



Georgia Department of Early Care and Learning

# Georgia's Pre-K Program 2016-2017 Chronic Absenteeism or Tardiness Form

*Reports should only be submitted by the Pre-K Project Director*

Date of Request: \_\_\_\_\_

Project Director: \_\_\_\_\_

Legal Name: \_\_\_\_\_

dba: \_\_\_\_\_

Site Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_ E-mail: \_\_\_\_\_

*Directors should review Section 3.9 of the current Pre-K Providers' Operating Guidelines for Procedures for Chronic Absenteeism or Tardiness before submitting this request. Programs will receive written notification of the final determination.*

Child's Name: \_\_\_\_\_ Child's Birthdate: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Total Days Enrolled	Total Days Absent	Total Days Tardy (arrived late or left early)

Please describe the plans made/actions taken to encourage the family to change the tardy/absent behavior:

Attach copies of student attendance documentation, letters/written notification given to the family, and documentation showing efforts to assist the family in resolving the issue. Mail, fax, or e-mail all documentation to the program's Pre-K consultant.

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Office Use Only

Date Received: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Approved By: \_\_\_\_\_

Approve Disenrollment:  Yes  No

Additional Information / Instruction: