking to develop and improve our services, we would be grateful for a response to the questions below. All feedback is treated confidentially and is greatly valued.

1. How long has your child attended our setting? \_\_\_\_\_ Years \_\_\_\_\_ Months

2. Which age group does your child attend? 0-2's / 2-3's / 3-5's

3. Why is your child leaving?  Cost  Starting school  Attending another setting

Other \_\_\_\_\_

4. How would you rate the standard of care and education your child has received?  Very good  Good  Satisfactory  Poor

