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| F:\SHARE\Forms Transfers\Forms-latest PDFs and logos\CCS logos\CCS Sig stacked blk 1.5 PC.eps | | | | Spokane Head Start/ECEAP/EHS  ERSEA FINAL Attendance NOTIFICATION | | | |
|  | | | | | | | |
| Date | | |  | | | | |
| Child’s Name | | |  | | | | |
| From |  | | | | Site |  | |
|  | | | | | | |  |
| Dear (Parent’s Name),  Spokane Head Start/Early Head Start believes it is very important for children to attend class and regular attendance is a requirement of the program. You are receiving this attendance concern notice because of the following reasons: | | | | | | | |
| Your child has missed       of the last       days,      % attendance rate. | | | | | | | |
| Our records show that your child has been absent since       and we have not been able to reach you. | | | | | | | |
| The attendance goals from the Attendance Action Plan have not been completed. | | | | | | | |
| Other: | |  | | | | | |
|  | |  | | | | | |
| Please contact me as soon as possible. If I do not hear from you by       , your child will be dropped from the program. | | | | | | | |
| Comments | | | | | | | |
|  | | | | | | | |