



**WRITTEN NOTICE - 30 DAY POLICY**

**Creative Frontiers School, Inc.**

6446 Sylvan Road Citrus Heights, CA 95610  
(916) 723-2500 (fax) 723-8849 (e-mail) [adams340@aol.com](mailto:adams340@aol.com)

This letter is to serve as the minimum thirty (30) day notice for my child, \_\_\_\_\_

as their last day of attendance at Creative Frontiers School will be \_\_\_\_\_ / \_\_\_\_\_ / 20 \_\_\_\_\_  
MONTH DAY YEAR

The reason(s) we are leaving Creative Frontiers is:

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I understand our tuition agreement has at least the 30-day notice provision and if my child is in the elementary, that there are additional contract considerations during the regular school year (September thru mid-June) that are in my tuition contract and that I have been informed about.

Will your child be returning in the fall? (Please circle) YES NO

Parent or Guardian's Signature: \_\_\_\_\_ date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

For office use only: Date Received: \_\_\_\_\_ / \_\_\_\_\_ / 20 \_\_\_\_\_ Received by: \_\_\_\_\_  
MONTH DAY YEAR ADMINISTRATOR'S NAME

Additional comments and/or considerations: