

**Daily Attendance Record
Sample Form**

ES-1604
Rev. 05-05

Child's Name: _____

Month: _____

Day of the Week	In	Out	Parent's Signature	Total Daily Hours
1st				
2nd				
3rd				
4th				
5th				
6th				
7th				
8th				
9th				
10th				
11th				
12th				
13th				
14th				
15th				
Page Total				

**Daily Attendance Record
Sample Form**

ES-1604
Rev. 05-05

Day of the Week	In	Out	Parent's Signature	Total Daily Hours
16th				
17th				
18th				
19th				
20th				
21st				
22nd				
23rd				
24th				
25th				
26th				
27th				
28th				
29th				
30th				
31st				
Total Hour for the Month				

Provider's Signature _____ **Date** _____

Parent's Signature _____ **Date** _____