

Child's Name: _____ Date: _____

Parent/Guardian Name: _____

Provider: _____

Month of 60% or less attendance: _____

Reasons for Absence (Form I) – please list all: _____

Date of Contact with Family Regarding Absences: _____

If the child was ill, was the family able to visit a physician? Yes No

Is there documentation of a doctor visit/return to school note? Yes No

Can the Preschool Promise help connect the family to health and wellness resources? Yes No

If the family was unable to secure transportation, has the problem been resolved? Yes No

If no, has the family been provided assistance in securing transportation? Yes No

Was the family on vacation? Yes No

If yes, has the family received attendance literature? Yes No

Based on your conversations with the family, what can you do to support the family to ensure their child is attending Preschool every day? _____

How can the Preschool Promise support you in improving attendance for the family? _____

Director Signature: _____ Date: _____

Submit this form to 4C for Children within 5 business days of receiving your "Attendance Inquiry Letter"