

Once you have chosen the child care provider who will care for your child(ren), you can have <u>the provider complete</u> this form to help confirm the information we need to issue the voucher. If you will be using more than one provider, <u>use one form per provider</u>. <u>Please Print Clearly.</u>

Parent Name:

FID (if applicable):	Phone Number (or	otional):	
Child #1:	Child #2	:	
Child #3:		:	
<u>Program Type</u> : Child # 1:; Child # 2:	; Child # 3:	; Child #4:	
Please use the following Progra	am Type Abbreviations whe	en completing the section above:	
Family Child Care:	Center Based Child Care:		
NU (Under 2 w/ Independent Provider);	IN (Infant	IN (Infant); TO (Toddler); PS (Preschool); HS (Headstart);	
NO (Over 2 w/ Independent Provider);	BA (Before & A	BA (Before & After School); BS (Before School); AS (After School);	
SU (Under 2 w/ System Provider); SCO (School Closures Only		l Closures Only); SA (School Age – Summer Only)	
SO (Over 2 w/ System Provider);			
PROVIDER INFORMATION - To be What is your program/agency name, address and p		d Care Provider OR System Admin:	
(Systems: Please write the FCC providers Name, Physical Address,			
What is the expected date of enrollment for the child	d(ren)?		
(This date should only be filled out when you have officially received all required to attend your program.)	this		
Until what date will you hold a spot for the child(re (If the voucher must start after the date provided, the Child Care Resource and Otherwise, this form will serve as confirmation for the child to enroll)	, , , , , , , , , , , , , , , , , , ,	onfirm the opening.	
Please circle one (Full time = Full Day Part Time = Half Day INT = Vacation Day	Full time Part time INT		
Please circle the days care will be provided		Su Mo Tu We Th Fr Sa	
Please circle one- Is the parent requesting transportation services to be included on the voucher? (Subject to approval by the Child Resource and Referral Agency)		No One Way Two Way	
This form is NOT confirmation that a voucher will be enrolled children with a signed, current voucher. Ch			
actually attends the program following the start date	e indicated on the voucher.		
Provider/System Admin Signature	Date	Provider/System Admin Name (Printed)	
Provider Email		Provider Phone Number	

THE DEPARTMENT OF EARLY EDUCATION AND CARE SUBSIDIZED CHILD CARE ATTENDANCE NOTIFICATION AGREEMENT

Your child(ren) are receiving an EEC child care subsidy and are expected to attend the early education and care program, as agreed on your child care authorization. Your provider is responsible to make sure that your child(ren) attends based on the agreed schedule.

EEC defines **Excessive Absences** as more than 45 non-attended days, including any unexplained absences, within a 12 month Authorization period, or more than 15 non-attended days during an initial 12-week Provisional Authorization period. Parent(s) will have to pay for all non-attended days over the 45 day limit during a 12 month authorization or all non-attended days over the 15 day limit during a 12-week Provisional Authorization.

To help avoid having to pay for Excessive Absences you must:

- 1. Make sure that your child(ren) attend(s) the early education and care program;
- 2. Notify your Subsidy Administrator of any changes in your child(ren)'s schedule of care (i.e. after school programs, sports, custody arrangements) which will result in your child(ren) not needing child care on a particular day or days of the week;
- 3. Provide at least 2 weeks advance written notice if you plan to remove your child(ren) from the child care program; and
- 4. Request an Approved Break in Care for absences that are going to be longer than 2 weeks.

You will receive notices from your Subsidy Administrator after your child(ren) have reached 30 absences and 40 absences. If you have a 12-week Provisional Authorization, you will be notified after your child(ren) have reached 10 absences. The purpose of these notices are to inform you when your child(ren) are approaching the Excessive Absence limit so that you can be aware of the impact of future absences.

After your child(ren) have reached their 45th absence, or the 15th absence during a 12-week Provisional

Authorization period, you will be notified that your child(ren) have reached the Excessive Absence limit and that you are now responsible for the payment of all additional absences during the authorization period at the full rate that

EEC pays for your child care. You will be asked to sign the Excessive Absence Warning Notice form confirming that you are willing to remain in care and will be responsible for the payment of all absences during the remainder of the authorization period. Please note that failure to sign the form will not excuse you from paying for additional non-attended days. Failure to pay for additional absences may result in the termination of your subsidized child care.

EEC defines Excessive Unexplained Absences as failure to attend a subsidized child care program for more than three consecutive Days without contacting the provider. The first time your child is absent more than 3 days in a row during a 12 month Authorization, your provider or the Subsidy Administrator will issue you an Excessive Unexplained Absence Warning Notice that any additional instances of Excessive Unexplained Absences may result in the termination of child care. To avoid having unexplained absences, you must make sure to contact your provider every day that your child(ren) will not attend.

My signature below indicates that I understand the information in this document and agree to comply with the requirements above.		
Printed Name of Parent	Date	
Signature of Parent	· · · · · · · · · · · · · · · · · · ·	