



Family Support Services
OF NORTH FLORIDA INC.

Edward Lee Kaywork
Chief Executive Officer

Reporting Child Absences
(Rilya Wilson Act, Florida Statutes 39.604)

Name of Person completing form: _____

Child Care Center/Facility completing form: _____

Date Reporting: _____ Phone Number: _____

Child's Name: _____

Child's DOB: _____

Dates of Absence: _____

Child's Family Service Counselor/Case Worker: _____

Case Management Organization: CHS Daniel JFCS MHRC
 NTF Nassau

Child's FSC was notified: _____

Did the Parent/custodian provide any statement or documentation of why the child was absent?

Yes No ; if yes, what?

Please e-mail this completed form to: Rilya.Wilson@fssnf.org

1300 Riverplace Blvd. Jacksonville, Florida 32207

The Mission of Family Support Services of North Florida is to be the leader in providing safety, stability and quality of life for all children, by working with the community to strengthen the family unit.