

**POWAY UNIFIED SCHOOL DISTRICT
EXTENDED STUDENT SERVICES
FEE ADJUSTMENT REQUEST**

School Location: _____ Date: _____

Parent Name: _____ Fax (485-1937)

Children:

First: _____ Grade: _____
Second: _____ Grade: _____
Third: _____ Grade: _____

Change of Contract

From: <input type="checkbox"/> Full <input type="checkbox"/> AM <input type="checkbox"/> PM <input type="checkbox"/> ALT <input type="checkbox"/> PUSD <input type="checkbox"/> Summer
To: <input type="checkbox"/> Full <input type="checkbox"/> AM <input type="checkbox"/> PM <input type="checkbox"/> ALT <input type="checkbox"/> PUSD <input type="checkbox"/> Summer

Effective Date: _____

Additional Fees to be Charged

Miscellaneous Fee: _____ Amount Due: _____

President's Week Spring Break

Late Pick-up Fees

I was _____ minutes late picking up my child(ren) on _____.

- 00 to 10 minutes: \$1.00 per minute per child
- 11 to 30 minutes: \$30.00 per child
- 31 to 60 minutes: \$60.00 per child

Total late pick up fees due: _____

Vacation Request

**Full and P.M. Contract. Two week notice required.
To be taken in five consecutive days, 10 days total per year.**

Dates of absence: _____ Starting _____ Ending _____ Date Returning to ESS _____

Withdrawal from ESS Two week notice required.

Last day of participation in ESS: _____

Parent Signature

Supervisor/Lead Asst. Signature