

**E-CHILD CARE POINT OF SERVICE (POS) DEVICE QUICK REFERENCE GUIDE FOR PARENTS  
for the New Jersey e-Child Care System (New Jersey ECC)**

**This guide outlines the most common parent functions of the  
New Jersey ECC point of service (POS) device.  
The New Jersey ECC Provider User Manual provides more detailed information.**

**Parent Functions**

| <b>CHECK IN</b>         |  |
|-------------------------|--|
| <b>Terminal Display</b> | <b>Parent Action</b>   |
| SWIPE CARD to Begin     | Swipe card   |
| Please ENTER PIN        | Enter 4-digit PIN<br>Press Enter   |
| Attendance Type?        | