



**NC Pre-K Monthly Student Report  
SFY 2020-2021**

*This form must be submitted on a monthly basis when online submission (Ready to Submit) is due.  
It can be submitted via email, fax or in person.*

Site Name: \_\_\_\_\_

Month of Service: \_\_\_\_\_

**New Student(s) Added**

N/A

Student Name	Birthdate	Application Date	Enrollment Date
1			
2			
3			
4			

**Student(s) Exited**

N/A

Student Name	Exit Date	Reason for Exit
1		
2		
3		
4		

**Student(s) with less than 50% attendance days**

N/A

Student Name	Number of Days Attended	Reason for lack of attendance days
1		
2		
3		
4		

**Exception Requests**

N/A

Student Name	Reason for Exception	Exception Approved? (PFC use only)
1		<input type="checkbox"/> Yes <input type="checkbox"/> No, _____
2		<input type="checkbox"/> Yes <input type="checkbox"/> No, _____
3		<input type="checkbox"/> Yes <input type="checkbox"/> No, _____
4		<input type="checkbox"/> Yes <input type="checkbox"/> No, _____

This form requires your electronic signature (type your name). I certify that all information provided in the form is accurate and true.

Signature \_\_\_\_\_

Today's Date \_\_\_\_\_