



351 Wagoner Drive, Suite 200  
 Fayetteville, NC 28303  
 P 910-867-9700 / F 910-867-7772  
 ccpfc.org

OF CUMBERLAND COUNTY

**2021-2022 NC Pre-K Allocation Adjustment Request Form**

**SITE INFORMATION**

<b>Name of Site:</b> _____	<b>Date of Request:</b> _____
<b>Site Administrator's Name:</b> _____	<b>Contact Number:</b> _____

**SLOTS INFORMATION**

Number of slots currently allocated: \_\_\_\_\_ in (how many) \_\_\_\_\_ classrooms?  
 Is the site requesting to:  Increase number of slots  Decrease number of slots

**ADDITIONAL SLOTS REQUEST**

Number of additional slots requesting: \_\_\_\_\_  
 Do additional slots require your site to open a new classroom?  Yes  No  
 If yes, do you have qualified teacher in the new classroom?  Yes  No  Other: \_\_\_\_\_  
 Name of lead teacher: \_\_\_\_\_ Degree: \_\_\_\_\_ License: \_\_\_\_\_

**REDUCTION OF SLOTS REQUEST**

Number of reduction of slots: \_\_\_\_\_  
 Reason for reduction: \_\_\_\_\_

**SIGNATURE**

**Site Administrator's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**PFC STAFF ONLY**

Type of Program:  Private  CCS  HS      Current slot allocation: \_\_\_\_\_ New allocation: \_\_\_\_\_

Recommendation:

<input type="checkbox"/> Approved <input type="checkbox"/> Denied	_____	_____	_____
	<i>Signature</i>	<i>Position</i>	<i>Date</i>
<input type="checkbox"/> Approved <input type="checkbox"/> Denied	_____	_____	_____
	<i>Signature</i>	<i>Position</i>	<i>Date</i>
<input type="checkbox"/> Approved <input type="checkbox"/> Denied	_____	_____	_____
	<i>Signature</i>	<i>Position</i>	<i>Date</i>

PFC is a 501(c)(3) non-profit organization supported by public and private funds through Smart Start, NC Pre-K, tax-deductible donations, and grants.



**Be the Driving Force.**