

Request for Flex Care Space

Parent/Guardian Information		
	Parent/Guardian 1	Parent/Guardian 2
Full Name		
Occupation		
Email		
Daytime Phone #		

Eligibility: The Flex Care Spaces Pilot project is intended to support families where parents work shift work or have changing schedules from one week to the next. Children 0 to 4 years of age will be given priority though requests for a school-age Flex Care Space will be reviewed on a case-by-case basis. To qualify, families must choose either a 3-day or a 4-day flex schedule but the days of the week can change weekly based on the parents work schedules.

Please describe your family's work situation and why you believe it meets the criteria for a Flex Care Space?

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Child(ren) / Fee Information	Child 1	Child 2	Child 3
Child's Full Name			
Child's Age			
Current Program			
Fee Type	<input type="checkbox"/> Full Fees	<input type="checkbox"/> Full Subsidy	<input type="checkbox"/> Partial Subsidy
Payment Method	<input type="checkbox"/> PAD	<input type="checkbox"/> post-dated chq	<input type="checkbox"/> Other

By signing (or typing) my full name below, I acknowledge that my participation in this Flex Care Spaces program is based on my eligibility with respect to my/our work schedules. I agree to notify RisingOaks Early Learning Ontario should my work situation change and understand that it may disqualify from the Flex Care Spaces program. RisingOaks acknowledges that once a child is approved for a Flex Care Space, it will do everything possible to continue to honour such a schedule until the child ages out of the RisingOaks' program and for so long as the family is eligible. If that is not possible, I acknowledge that RisingOaks will provide me with 45 days written notice of the end of such approval at which time I/we can determine any changes required to my/our child(ren)'s enrolment.

Tip: Use Tools>Fill & Sign to type or draw your signature

Parent/Guardian's Signature

Date

Supervisor's Signature Acknowledging Receipt

Date

PARENTS: COMPLETE THE SCHEDULE ON PAGE 2 BEFORE SUBMITTING THIS FORM.

Administration Use Only					
Uploaded to Sandbox on		Enrolment Set up?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Tag Added?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Approved by (Name, Date)		Tuition Override?	<input type="checkbox"/> Yes <input type="checkbox"/> No	JE note?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Comments:					

(2020-12) This document is available in alternate formats and/or with communication supports, upon request. This agreement may be signed in a number of counterparts and facsimile signatures are acceptable and deemed binding. We protect and respect your privacy. Your personal information is used only for the purposes stated on or indicated by the form. For complete details, see our Privacy Statement at www.risingoaks.ca or contact your centre Supervisor for a copy.

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Child's Name: _____ Centre/School: _____

Based on your work schedule(s), please complete the calendar below by highlighting in yellow the days that you do require child care each week. To access the highlighter in Adobe Reader click on Tools, Comment.

Note - PA days are noted with green numbers. Closures due to statutory or other holidays are noted in gray fill.

January						
S	M	T	W	Th	F	S
					1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30
31						

February						
S	M	T	W	Th	F	S
	1	2	3	4	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28						

March						
S	M	T	W	Th	F	S
	1	2	3	4	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30	31			

April						
S	M	T	W	Th	F	S
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	

May						
S	M	T	W	Th	F	S
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30	31					

June						
S	M	T	W	Th	F	S
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30			

July						
S	M	T	W	Th	F	S
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	31

August						
S	M	T	W	Th	F	S
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	31				

September						
S	M	T	W	Th	F	S
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30		

October						
S	M	T	W	Th	F	S
					1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30
31						

November						
S	M	T	W	Th	F	S
	1	2	3	4	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30				

December						
S	M	T	W	Th	F	S
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30	31	1

Notes about the Calendar:

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