**Attendance Sheet Reference Guide**

**Purpose**

The purpose of this guide is to ensure the accurate completion of program participant attendance sheets by KHA Funded Afterschool Providers. Accurate attendance records are important for the submission of monthly reimbursement requests. Furthermore, accurate attendance records are crucial for monitoring attendance and ensuring program effectiveness.

**Attendance Sheets**

* Attendance sheets must be completed on a daily basis.
* All attendance sheets must be legible and include the following components:
  + Provider name
  + Site location
  + Date
  + Participant’s first and last name
  + Participant’s exact arrival (time in) and departure (time out) times
  + Signature
* The signature column should only be completed by the parent, persons authorized to drop off or pick up the participant from the program, or an authorized staff.
* Attendance sheets should not be completed with pencil or erasable ink. Only use blue or black ink.
* Do not use correction fluid/tape. If you make a mistake, neatly cross through the error, write the correction, and initial. **Attendance Sheets WILL NOT be processed with the use of whiteout, pencil, or illegible ink.**
* Attendance sheets must always remain in the possession of the provider.

**Consequences**

Upon review by the Contract Manager and Contract Compliance Associate, any attendance document that is questionable in nature will result in a face-to-face meeting with KHA Directors of Contract Management and Finance, the assigned Contract Manager and Contract Compliance Associate, and the Lead Contract Compliance Associate. Severe discrepancies or multiple infractions could result in a meeting with KHA’s Chief Administrative Officer and reduction in reimbursement or contract termination.

I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(print name) acknowledge that I have read and understand the contents of this document. I understand that any falsification of documents may result in termination of contract and financial penalty.

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Agency Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Site Location: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Today’s Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_