

# ISD 191 Community Education Child Care Calendar

## Kindergarten- 5th Graders

Child's Name: \_\_\_\_\_ School \_\_\_\_\_

**Please complete a calendar & return to your child care Coordinator by September 16, 2022.**

1. Please select the care session your child will be attending each day.
2. AM & PM Care hours 7:00-9:15 & 3:45-5:30.
3. If your child/ren will be absent or leaving early, please contact the Child Care site your child attends.

**Please check the monthly schedule as indicated on your child care contract**

Consistent Schedule     
  Flexible Schedule     
  Drop In Schedule

**October 2022**

SUN	MON	TUES	WED	THUR	FRI	SAT
2	3 AM <input type="checkbox"/> PM <input type="checkbox"/> AM/PM <input type="checkbox"/>	4 AM <input type="checkbox"/> PM <input type="checkbox"/> AM/PM <input type="checkbox"/>	5 AM <input type="checkbox"/> PM <input type="checkbox"/> AM/PM <input type="checkbox"/>	6 AM <input type="checkbox"/> PM <input type="checkbox"/> AM/PM <input type="checkbox"/>	7 AM <input type="checkbox"/> PM <input type="checkbox"/> AM/PM <input type="checkbox"/>	8
9	10 AM <input type="checkbox"/> PM <input type="checkbox"/> AM/PM <input type="checkbox"/>	11 AM <input type="checkbox"/> PM <input type="checkbox"/> AM/PM <input type="checkbox"/>	12 AM <input type="checkbox"/> PM <input type="checkbox"/> AM/PM <input type="checkbox"/>	13 AM <input type="checkbox"/> PM <input type="checkbox"/> AM/PM <input type="checkbox"/>	14 AM <input type="checkbox"/> PM <input type="checkbox"/> AM/PM <input type="checkbox"/>	15
16	17 AM <input type="checkbox"/> PM <input type="checkbox"/> AM/PM <input type="checkbox"/>	18 AM <input type="checkbox"/> PM <input type="checkbox"/> AM/PM <input type="checkbox"/>	19 AM <input type="checkbox"/> PM <input type="checkbox"/> AM/PM <input type="checkbox"/>	20 FULL DAY YES <input type="checkbox"/> NO <input type="checkbox"/>	21 FULL DAY YES <input type="checkbox"/> NO <input type="checkbox"/>	22
23	24 AM <input type="checkbox"/> PM <input type="checkbox"/> AM/PM <input type="checkbox"/>	25 AM <input type="checkbox"/> PM <input type="checkbox"/> AM/PM <input type="checkbox"/>	26 AM <input type="checkbox"/> PM <input type="checkbox"/> AM/PM <input type="checkbox"/>	27 AM <input type="checkbox"/> PM <input type="checkbox"/> AM/PM <input type="checkbox"/>	28 AM <input type="checkbox"/> PM <input type="checkbox"/> AM/PM <input type="checkbox"/>	29
30	31 AM <input type="checkbox"/> PM <input type="checkbox"/> AM/PM <input type="checkbox"/>					

Please write your name and number below so we can reach you between 7:00-5:30.

X \_\_\_\_\_ PHONE \_\_\_\_\_