



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

# ERRONEOUS PAYMENTS IN CHILD CARE CENTERS STUDY (EPICCS) CENTER ATTENDANCE FORM FOR TARGET MONTH

#### **Summary**

Field Data Collectors will collect this data from the master list of enrolled students and attendance records. 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: Child enrollment, 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 provide access to the center's administrative records is estimated to average 5 minutes per response including the

#### APPENDIX C8. CENTER ATTENDANCE FORM FOR TARGET MONTH



Ó	W	<b>EPICCS</b>
4	*	Erroneous Payments in Childcare Centers Study

Center Name:	Center Study ID:   _ _ _ _	Date of Data Collection:	_  /    /
DAY YEAR			MONTH
Sponsor Name:	_Sponsor ID:		
Target Month:   _ / _ _ _ _  MONTH YEAR			

## A. CHILD ATTENDANCE (TARGET MONTH)

Complete the following table for <u>each</u> enrolled child (entered on the child enrollment form) to record their attendance in the target month.

Do not include non-enrolled students who may attend the center on a special visit. For each day of the month indicate one of the following:

P = Present

NP = Not Present / Absent

PP = Present Partial-day

NA = Center was closed

Child Name: Click here to enter text.					_	014 1 1						Enrollment Date: Click here to enter text.						Eligibility Status (Check One): Certification Status Date:													
						text.												$\Box$ Free $\Box$ Reduced $\Box$ Paid													
1 2 3 4 5 6					6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	
Attendance																															

<sup>\*</sup>This table/grid repeats for each child enrolled.

### **B. SPECIAL NOTES / COMMENTS:**

Provide any additional comments regarding center attendance.



