# 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 3.13 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.

Office Use Only

Date Received: ____/____/____

Approved By:_____

Approve Disenrollment: ☐ Yes ☐ No

| Additional Information / Instruction: |
|---|
| |