2008/2009 VPK PROVIDER (XXXXX0010 000)
6850 BELFORT OAKS PLACE SUITE 102
JACKSONVILLE, FL 32216
(904)208-2044
Funding Contract : VPK

ENROLLMENT/ATTENDANCE CERTIFICATION
VOLUNTARY PRE-KINDERGARTEN

LICENSED CENTER, NON-SUBC

August 2008

Return To :
EARLY LEARNING COALITION OF DUVAL
6850 BELFORT OAKS PL. #102
JACKSONVILLE, FL 32216
Phone: (904)208-2044

NAME	CHILD ID	PARENT FEE	AGE LEVEL	UNIT OF CARE	F 1	S 2	S 3	M 4	T 5	W 6	T 7	F 8	S 9	S 10	M 11	T 12	W 13	T 14	F 15	S 16	S 17	M 18	T 19	W 20	T 21	F 22	S 23	S 24	M 25	T 26	W 27	T 28	F 29	S 30	S 31	DAYS ATTND	REDETERM DATE
OSBORNE, KATHY	**XXX-XX-5555**	**0.00**	**PR4**	**HR**																																	**06/05/2009**
WINGATE, MATTHEW	**XXX-XX-9293**	**0.00**	**PR4**	**HR**																																	**06/05/2009**

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: 08/01/2008 **To:** 08/31/2008 **Page:** 1 **of:** 1

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

Authorized Signature: