



OMB Number: 0584-XXXX Expiration Date: XX/XX/XXXX

## ERRONEOUS PAYMENTS IN CHILD CARE CENTERS STUDY (EPICCS) CENTER ENROLLMENT FORM

## **Summary**

Field Data Collectors will collect this data from the master list of enrolled. While onsite, the data will be abstracted and entered on computerized data entry forms. This data will be compared to eligibility status recorded on the income eligibility application, and meal claiming records during data analysis.

Data variables that can be pre-loaded into this instrument are: Sponsor Name, Sponsor Study ID, sampled child care center name, child care center study ID, and target month.

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0584-XXXX. The time required for the child care center director or manager to access to the center's administrative records is estimated to average 5 minutes per response including the

## APPENDIX C3. CENTER ENROLLMENT FORM





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A. CHILD ENROLLMENT  Complete the following table for <u>each</u> enrolled child. Do not include non-enrolled students who may attend the center on a special visit.						
Eligibility Status (Check One): Certification Status Date:						
/  _						