

ENROLLMENT/ATTENDANCE CERTIFICATION SCHOOL READINESS

Return To:



Early Learning Coalition
of Escambia County
3300 N. Pace Blvd, Suite 210
Pensacola, FL 32505

August 2019

NAME	CHILD ID	PARENT FEE	FUNDING SOURCE	AGE LEVEL	UNIT OF CARE	T	F	S	S	M	T	W	T	F	S	S	M	T	W	T	F	S	S	M	T	W	T	F	S	S	M	T	W	T	F	S	DAYS	REDETERM DATE							
						1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	ATTND								

FOR EACH DAY, CODE AS FOLLOWS:

- X = Enrolled/Present
- A = Authorized Absence beyond 3 days
- T = Terminated

- E = Excused Absence
- H = Reimbursable Holiday
- N = Enrolled, Non-Reimbursable

Period From: 08/01/2019 **To:** 08/31/2019 **Page:** **of:**
 I understand that it is my responsibility to collect all assessed Parent fees.
Authorized Signature: