

**KING GEORGE COUNTY SCHOOLS
CHILD CARE VERIFICATION**

INSTRUCTIONS: Parents or guardians requesting a variance based on child care in a school attendance zone other than their own must complete **PART I** and have the Child Care Provider complete **PART II** of this form. The parent or guardian must upload this completed form to the variance application. The child care location must be in the same attendance zone as the requested school. **A separate form must be completed for each child.**

PART I STUDENT/PARENT INFORMATION

Student's Name: Last: _____ First: _____ Middle: _____

Parent/Guardian Name: _____

Address: _____
STREET *APT #*

_____ *CITY* *STATE* *ZIP CODE*

Phone: Home: _____ Work: _____

Cell: _____

Parent/Guardian Signature: _____ Date: _____

PART II CHILD CARE PROVIDER INFORMATION (to be completed by the child care provider)

Name/Company: _____

Address: _____
STREET *APT #*

_____ *CITY* *STATE* *ZIP CODE*

Phone: _____ FAX: _____

This is to verify that the above named child will be in my care for school year: _____

**I understand it is a misdemeanor to make false statements as to school division or attendance zone residency.
I certify that all the information on this application is correct to the best of my knowledge.**

Name/Position of person/provider completing Part II (please print): _____

Provider's Signature: _____ Date: _____