TEMPORARY SUSPENSION REQUEST

Please read, complete form (in full), print, sign and return by drop-off.

In order for your child to be absent from an ELC School Readiness Program without jeopardizing your eligibility, you must comply with the following requirements:

1. Temporary Suspension is to allow families to maintain child care eligibility during verified temporary breaks in child’s attendance. Parents who anticipate absences for more than 10 to 90 days may be granted a Temporary Suspension.

2. Parents are required to complete and submit the Temporary Suspension Request form that is signed by the parent and by the provider to ELC Eligibility Department not more than 72 hours before the date that Temporary Suspension is needed. If you have questions, please contact the Eligibility Department at (352) 375-4110.

3. In order for your request to be approved/processed, assigned parent copayment must be paid in full prior to submitting a request for Temporary Suspension. It is the parent’s responsibility to have their current provider sign the request form making both the client and provider aware of requested dates of absence. During the Temporary Suspension, your child will not be active in the system and you will not receive a reminder to re-determine your services.

4. Parents of children on Summer Vacation must submit their most recent paystub or school schedule to reinstate their care.

5. Please note that ELC will not pay for your child care provider for child care during your absence. Parents must provide proof of purpose for care and be eligible to continue to receive a child care services before authorization to restart care is given.

6. Parents need to be aware that ELC cannot guarantee that your child(ren) will be able to return to the same child care provider. If you have a redetermination dates during the authorized temporary suspension you must complete your redetermination prior to the eligibility end date or eligibility will be terminated on the redetermination date.

7. To start the temporary suspension, please complete the Temporary Suspension Request form not more than 72 hours before the start date needed and submit by drop-off. If you have any questions, please contact the Eligibility Department at (352) 375-4110.
TEMPORARY SUSPENSION REQUEST

This form must be completed and returned by the parent to ELC Eligibility Department not more than 72 hours before the start date before request can be approved.

Parent/Guardian Name: __________________________ SS# (Optional) __________________________

To be completed the Provider:

Provider: ___________________________________ Dates child /ren out of care: From: ___________ to: ___________

Parent/guardian's parent fees paid in full? Yes / No OR Repayment agreement in place? Yes / No

(attach receipt of payment) (attach copy of repayment agreement)

I have been notified of the Temporary Suspension of the following child/ren:

Child 1: ____________________________________________

Child 2: ____________________________________________

Child 3: ____________________________________________

Child 4: ____________________________________________

Child 5: ____________________________________________

Provider Signature: __________________________ Date: __________________________

Provider's signature acknowledges child care will not restart without a NEW voucher provided by Parent.

To be completed the Parent / Guardian:

Reason for Temporary Suspension: (Required) ____________________________________________

Temporary Suspension is to allow families to maintain child care eligibility during verified/approved breaks in the child's attendance. Parents may be granted a Temporary Suspension if the child is anticipated to be out of care for more than 10 to 90 days for approved reasons. Please contact the Eligibility Department at (352) 375-4110 if you have any questions.

You can drop-off your Temporary Suspension to ELC Eligibility Department.

4424 NW 13th Street, A-5, Gainesville, FL 32609

A NEW CERTIFICATE OF ELIGIBILITY MUST BE GIVEN TO THE PROVIDER AND IS REQUIRED IN ORDER TO RESTART CARE

Parent/Guardian Signature: __________________________ Date: __________________________

ELCAC revised 10.14.19