

July 2019

CHILD NAME: _____

PARENT NAME: _____

PROVIDER NAME: _____

DATE	DAY	PARENT SIGNATURE	TIME IN	AM/PM	STAFF INITIAL	PARENT SIGNATURE	TIME OUT	AM/PM	STAFF INITIAL
		FIRST & LAST NAME				FIRST & LAST NAME			
7/1/2019	MON								
7/2/2019	TUE								
7/3/2019	WED								
7/4/2019	THU								
7/5/2019	FRI								
7/8/2019	MON								
7/9/2019	TUE								
7/10/2019	WED								
7/11/2019	THU								
7/12/2019	FRI								
7/15/2019	MON								
7/16/2019	TUE								
7/17/2019	WED								
7/18/2019	THU								
7/19/2019	FRI								
7/22/2019	MON								
7/23/2019	TUE								
7/24/2019	WED								
7/25/2019	THU								
7/26/2019	FRI								
7/29/2019	MON								
7/30/2019	TUE								
7/31/2019	WED								

If it is discovered that this information is false, you may be prosecuted for fraud. It is against the law to receive child care or be reimbursed by submitting false information. Please check that days, time in/out & signatures reported, match the attendance verification forms.

I verify that the information on this sign in/out sheet is correct.

Parent(s) Signature and Date

Provider(s) Signature and Date

August 2019

CHILD NAME: _____

PARENT NAME: _____

PROVIDER NAME: _____

DATE	DAY	PARENT SIGNATURE	TIME IN	AM/PM	STAFF INITIAL	PARENT SIGNATURE	TIME OUT	AM/PM	STAFF INITIAL
		FIRST & LAST NAME				FIRST & LAST NAME			
8/1/2019	THU								
8/2/2019	FRI								
8/5/2019	MON								
8/6/2019	TUE								
8/7/2019	WED								
8/8/2019	THU								
8/9/2019	FRI								
8/12/2019	MON								
8/13/2019	TUE								
8/14/2019	WED								
8/15/2019	THU								
8/16/2019	FRI								
8/19/2019	MON								
8/20/2019	TUE								
8/21/2019	WED								
8/22/2019	THU								
8/23/2019	FRI								
8/26/2019	MON								
8/27/2019	TUE								
8/28/2019	WED								
8/29/2019	THU								
8/30/2019	FRI								

If it is discovered that this information is false, you may be prosecuted for fraud. It is against the law to receive child care or be reimbursed by submitting false information. Please check that days, time in/out & signatures reported, match the attendance verification forms.

I verify that the information on this sign in/out sheet is correct.

Parent(s) Signature and Date

Provider(s) Signature and Date

September 2019

CHILD NAME: _____

PARENT NAME: _____

PROVIDER NAME: _____

DATE	DAY	PARENT SIGNATURE	TIME IN	AM/PM	STAFF INITIAL	PARENT SIGNATURE	TIME OUT	AM/PM	STAFF INITIAL
		FIRST & LAST NAME				FIRST & LAST NAME			
9/2/2019	MON								
9/3/2019	TUE								
9/4/2019	WED								
9/5/2019	THU								
9/6/2019	FRI								
9/9/2019	MON								
9/10/2019	TUE								
9/11/2019	WED								
9/12/2019	THU								
9/13/2019	FRI								
9/16/2019	MON								
9/17/2019	TUE								
9/18/2019	WED								
9/19/2019	THU								
9/20/2019	FRI								
9/23/2019	MON								
9/24/2019	TUE								
9/25/2019	WED								
9/26/2019	THU								
9/27/2019	FRI								
9/30/2019	MON								

If it is discovered that this information is false, you may be prosecuted for fraud. It is against the law to receive child care or be reimbursed by submitting false information. Please check that days, time in/out & signatures reported, match the attendance verification forms.

I verify that the information on this sign in/out sheet is correct.

