

OUT-OF-SCHOOL RECREATION PROGRAM

727 Fairview Dr. Suite E
Carson City, NV 89701
(775) 684-4463

3811 W. Charleston Blvd #210
Las Vegas, NV 89102
(702) 486-3822

1010 Ruby Vista Dr. Suite 101
Elko, NV 89801
(775) 753-1237

REQUEST FOR CHANGE OF INFORMATION ON CURRENT PERMIT

(Complete Section 1. Complete all areas in Section 2 applicable to requested change. Complete Section 3 if you are increasing or reducing the number of sites being permitted).

SECTION 1 (Current Information)

Date _____

Name of Program _____ Program Permit #: _____

Name of Local Government Representative _____

SECTION 2 (Demographic changes)

Requested effective date of change _____

Change in Program Name _____

Change in name of local government contact person _____

Change in physical address/phone number/email _____

Change in mailing address _____

Other change not listed above _____

SECTION 3 (Addition/Reduction of Program Sites)

Reduction in Number of Program Sites

How many sites are you removing from the permit? _____

Please list the names of the programs you are requesting to be removed from the permit:

Addition to Number of Program Sites

To add more Program Sites to your permit please also complete the [Out-of-School Recreation Program Application](#) and check the box Increase in number of sites operated found at the top of the form. Submit both forms to Child Care Licensing for review.

**ALL CHANGES WILL BECOME EFFECTIVE ON THE FIRST DAY OF THE MONTH
PLEASE ALLOW 30 DAYS FOR PERMIT TO BE PROCESSED PRIOR TO CHANGE**

Signature of Local Government Representative _____ Date: _____

DATE RECEIVED BY LICENSING: _____ APPROVED _____ DENIED _____

DATE REVISED PERMIT ISSUED: _____ REASON: _____