

**TEMPORARY CLOSURE – INITIAL NOTICE FORM**  
FOR VOLUNTARY PREKINDERGARTEN (VPK) PROGRAM  
EARLY LEARNING COALITION OF HILLSBOROUGH COUNTY (ELCHC)

**I. INSTRUCTIONS**

If a VPK Program temporarily closes due to unexpected circumstances, VPK providers must complete and submit this form to the ELCHC **on the first day of the closure**. See definitions below for the types of VPK temporary closures. This form is not required for temporary closures due to emergency circumstances, however, it is recommended when possible. When the VPK Program resumes, providers must submit the ELCHC Resumption Notice Form no later than two (2) business days after the VPK instructional hours resume. See Rules 6M-8.204, 6M-8.300, and 6M-8.301, Florida Administrative Code.

**II. DEFINITIONS**

**TEMPORARY CLOSURE – EMERGENCY CIRCUMSTANCES:** A closure is considered caused by an emergency circumstance if it was due to a state of emergency that is declared by federal, state or local officials for the area in which the provider is located.

**TEMPORARY CLOSURE – UNEXPECTED CIRCUMSTANCES:** A closure is considered unexpected if a provider could not open a VPK class due to unanticipated circumstances that did not reach the level of an emergency circumstance and therefore the provider did not receive prior approval. These are non-reimbursable days and the provider should revise and submit a new OEL-VPK 11B on the OEL Provider Services Portal to restore the lost instructional hours within two (2) business days following the resumption. A provider may only change its VPK Class Schedule (OEL-VPK 11B) two times due to reasons other than emergency circumstances.

**III. PROVIDER INFORMATION**

<b>PROVIDER NAME (SITE):</b>		
<b>ADDRESS:</b>	<b>CITY:</b>	<b>ZIP CODE:</b>

**IV. CLOSURE DETAILS**

<b>DATE(S) THE VPK CLASS(ES) WILL NOT BE OFFERED AS PREVIOUSLY SCHEDULED:</b>
<b>CLASS ID(S) OF VPK CLASS(ES) AFFECTED:</b>

<b>ANTICIPATED DATE VPK CLASS(ES) WILL RESUME (IF AVAILABLE):</b>	
<b>BRIEFLY DESCRIBE THE CIRCUMSTANCE THAT CAUSED THE TEMPORARY CLOSURE:</b>	
<b>V. AUTHORIZATION</b>	
By signing below, I certify the VPK class(es) listed above are temporarily closed because of the described circumstances and the information provided is true and correct.	
<b>SIGNATURE OF AUTHORIZED REPRESENTATIVE:</b>	<b>DATE:</b>
<b>PRINT NAME:</b>	
<b>PHONE:</b>	<b>EMAIL:</b>