



## School Readiness Provider Transfer Request

Prior to transferring child care to a new provider, the parent/caregiver must provide documentation to the School Readiness (SR) Program.

A parent may not transfer school readiness program services to another school readiness program provider until the parent has submitted documentation from the current school readiness program provider stating that the parent has satisfactorily fulfilled the copayment obligation.

The Parent/Guardian may send the completed form to the Provider Transfers Department by email at [srtransfers@elcbroward.org](mailto:srtransfers@elcbroward.org) or bring the completed form for processing to the SR office listed below. **PLEASE ALLOW UP TO 5 BUSINESS DAYS TO PROCESS.**

Is the School Readiness Provider Transfer Request from another County to Broward County?	(CIRCLE ONE)	YES	NO
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To Be Completed By Parent/Guardian			
Parent/Guardian Name	Email Address	Telephone Number	
Address	City	Zip	
Child(ren)'s Name(s) to be Transferred			Date of Birth

To Be Completed By Current Child Care Provider			
Name of Child Care Facility		Telephone Number	
Address	City	Zip	
Email Address	Fax Number	Child's Last Date of Attendance	
<p>The provider is responsible for collecting the parent co-payment from the parents. The parent co-payment shall be collected within 10 calendar days of the provider's payment due date. The provider shall provide written notice of the co-payment due date. (Rule 6M-4.400, F.A.C.)</p> <p><b>I attest that the parent has satisfactorily fulfilled the co-payment obligation.</b></p>			
Signature of Child Care Program Director or Designee _____			Date _____

To Be Completed By Parent/Guardian			
Name of New Child Care Facility		Telephone Number	
Address	City	Zip	
Email Address	Fax Number	Requested Date of Transfer	

I have requested my child/ren to be transferred to the provider listed on this form. I understand that parent fees must be paid in full with my current provider in order to transfer. Failure to fulfill copayment obligation may result in termination of School Readiness funding.

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_