



A proud partner of the American Job Center network

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Language Assistance/Asistencia de idioma

This document contains vital information about requirements, rights, determinations, and/or responsibilities for accessing workforce system services. Language services, including the interpretation/translation of this document, are available free of charge upon request.

Este documento contiene información importante sobre los requisitos, los derechos, las determinaciones y las responsabilidades del acceso a los servicios del sistema de la fuerza laboral. Hay disponibles servicios de idioma, incluida la interpretación y la traducción de documentos, sin ningún costo y a solicitud.

High School / Training Schedule Verification Form - parent
(To be completed by High School/Training Institution)

Parent Name: _____

CCS Case #: _____

TO BE COMPLETED BY HIGH SCHOOL/TRAINING INSTITUTION:

Note to training institution: Your student is applying for or is currently receiving Child Care Assistance with Workforce Solutions Texoma. To determine eligibility, we must receive a detailed summary of working hours or class schedule. Please complete the following information:

Training Institution Name: _____

Address: _____

Start Date: _____ End Date: _____

Weekly Class Schedule: _____

Is this student meeting your attendance requirements? [] YES [] NO

If no, please explain (comment not required):

Is this student working toward successful completion of this training program? [] YES [] NO

SIGNATURE (MUST BE SIGNED BY SCHOOL PERSONNEL)

Person completing this form (please print)

Title & Phone #

Signature

Date