

CCS VERIFICATION OF HIGH SCHOOL ENROLLMENT FORM
(TO BE FILLED OUT BY COUNSELOR OR PEP COORDINATOR)

THIS FORM IS TO BE COMPLETED BY THE HIGH SCHOOL YOU ARE CURRENTLY ENROLLED IN.

The student listed below is receiving child care services paid from the Texas Workforce Commission. Please fill out this form to provide verification of the student's enrollment and attendance in your program. Only a counselor or PEP Coordinator should fill this form out.

Date: _____

Student Name: _____

Date of Enrollment: _____

Hours and Days of Scheduled Classes: _____

Has the Student Withdrawn from this Institution? _____ YES _____ NO

If Yes, What Date did the Student Withdrawal? _____

What is the Student's Current Grade Level? _____

Name of Person Completing Form: _____

Signature: _____

Title: _____

Name of School: _____

Address/City/ST/Zip: _____

Telephone #: _____

For any questions regarding this form, please contact the Child Care Services Team at (800)772-2269. You may fax the completed form to (254) 753-6355.