

Early Learning Scholarship Program Absent Day Exemption Policy

The department will consider exemptions to the 25 absent day policy if the child has or is at risk of exceeding 25 absent days in their scholarship year, for several circumstances that interfere with regular and consistent attendance.

- Child is the child of a teen parent, to allow for breaks in the parents school schedule
- Child has experienced homelessness in the last 24 months, and absences may be due to changes in living locations and schedules
- Children in foster care or child protective services that may have court or other assigned visitation or reunification efforts that could lead to a higher number of absences.

Families that are at risk of exceeding 25 absent days in a scholarship year due to issues that have prevented the child from attending the program regularly should request an *Absent Day Exemption Request Form* from their Area Administrator or Scholarship Administrator. Medical Exemptions are a different process and should be requested separately.

For children of teen parents, the exemption form must either be signed or accompanied by a signature or statement from an official from the teen parent's school or, if applicable, the county or tribal social worker that they are aware of the family's situation and the child's absentee rate.

For Pathway I scholarships, the Area Administrator (AA) provides the form as provided by Minnesota Department of Children, Youth, and Families (DCYF) to the family. The family must return the form to the Area Administrator within 30 days of the last day of the exemption period. The AA should note the dates of the exemption in the child's ELSA record and keep the *Absent Day Exemption Request Form* with the child's paper records.

For Pathway II scholarships in child care programs, the Scholarship Administrator (SA) informs the Pathway II Child Care Scholarship Administrator, Milestones, and requests the form to give to the family. The family must return the form to the child care program within 30 days of the last day of the exemption period. The child care program will inform Milestones as to the dates of the exemption and keep the *Absent Day Exemption Request Form* with the child's paper records. Milestones should note the dates of the exemption in the child's ELSA record.



Absent Day Exemption Request Form

Purpose:

This form is used to document the request for an exemption to the 25 absent day policy due to circumstances that may result in a child's absence from the early learning program. Use this form if the child has been absent **more than 25 absent days in a scholarship year**. (*Scholarship Year definition is: within the twelve (12) months of a scholarship award date).

Parent/Guardian Instructions:

Regular attendance in a high-quality program is important for young children. Because of this, the Early Learning Scholarships do not pay for more than 25 absent days in one scholarship year. Some families have a situation that makes it hard to attend regularly. To help those families, there is an exception to the absent day rule for a child of a teen parent, a child whose family has experienced homelessness in the last 24 months, or children involved in foster care or child protection due to visitation or reunification efforts. Use this form if your child(ren) has been or potentially will be absent from the program more than 25 absent days in a scholarship year.

Fill out the form, sign it, and return form to the program your child is attending within 30 days. It will not be approved past the 30-day time period. If the exemption is because of an ongoing circumstance, it can be approved for up to 12 months.

Priority Status:

| _ Child of a | a teen parent | | | | |
|-------------------|---|----------------------|----------------------------|--------|------|
| _ Homeles | sness – check a | pplicable situation: | | | |
| | _ Housing not stable _ Transportation not stable | | | | |
| | _ 114113901141 | ion not stable | _ other (piedse deserbe) | | |
| _ Foster ca | re or child prot | ection – check appli | cable situation: | | |
| | _ Visitation | _ Reunification | _ Other (please describe): | | |
| | | | | | |
| _ Other ex | emption reque | st (please describe) | | | |
| Absent Chi | ild's Name: | | | | |
| Absent Chi | ild's Name: | | | | |
| | | | | | |
| Parent/Gu | ardian Name: _ | | | | |
| Address: _ | | | City: | State: | Zip: |
| Name of E | arly Learning P | rogram: | | | |
| Darent Signature: | | | Date (MM/DD/VVVV) | | |

Teen Parent Authorized Signer Instructions:

For children of teen parents, the exemption form must either be signed by an official from the teen parent's school or if applicable, accompanied by a signature and statement from the county or tribal social worker that they are aware of the family's situation, the child's absentee rate; and the parent/guardian of the child has been in contact with you directly regarding circumstances that may prevent the child(ren) from regular attendance at the program.

In order to sign this form, you must represent one of the authorized positions from the list below:

| County or Tribal Social Worker | | School Counselor | | |
|--|---------------------|--------------------------------|-----------------------|--|
| School NurseOther (title): | | School Advisor | | |
| Authorized Signer's Name (Print): | | | | |
| | | | | |
| | | Date (MM/DD/YYYY): | | |
| Title of Authorized Signer: | | | | |
| Name of Clinic, School, or Early Learning F Address: | | | | |
| Check one of the two options below: | | | | |
| Individual has circumstances that may | / prevent regular a | ttendance for the following | time period: | |
| Start Date (MM/DD/YYYY): | | | | |
| End Date (MM/DD/YYYY): | | | | |
| Individual has ongoing conflicts or need early learning program. | eds which may resu | ılt in the child having freque | ent absences from the | |
| Start Date, if known (MM/DD/Y | (YYY): | | | |
| Agency Use Only | | | | |
| Exemption for absent days will begin on (| MM/DD/YYYY): | and end on (MI | M/DD/YYYY): | |
| Exemption for absent days will begin on t | | • | <i>.</i> . | |
| date the completed form was received by | | , , , | • | |
| file with the child's records and provide a Administrator or Minnesota Department | • • | • • | • | |

an ongoing situation, it may be approved for up to 12 months.