Parent(s) Signature and Date

Provider(s) Signature and Date

October 2019

CHILD NAME: _____

PARENT NAME: _____

PROVIDER NAME: _____

DATE	DAY	PARENT SIGNATURE	TIME IN	AM/PM	STAFF INITIAL	PARENT SIGNATURE	TIME OUT	AM/PM	STAFF INITIAL
		FIRST & LAST NAME				FIRST & LAST NAME			
10/1/2019	TUE								
10/2/2019	WED								
10/3/2019	THU								
10/4/2019	FRI								
10/7/2019	MON								
10/8/2019	TUE								
10/9/2019	WED								
10/10/2019	THU								
10/11/2019	FRI								
10/14/2019	MON								
10/15/2019	TUE								
10/16/2019	WED								
10/17/2019	THU								
10/18/2019	FRI								
10/21/2018	MON								
10/22/2018	TUE								
10/23/2018	WED								
10/24/2018	THU								
10/25/2018	FRI								
10/28/2018	MON								
10/29/2018	TUE								
10/30/2018	WED								
10/31/2018	THU								

If it is discovered that this information is false, you may be prosecuted for fraud. It is against the law to receive child care or be reimbursed by submitting false information. Please check that days, time in/out & signatures reported, match the attendance verification forms.

I verify that the information on this sign in/out sheet is correct.

Parent(s) Signature and Date

Provider(s) Signature and Date

November 2019

CHILD NAME: _____

PARENT NAME: _____

PROVIDER NAME: _____

DATE	DAY	PARENT SIGNATURE	TIME IN	AM/PM	STAFF INITIAL	PARENT SIGNATURE	TIME OUT	AM/PM	STAFF INITIAL
		FIRST & LAST NAME				FIRST & LAST NAME			
11/1/2019	FRI								
11/3/2019	MON								
11/5/2019	TUE								
11/6/2019	WED								
11/7/2019	THU								
11/8/2019	FRI								
11/11/2019	MON								
11/12/2019	TUE								
11/13/2019	WED								
11/14/2019	THU								
11/15/2019	FRI								
11/18/2019	MON								
11/19/2019	TUE								
11/20/2019	WED								
11/21/2019	THU								
11/22/2019	FRI								
11/25/2019	MON								
11/26/2019	TUE								
11/27/2019	WED								
11/28/2019	THU								
11/29/2019	FRI								

If it is discovered that this information is false, you may be prosecuted for fraud. It is against the law to receive child care or be reimbursed by submitting false information. Please check that days, time in/out & signatures reported, match the attendance verification forms.

I verify that the information on this sign in/out sheet is correct.

Parent(s) Signature and Date

Provider(s) Signature and Date

December 2019

CHILD NAME: _____

PARENT NAME: _____

PROVIDER NAME: _____

DATE	DAY	PARENT SIGNATURE	TIME IN	AM/PM	STAFF INITIAL	PARENT SIGNATURE	TIME OUT	AM/PM	STAFF INITIAL
		FIRST & LAST NAME				FIRST & LAST NAME			
12/2/2019	MON								
12/3/2019	TUE								
12/4/2019	WED								
12/5/2019	THU								
12/6/2019	FRI								
12/9/2019	MON								
12/10/2019	TUE								
12/11/2019	WED								
12/12/2019	THU								
12/13/2019	FRI								
12/16/2019	MON								
12/17/2019	TUE								
12/18/2019	WED								
12/19/2019	THU								
12/20/2019	FRI								
12/23/2019	MON								
12/24/2019	TUE								
12/25/2019	WED								
12/26/2019	THU								
12/27/2019	FRI								
12/30/2019	MON								
12/31/2018	TUE								

If it is discovered that this information is false, you may be prosecuted for fraud. It is against the law to receive child care or be reimbursed by submitting false information. Please check that days, time in/out & signatures reported, match the attendance verification forms.

I verify that the information on this sign in/out sheet is correct.

