



Provider Transfer Form

Early Learning Provider:

Submission of this form is required when School Readiness clients request a provider transfer. ALL School Readiness terminations initiated by the provider must be completed by the provider within the provider portal.

Early Learning Provider Name: _____ Phone Number _____

Early Learning Provider Signature: _____

Parent/Guardian Name: _____

Child/Children: _____

Last day of the child/children's attendance: _____

Rule 6M-4.400 states: The provider shall provide written notice of the copayment due date. The parent copayment shall be collected within 10 days of the provider's payment due date. A parent may not transfer his or her child to another School Readiness Program until the parent has fulfilled the copayment obligation related to the School Readiness Program.

Notice of Authorization to Transfer School Readiness Services (check one):

- ☐ The parent/caregiver/guardian above has paid all School Readiness copayments due. (**Attach accounting records and a copy of co-payment receipt records for current period of School Readiness services**). **OR**
- ☐ The parent/caregiver/guardian **of an at-risk child** has established a repayment plan for the outstanding copayment obligation.
- ☐ The parent/caregiver/guardian above has failed to satisfactorily fulfill the required copayment obligation.

ELC Assessed Copayment Amount Due \$ _____

Providers may establish additional fees agreed upon by the School Readiness client. Additional fees owed by the client to the provider should not be included in the ELC Assessed Copayment Amount Due.

Comments: _____

