Early Learning Coalition of the Nature Coast

Serving Citrus – Dixie – Gilchrist – Levy – Sumter Counties

I give consent for release of my education information to the Early Learning Coalition of the Nature Coast (ELCNC) to assist in the determination for my eligibility for child care assistance.

Applicant Signature: ______________________________ **Date:** ______________________

ELCNC Client Services Counselor: ______________________ **Phone:** ______________________

In order to determine the eligibility of our applicant listed below for School Readiness child care services, please assist us by providing requested information below and returning this form to us by ______________. Thank you.

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VERIFICATION OF EDUCATION

To be completed by the applicant:

Student Name: ______________________________ **Social Security Number:** ____________________

Student Address: ____

To be completed by the Education Facility/School:

Number of credit hours student is enrolled in: __________ ◯ **full time student** ◯ **part time student**

Date student began attending classes: ______________ **Semester end date** ____________________

By signing this document, I am certifying that the above information is true and correct to the best of my knowledge. The Early Learning Coalition of the Nature Coast may contact the education facility named below to verify the above information.

______________________________ ______________________________

Signature of staff completing this form **Title**

______________________________ ______________________________

Name of education facility **Date form completed**

______________________________ ______________________________

Address of education facility **Phone number**

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City **State** **ZIP**

Note: If school stamp or seal is not available, please provide the information requested on school letterhead stationery. Thank you.

School Stamp or Seal (Required)

Main Office
1564 N. Meadowcrest Blvd.
Crystal River, FL 34429
(352) 563-9939
(352) 563-5933 fax

Chiefland Office
212 N. Main St.
Chiefland, FL 32626
(352) 490-5855
(352) 490-6762 fax

Bushnell Office
114 Jumper Dr North
Bushnell, FL 33513
(352) 793-5430
(352) 793-6230 fax
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