Parent(s) Signature and Date

Provider(s) Signature and Date

January 2020

CHILD NAME: _____

PARENT NAME: _____

PROVIDER NAME: _____

DATE	DAY	PARENT SIGNATURE	TIME IN	AM/PM	STAFF INITIAL	PARENT SIGNATURE	TIME OUT	AM/PM	STAFF INITIAL
		FIRST & LAST NAME				FIRST & LAST NAME			
1/1/2020	WED								
1/2/2020	THU								
1/3/2020	FRI								
1/6/2020	MON								
1/7/2020	TUE								
1/8/2019	WED								
1/9/2020	THU								
1/10/2020	FRI								
1/13/2020	MON								
1/14/2020	TUE								
1/15/2020	WED								
1/16/2020	THU								
1/17/2020	FRI								
1/20/2020	MON								
1/21/2020	TUE								
1/22/2020	WED								
1/23/2020	THU								
1/24/2019	FRI								
1/27/2020	MON								
1/28/2020	TUE								
1/29/2020	WED								
1/30/2020	THU								
1/31/2020	FRI								

If it is discovered that this information is false, you may be prosecuted for fraud. It is against the law to receive child care or be reimbursed by submitting false information. Please check that days, time in/out & signatures reported, match the attendance verification forms.

I verify that the information on this sign in/out sheet is correct.

Parent(s) Signature and Date

Provider(s) Signature and Date

February 2020

CHILD NAME: _____

PARENT NAME: _____

PROVIDER NAME: _____

DATE	DAY	PARENT SIGNATURE	TIME IN	AM/PM	STAFF INITIAL	PARENT SIGNATURE	TIME OUT	AM/PM	STAFF INITIAL
		FIRST & LAST NAME				FIRST & LAST NAME			
2/3/2020	MON								
2/4/2020	TUE								
2/5/2020	WED								
2/6/2020	THU								
2/7/2020	FRI								
2/8/2020	MON								
2/11/2020	TUE								
2/12/2020	WED								
2/13/2020	THU								
2/14/2020	FRI								
2/17/2020	MON								
2/18/2020	TUE								
2/19/2020	WED								
2/20/2020	THU								
2/21/2020	FRI								
2/24/2020	MON								
2/25/2020	TUE								
2/26/2020	WED								
2/27/2020	THU								
2/28/2020	FRI								

If it is discovered that this information is false, you may be prosecuted for fraud. It is against the law to receive child care or be reimbursed by submitting false information. Please check that days, time in/out & signatures reported, match the attendance verification forms.

I verify that the information on this sign in/out sheet is correct.

Parent(s) Signature and Date

Provider(s) Signature and Date

March 2020

CHILD NAME: _____

PARENT NAME: _____

PROVIDER NAME: _____

DATE	DAY	PARENT SIGNATURE	TIME IN	AM/PM	STAFF INITIAL	PARENT SIGNATURE	TIME OUT	AM/PM	STAFF INITIAL
		FIRST & LAST NAME				FIRST & LAST NAME			
3/2/2020	MON								
3/3/2020	TUE								
3/4/2020	WED								
3/5/2020	THU								
3/6/2020	FRI								
3/9/2020	MON								
3/10/2020	TUE								
3/11/2020	WED								
3/12/2020	THU								
3/13/2020	FRI								
3/16/2020	MON								
3/17/2020	TUE								
3/18/2020	WED								
3/19/2020	THU								
3/20/2020	FRI								
3/23/2020	MON								
3/24/2020	TUE								
3/25/2020	WED								
3/26/2020	THU								
3/27/2020	FRI								
3/30/2020	MON								
3/31/2020	TUE								

If it is discovered that this information is false, you may be prosecuted for fraud. It is against the law to receive child care or be reimbursed by submitting false information. Please check that days, time in/out & signatures reported, match the attendance verification forms.

I verify that the information on this sign in/out sheet is correct.

