

CONFIRMATION OF PROVIDER

Once you have chosen the *child care provider* who will care for your child(ren), please have <u>the provider complete</u> and sign this form to help the completion of the voucher.

If you will be using more than one provider, use <u>one form per provider</u>. <u>All Providers Please Print Clearly.</u>

Parent Name:	Parent Contact Number:			
Child #1:		Child #2:		
Child #3:		Cl-11-1 IIA		
Program Type: Child # 1:; Child # 2:_	; C	hild # 3:	; Child #4:	
Please use the following Program Type Abbreviation HS (Headstart); NU (Under 2 w/ Independent Provi (Over 2 w/ System Provider); AS (After School); BS PROVIDER INFORMAT What is your program name, address and phone	der); NO (Over 2 v (Before School); B <mark>ION - To be com</mark>	v/ Independent Provider)	; SU (Under 2 w/ System Provider); SC ; SC (School Closures Only)	
What is the expected date of enrollment for the ch	ild (ren)?			
Please verify the earliest date the child can start				
What is the latest date the voucher can start and y must start after the date provided, the Child Care Resource opening. Otherwise, this form will serve as confirmation for	and Referral Agenc	y will contact you to confirm		
How many absences are you willing to accept prior in a six month period) Please refer to EEC's Attenda		EC only pays for 30 absen	ices	
Please circle one			Full time or Part time	
Please circle the days care will be provided	24		Su-M-Tu-W-Th-F-Sa	
Please circle one- Is the parent requesting transportation services to be included on the voucher? (Subject to approval by the Child Resource and Referral Agency)			No Yes- One Way Yes- Two Way	
This form is NOT confirmation that a voucher will be issued. Pursuant to your Voucher Agreement, you will only be reimbursed for enrolled children with a signed, current voucher. Children are not considered enrolled in subsidized care until the first day the child actually attends the program following the start date indicated on the voucher.				
Parent Signature	Date	Provider Signature	Date	

XIds Valimited Services. Inc. 35 Trolley Crossing Road Chariton, Ma 01507