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TEEN PARENT VERIFICATION OF SCHOOL ENROLLMENT/ATTENDANCE

The student listed below is receiving Child Care Assistance through Workforce Solutions for North Central Texas. Please complete this form to provide verification of the student's enrollment and attendance in your program.

STUDENT NAME: _____

DATES OF SCHOOL YEAR: _____

HOURS/DAYS OF SCHEDULED CLASSES: _____

GRADE LEVEL: _____

This information is needed by: _____

Signature and Title of Person Completing Form

Name of School

Address of School

Phone Number

Date

Student Release Signature _____

Workforce Solutions for North Central Texas is an equal opportunity employer/program. Auxiliary aids and services are available upon request to individuals with disabilities. For the hearing impaired, call TDD 1-800-735-2989 or VOICE 1-800-735-2988. For more information, visit www.dfwjobs.com.

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Revised 1/17/18