

Child's Name
Date of Birth



**Transition Letter**

Dear Parent/Guardian(s)

It's time for your child to transition to the next classroom in the program! Your transition begins with this letter. The next step is for your child's teachers to meet with you to complete an *Individualized Transition Plan*. The transition plan is very important, as it will help us to determine strategies that will help your child to ease from their previous classroom to the new classroom.

Each child is unique, and we will be allowing for \_\_\_\_ weeks for this transition to take place. Each day your child will visit the new classroom to become familiar with the new routines, atmosphere, and teacher. Each day, your child will spend a little more time in the new classroom. On the projected transition date, your child will then be a permanent student in the new classroom, and you will pick up and drop off at that classroom.

Please sign and date below to indicate that you understand the transition process is beginning, and make a time to meet with your teacher to discuss the transition plan and strategies for a successful transition.

Thank You!

Current Classroom	New Classroom
Current Teachers	New Teachers
Current Date	Projected Transition Date
Teacher Signature	Teacher Signature
Parent/Guardian Signature	

Director Signature
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