

**ENROLLMENT/ATTENDANCE CERTIFICATION
VOLUNTARY PRE-KINDERGARTEN**

Return To



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

June 2018

NAME	CHILD ID	PARENT FEE	FUNDING SOURCE	AGE LEVEL	UNIT OF CARE	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 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	25	26	27	28	29	30															

FOR EACH DAY, CODE AS FOLLOWS :

- X = Enrolled/Present
- T = Terminated
- C = Temporary closure beyond provider's control
- E = Absence day 1 - 3 (No documentation required)
- A = Absence beyond 3 days (Documentation required)

Period From: 06/01/2018 To: 06/30/2018 Page: of:

I certify the attendance on this form to be true and correct.

Authorized Signature: _____