

STATE OF FLORIDA VOLUNTARY PREKINDERGARTEN (VPK) EDUCATION PROGRAM

Child Certificate of Eligibility

SAMPLE

CHILD CERTIFICATE OF ELIG	BILITY (ISSUED by Early Learni	ng Coalition, through the Famil	y Portai)
1. VPK program year	2. Certificate number	3. Certificate issue date	4. Parent email address
5. Parent name		6. Primary contact number	7. Secondary contact number
8. Child's full name		9. Child's date of birth	10. County
. ADMISSION BY PROVIDER (OR SCHOOL (Jointly Prepared	by Provider or School <u>AND</u> Pai	rent or Guardian)
11. Name of provider or school		12. Telephone	
13. Address of VPK site		14. VPK class	15. Date child will begin attendance
•	ifies that it admits the child ne VPK program and agrees to child.	I certify that I choose the prodeliver the VPK program for program funds be paid to the child.	
16. Signature of authorized provider or school	representative for 17. Date	18. Parent signature	19. Date
. ENROLLMENT SUBMISSIO	N AND CONFIRMATION (Subr	nitted by Provider or School)	
	rollment of the child for paym ay issue a confirmation numb		TION FOR PAYMENT:
		IS YOUR CONFIRMATION	N NUMBER (IF APPLICABLE)

NOTICE TO PRIVATE PROVIDER OR PUBLIC SCHOOL: A private provider or public school must keep each original signed form for at least 5 years from the date of the last payment for that fiscal year or until the resolution of any related audit findings or any related litigation, whichever occurs last. A private provider must permit the early learning coalition, and a public school must permit the school district, to inspect the original signed forms during normal business hours. If required by the early learning coalition, a signed copy of this certificate must be forwarded to the coalition or a qualified contractor acting on behalf of the coalition.