STATE OF FLORIDA
VOLUNTARY PREKINDERGARTEN EDUCATION PROGRAM

Student Attendance and Parental Choice Certificate

(SHORT FORM)

1. Student's last name	First name	Middle name	2. Student's date of birth
3. Name of provider or 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 provider or 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 provider or 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 PROVIDER OR SCHOOL: The private prekindergarten provider or public school must keep each original signed form for at least 2 years. Each private prekindergarten provider must permit the early learning coalition, and each public school must permit the school district, to inspect the original signed forms during normal business hours. If required by the early learning coalition, a signed copy of this certificate must be forwarded to the coalition or its designee.

Form
AWI-VPK 03S
(09/21/2005)