

Early Learning Coalition of Flagler and Volusia Counties

Voluntary Pre Kindergarten Classroom Transfer

When this form should be used: When a VPK provider operates more than one VPK classroom within the same provider location, and a child is moved from one classroom to another, the changes must be noted on this form and faxed to the ELCFV Reimbursement Department. Faxing this form to the ELCFV Reimbursement Department ensures accurate enrollment and funding.

I. If the transfer into another classroom results in a change in the times or days of the child's VPK class schedule, **written consent from the parent must accompany this form.** This written consent should include the name and address of the provider, the child's name and date of birth, the fact that the parent accepts the change in classroom which results in different times or days, why the change was necessary and the signature of the parent

II. If the classroom the child is transferring into has more remaining VPK hours than the child has remaining, the child will exhaust their VPK funding before the end date of the VPK Program for that class. When this situation presents itself, form AWI-VPK 06 must accompany this Classroom Transfer form.

The Provider will complete the un-shaded portions of the top block of this form and the parent will complete and sign the bottom portion giving informed consent. ELCFV staff will calculate remaining hours for funding in the new classroom and the provider will be notified. This process makes the parent aware that VPK funding will not be provided for the full time frame of the new class, and allows arrangements to be made between the parent and provider

Provider Name: _____

Child's Name	Transfer date	Parent's Name	From Classroom	To Classroom	I. Class schedule different	II. Remaining hours different

Please **Print** legibly
For classroom indicators use letters only (A, B, C, etc.)

Fax this form to ELCFV Reimbursement (386) 323-2432