



MARCH - CHILD CARE PROVIDER VERIFICATION

| DAY | DATE | IN | OUT | ABSENT | NOTES |
|-----------|---------|----|-----|--------|-------|
| MONDAY | 3/1/21 | | | | |
| TUESDAY | 3/2/21 | | | | |
| WEDNESDAY | 3/3/21 | | | | |
| THURSDAY | 3/4/21 | | | | |
| FRIDAY | 3/5/21 | | | | |
| MONDAY | 3/8/21 | | | | |
| TUESDAY | 3/9/21 | | | | |
| WEDNESDAY | 3/10/21 | | | | |
| THURSDAY | 3/11/21 | | | | |
| FRIDAY | 3/12/21 | | | | |
| MONDAY | 3/15/21 | | | | |
| TUESDAY | 3/16/21 | | | | |
| WEDNESDAY | 3/17/21 | | | | |
| THURSDAY | 3/18/21 | | | | |
| FRIDAY | 3/19/21 | | | | |
| MONDAY | 3/22/21 | | | | |
| TUESDAY | 3/23/21 | | | | |
| WEDNESDAY | 3/24/21 | | | | |
| THURSDAY | 3/25/21 | | | | |
| FRIDAY | 3/26/21 | | | | |
| MONDAY | 3/29/21 | | | | |
| TUESDAY | 3/30/21 | | | | |
| WEDNESDAY | 3/31/21 | | | | |
| THURSDAY | - | - | - | - | - |
| FRIDAY | - | - | - | - | - |

STUDENT ID#: _____ PROVIDER SIGNATURE/DATE: _____

EMAIL OR FAX FORM TO: [SSWIMBERLY27@LENOIRCC.EDU](mailto:sswimberly27@lenoircc.edu) / 252-233-6896 BY THE 5TH OF FOLLOWING MONTH