

Daycare Enrollment Verification Form

Child Information

- Full Name: _____
- Date of Birth: _____
- Parent/Guardian Name: _____
- Parent/Guardian Contact: _____

Daycare Details

Daycare Name	Address	Enrollment Type	Enrollment Start Date

Verification Purpose

- Reason for Request: Tax Housing Work Benefits Other:

Acknowledgment

I affirm the information provided is accurate and complete.

Signature of Parent/Guardian: _____

Date: _____