

School Attendance Verification Form

If you have a child in Grades 1–12, you may be eligible for child care assistance. Complete section A of this form and have your child's school complete section B.

A. Parent Section

Name of Child _____ Date of Birth _____

Name of Parent / Guardian _____

Address _____

Date you began to receive or plan to begin receiving assistance from Child Care Services _____

I hereby give my permission to release the information requested on this form to Workforce Solutions for the Heart of Texas Child Care Services.

Parent Signature

Date

B. School Personnel Section

To school personnel: This household is receiving assistance through Child Care Services. In order to receive this assistance, Texas Workforce Commission rules require that the household provide proof of school attendance.

Did this child attend school regularly, meeting school attendance requirements, between the date indicated above as the assistance start date and today's date? ☐ Yes ☐ No

Comments (optional) _____

Name of School _____

Name and Title of Person Providing Information _____

Telephone Number _____

Signature of Person Providing Information

Date