

# EDUCATION SCHEDULE VERIFICATION

Student Name: \_\_\_\_\_ ELRC Record Number: \_\_\_\_\_

**THIS FORM MUST BE COMPLETED BY AN AUTHORIZED SCHOOL REPRESENTATIVE ONLY**

Name of the School District: \_\_\_\_\_

Name of the school student is attending: \_\_\_\_\_

Grade in school: \_\_\_\_\_ First day of enrollment: \_\_\_\_\_

First day of enrollment for the current year: \_\_\_\_\_ Last day of enrollment for the current year: \_\_\_\_\_

Attending school:  Part-time  Full-time

Anticipated completion/graduation date: \_\_\_\_\_

Type of program:  Elementary  Middle School  High School  GED Program

## Current Schedule of Classes:

If class schedule is consistent, complete week one only.  
If class schedule varies, complete all four weeks.

**WEEK ONE:** Date : \_\_\_\_\_

Monday from \_\_\_\_\_ AM / PM to \_\_\_\_\_ AM / PM  
Tuesday from \_\_\_\_\_ AM / PM to \_\_\_\_\_ AM / PM  
Wednesday from \_\_\_\_\_ AM / PM to \_\_\_\_\_ AM / PM  
Thursday from \_\_\_\_\_ AM / PM to \_\_\_\_\_ AM / PM  
Friday from \_\_\_\_\_ AM / PM to \_\_\_\_\_ AM / PM  
Saturday from \_\_\_\_\_ AM / PM to \_\_\_\_\_ AM / PM  
Sunday from \_\_\_\_\_ AM / PM to \_\_\_\_\_ AM / PM

**WEEK TWO:** Date : \_\_\_\_\_

Monday from \_\_\_\_\_ AM / PM to \_\_\_\_\_ AM / PM  
Tuesday from \_\_\_\_\_ AM / PM to \_\_\_\_\_ AM / PM  
Wednesday from \_\_\_\_\_ AM / PM to \_\_\_\_\_ AM / PM  
Thursday from \_\_\_\_\_ AM / PM to \_\_\_\_\_ AM / PM  
Friday from \_\_\_\_\_ AM / PM to \_\_\_\_\_ AM / PM  
Saturday from \_\_\_\_\_ AM / PM to \_\_\_\_\_ AM / PM  
Sunday from \_\_\_\_\_ AM / PM to \_\_\_\_\_ AM / PM

**WEEK THREE:** Date : \_\_\_\_\_

Monday from \_\_\_\_\_ AM / PM to \_\_\_\_\_ AM / PM  
Tuesday from \_\_\_\_\_ AM / PM to \_\_\_\_\_ AM / PM  
Wednesday from \_\_\_\_\_ AM / PM to \_\_\_\_\_ AM / PM  
Thursday from \_\_\_\_\_ AM / PM to \_\_\_\_\_ AM / PM  
Friday from \_\_\_\_\_ AM / PM to \_\_\_\_\_ AM / PM  
Saturday from \_\_\_\_\_ AM / PM to \_\_\_\_\_ AM / PM  
Sunday from \_\_\_\_\_ AM / PM to \_\_\_\_\_ AM / PM

**WEEK FOUR:** Date : \_\_\_\_\_

Monday from \_\_\_\_\_ AM / PM to \_\_\_\_\_ AM / PM  
Tuesday from \_\_\_\_\_ AM / PM to \_\_\_\_\_ AM / PM  
Wednesday from \_\_\_\_\_ AM / PM to \_\_\_\_\_ AM / PM  
Thursday from \_\_\_\_\_ AM / PM to \_\_\_\_\_ AM / PM  
Friday from \_\_\_\_\_ AM / PM to \_\_\_\_\_ AM / PM  
Saturday from \_\_\_\_\_ AM / PM to \_\_\_\_\_ AM / PM  
Sunday from \_\_\_\_\_ AM / PM to \_\_\_\_\_ AM / PM

### Student's address on file at school:

Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip code: \_\_\_\_\_

### SCHOOL SEAL OR STAMP

