



FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

Stage 1 Attendance Sheet Checklist

To avoid payment delays, it is important that you follow Attendance Sheet guidelines and review your Attendance Sheet for accuracy before you submit for payment. Ensure the following:

- A full signature and **exact** time is indicated at the time **in** for each day of care (using same pen)
- Middle section was used only for reporting additional time in and out of care within the same day such as when child attended school; exact time is recorded with provider initials.
- A full signature and **exact** time is indicated at the time **out** for each day of care (using same pen)
- Any Family Fees owed by and collected from the parent are recorded at the bottom of Attendance Sheet
- Any child absences or variations of approved schedule are explained in the comments column.
- Bottom of Attendance Sheet has a full signature and date from client and provider; all signatures are consistent throughout the attendance sheet



YMCA CHILDCARE RESOURCE SERVICE

Stage 1

112233

Provider Name:	SMITH, JANE	Month/Year:	January 2014
Child Name:	JEREMY A. BROWN	Child DOB:	12/15/2007
Parent Name:	MARIE L. BROWN	Case Manager:	Alma Vargas



Example of a child in care **full day**: parent signs.

Day	Time In (AM/PM)	Full Signature	Time Out (AM/PM)	Initials	Time In (AM/PM)	Initials	Full Signature	Time Out (AM/PM)	Comments
1	8:02 AM	Marie Brown					Marie Brown	5:04 PM	
2	7:59 AM	Marie Brown					Marie Brown	5:01 PM	
3	8:01 AM	Marie Brown					Marie Brown	4:58 PM	
4									
5	7:57 AM	Marie Brown	9:02 AM	JS	2:31 PM	JS	Marie Brown	4:57 PM	
6	7:59 AM	Marie Brown	9:01 AM	JS	2:32 PM	JS	Marie Brown	5:03 PM	
7	2:30 PM	JANE SMITH					Marie Brown	5:01 PM	
8	2:32 PM	JANE SMITH					Marie Brown	4:58 PM	
9	8:00 AM	Marie Brown					JANE SMITH	8:57 AM	
10	8:02 AM	Marie Brown					JANE SMITH	9:02 AM	
11									Mom sick day

6. Child in care **before and after school**: Provider initials middle column when child goes to and from school.

Example of a child in care **after school only**: Provider signs at school pick up (first entry), parent signs out in evening.

5. Example of a child in care for **morning only**: Parent signs in morning, provider signs at school

4. Example of a comment explaining child **absence**.

Recording family fee paid.

31		FAMILY FEE CERTIFICATION & RECEIPT/ATTENDANCE CERTIFICATION	
Part Time Daily Fee: \$2.00		Full Time Daily Fee: \$4.00	
<input checked="" type="checkbox"/> All Family Fees have been paid AND/OR a payment plan is in place between parent and provider. Amount Collected: \$ <u>52.00</u>		<input type="checkbox"/> Family Fees HAVE NOT been paid AND I DO NOT have a payment plan with this parent. Outstanding Balance Due: \$	
Parent Self-Certification I declare under penalty of perjury that the information herein is true and correct and that I am not receiving any other child care subsidy. I understand these child care hours are to be used only during pre-approved activities that entitle me to receive subsidized child care services. I understand any applicable family fees that I am required to pay, as stated above, have been paid in full.		Provider Self-Certification I declare under penalty of perjury that the information herein is true and correct and this child care was provided for the sole purpose for which this child was certified. I am not receiving child care payment for the child care services provided from any other source. I understand and acknowledge that any family fees the parent may be required to pay, as stated above, have been paid in full.	
Parent/Guardian Signature	Date:	Provider Signature	Date:
Marie Brown	1/31/14	JANE SMITH	1/31/14

7. Full signatures at end of month.