

I (account holder/insert name).....of (insert address)  
 .....wish to give two weeks notice to  
 Stepping Stone (insert centre)..... that my child/ren (insert child/ren names)

.....  
 .....  
 will finish care on: Day .....the.....of.....2017

**Reason for leaving care:** (Please circle)

Child is starting school      Child is starting Kindergarten      Other:.....

I understand that I am responsible for the payment of all fees up to and including the date indicated above (less any Bond refund) and for the signing of the daily sign in / out records for each child to assist with claiming Child Care Benefit.

**NB: Please ensure that all direct deposits are cancelled.**

Please can you transfer any remaining credit to the following bank account **(This needs to be in the name of the Account Holder responsible for payment of fees).**

If no bank account details are provided a cheque will be sent to your nominated address.

Name of Bank: \_\_\_\_\_  
 Name of Branch: \_\_\_\_\_  
 Account Holders Name: \_\_\_\_\_  
 BSB: \_\_\_\_\_  
 Account Number: \_\_\_\_\_

I understand that I am responsible for providing the correct bank account details and in the event that the bank account details are incorrect or the cheque is lost, the cost to resubmit / reissue this refund will be deducted from the credit amount.

Account Holders Name: .....Signature: .....Date: ...../...../.....

*This form is an official notification by the parent or guardian that the child/ren indicated will no longer require care at Stepping Stone (SA) Childcare & Early Development Centre and acknowledges an understanding for the payment that is required.*

**Parent Reflection and Feedback**

We would appreciate it if you could provide us with feedback about your time at our Centre to assist us with our 'Continuous Improvement' journey.

What did you enjoy about your time at the Centre?

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

What suggestions do you have that would improve the care and education offered by the Centre?

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Other comments

\_\_\_\_\_  
 \_\_\_\_\_

**Thank you for taking the time to complete this form and using our Centre.**

**Office use only:**

Received by:..... Spike comment entered and scanned to H/O      Date: ...../...../.....  
 Account Holder Signature Verified by:.....