STATE OF FLORIDA
VOLUNTARY PREKINDERGARTEN
EDUCATION PROGRAM

Child Attendance and Parental Choice Certificate

(SHORT FORM)

1. Child's first name	Middle name	Last name	Jr./III	2. Child's date of birth
3. Name of private provider or public school				4. VPK class

PARENTAL CERTIFICATION

I swear (or affirm) that my child (*whose name appears above in item 1*) attended the Voluntary Prekindergarten Education Program during the months listed below. I certify that my child's daily attendance in the program was recorded by the private provider or public school and that I or my representative signed the attendance record each day that my child attended the program. I further certify that I continue to choose the private provider or public school (*whose name appears above in item 3*) to deliver the program for my child and direct that program funds be paid to the provider or school for my child.

5. Attendance month and year	6. Print name of parent or guardian	7. Signature of parent or guardian	8. Date signed

NOTICE TO PRIVATE PROVIDER OR PUBLIC SCHOOL: A private provider or public school must keep this original signed form for at least 2 years. A private provider must allow the early learning coalition, and a public school must allow the school district, to inspect this original signed form during normal business hours. If required by the early learning coalition, a signed copy of this certificate must be forwarded to the coalition or a qualified contractor acting on behalf of the coalition.