



DYVOSVIT

SCHOOL AND CHILDCARE

CHILD CARE SERVICE AUTHORIZATION REQUEST

Service Hours per Week	Weekly Payment Rate*
Less than 10 hours	Minimum Attendance/Absent Weekly Tuition Fee**
10 or more and less than 33 hours	Part-Time Tuition
33 or more hours	Full-Time Tuition

*See current **Fee and Tuition Schedule**

****Hourly Tuition** for Transition Attendance or School Age only

Child's Name	Date of Birth	Sun	Mon	Tue	Wed	Thu	Fri	Sat	PFCC***
		NA	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	NA	<input type="checkbox"/>
		NA	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	NA	<input type="checkbox"/>
		NA	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	NA	<input type="checkbox"/>

*****Publicly Funded Child Care (PFCC)** requires authorization of the local County Department of Children and Youth (CDDCY).

Parent/Guardian Name: _____

Parent/Guardian's Signature: _____

Date: _____