


**ENROLLMENT/ATTENDANCE CERTIFICATION
SCHOOL READINESS**

March 2018

Return To :


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

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	DAYS ATTND	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		

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: 03/01/2018 To: 03/31/2018 Page: of:

I understand that it is my responsibility to collect all assessed Parent fees.

Authorized Signature: