

# YEP STUDENT STATUS CHANGE FORM

*YEP*

## Youth Enrichment Program

Today's Date: \_\_\_\_\_

Parent's Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Student's Name: \_\_\_\_\_

School of Attendance: \_\_\_\_\_

What is the change: (goes into effect the following month if it's after the 1<sup>st</sup> of current month.)

Full-time/Part-time \_\_\_\_\_ Part-time/Full-time \_\_\_\_\_  
From School \_\_\_\_\_ To School \_\_\_\_\_

Effective Change Date: \_\_\_\_\_

\_\_\_\_\_

*YEP*

### Youth Enrichment Program

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