Parent(s) Signature and Date

Provider(s) Signature and Date

April 2020

CHILD NAME: _____

PARENT NAME: _____

PROVIDER NAME: _____

DATE	DAY	PARENT SIGNATURE	TIME IN	AM/PM	STAFF INITIAL	PARENT SIGNATURE	TIME OUT	AM/PM	STAFF INITIAL
		FIRST & LAST NAME				FIRST & LAST NAME			
4/1/2020	WED								
4/2/2020	THU								
4/3/2020	FRI								
4/6/2020	MON								
4/7/2020	TUE								
4/8/2020	WED								
4/9/2020	THU								
4/10/2020	FRI								
4/13/2020	MON								
4/14/2020	TUE								
4/15/2020	WED								
4/16/2020	THU								
4/17/2020	FRI								
4/20/2020	MON								
4/21/2020	TUE								
4/22/2020	WED								
4/23/2020	THU								
4/27/2020	FRI								
4/28/2020	MON								
4/29/2020	TUE								
4/29/2020	WED								
4/30/2020	THU								

If it is discovered that this information is false, you may be prosecuted for fraud. It is against the law to receive child care or be reimbursed by submitting false information. Please check that days, time in/out & signatures reported, match the attendance verification forms.

I verify that the information on this sign in/out sheet is correct.

Parent(s) Signature and Date

Provider(s) Signature and Date

May 2020

CHILD NAME: _____

PARENT NAME: _____

PROVIDER NAME: _____

DATE	DAY	PARENT SIGNATURE	TIME IN	AM/PM	STAFF INITIAL	PARENT SIGNATURE	TIME OUT	AM/PM	STAFF INITIAL
		FIRST & LAST NAME				FIRST & LAST NAME			
5/1/2020	FRI								
5/4/2020	MON								
5/5/2020	TUE								
5/6/2020	WED								
5/7/2020	THU								
5/8/2020	FRI								
5/11/2020	MON								
5/12/2020	TUE								
5/13/2020	WED								
5/14/2020	THU								
5/15/2020	FRI								
5/18/2020	MON								
5/19/2020	TUE								
5/20/2020	WED								
5/21/2020	THU								
5/22/2020	FRI								
5/25/2020	MON								
5/26/2020	TUE								
5/27/2020	WED								
5/28/2020	THU								
5/29/2020	FRI								

If it is discovered that this information is false, you may be prosecuted for fraud. It is against the law to receive child care or be reimbursed by submitting false information. Please check that days, time in/out & signatures reported, match the attendance verification forms.

I verify that the information on this sign in/out sheet is correct.

Parent(s) Signature and Date

Provider(s) Signature and Date

June 2020

CHILD NAME: _____

PARENT NAME: _____

PROVIDER NAME: _____

DATE	DAY	PARENT SIGNATURE	TIME IN	AM/PM	STAFF INITIAL	PARENT SIGNATURE	TIME OUT	AM/PM	STAFF INITIAL
		FIRST & LAST NAME				FIRST & LAST NAME			
6/1/2020	MON								
6/2/2020	TUE								
6/3/2020	WED								
6/4/2020	THU								
6/5/2020	FRI								
6/8/2020	MON								
6/9/2020	TUE								
6/10/2020	WED								
6/11/2020	THU								
6/12/2020	FRI								
6/15/2020	MON								
6/16/2020	TUE								
6/17/2020	WED								
6/18/2020	THU								
6/19/2020	FRI								
6/22/2020	MON								
6/23/2020	TUE								
6/24/2020	WED								
6/25/2020	THU								
6/26/2020	FRI								
6/29/2020	MON								
6/30/2020	TUE								

If it is discovered that this information is false, you may be prosecuted for fraud. It is against the law to receive child care or be reimbursed by submitting false information. Please check that days, time in/out & signatures reported, match the attendance verification forms.

I verify that the information on this sign in/out sheet is correct.

Parent(s) Signature and Date

Provider(s) Signature and Date