Absences approved by your activity provider; No child care or transportation problems; School appointments; Job interviews; Illness for you or your children; Appointment with Eligibility or GAIN Services Workers; Medical appointments for you or your children; Family issues such as death in family, domestic violence, etc.

Absence(s) Reporting Hours

<table>
<thead>
<tr>
<th>Date(s)</th>
<th>Hour(s) absent</th>
<th>Reason(s) you did not Attend</th>
</tr>
</thead>
<tbody>
<tr>
<td>1/7/09</td>
<td>6</td>
<td>Child was sick</td>
</tr>
<tr>
<td>1/1/09 &amp; 1/19/09</td>
<td>12</td>
<td>School Holiday</td>
</tr>
</tbody>
</table>

INSTRUCTIONS - PARTICIPANT

Section A Reporting Hours

Write the actual hours you attended your education/training activity each day in an hour and minute format.

For example: Write 1:30 to indicate 1 hour and 30 minutes.

Do not write 1.5 to indicate 1 hour and 30 minutes.

- Separate your study time from your class time.
- If the study time is supervised, then attach verification of the supervised study time.
- Makes copies of this form if you need additional space.

Section C Transportation/Child Care

Request any services you need.

- Write down the date(s) and reason(s) you did not attend on a schedule date.
- Attach written verification of absences.

Note: Verification can include a doctor statement, a provider statement or a personal note signed by you explaining the reason for the absence.

Types of excused absences: absences approved by your activity provider; Holidays observed by the school administrators/provider; Medical appointments for you or your children; Appointment with Eligibility or GAIN Services Workers; No child care or transportation problems; School appointments; Job interviews; Illness for you or your children; Family issues such as death in family, domestic violence, etc.

Verification of Information

Once you have completely filled in your hours of participation:

1. Sign and date the form.
2. Submit form to the CalWORKs Office in your school or training provider for signature.

What’s next?

Once the provider completes Section B and E, if they did not fax the form to your GAIN Services Worker (GSW), return the completed form to your GSW by the due date indicated on the front of the form.

INSTRUCTIONS - PROVIDER

Section B and E

Please review form with participant and complete sections B and E. Once completed, the form may be faxed or returned to the participant. Only one stamp per provider is needed.