



Newton Family Day Care

Approved Service ABN: 54601033756

Service Approval ID: SE-40004907

CCS Approval ID: 190007148B

Email: newtonfdc@gmail.com

Educator Service Closure Form

This form is to be returned to the office when an Educator wishes to close his/her service. 2 weeks' notice must be given to Newton Family Day Care service and to the parents/families in your service.

Educator Name: _____

Address: _____

Reason for Closure: _____

Have you filled out a Child Termination Form?

YES / NO

Last day of care provided is: ____/____/____

Educator Signature: _____ Date: ____/____/____

OFFICE USE ONLY

Staff Name: _____

Staff Signature: _____ Date: ____/____/____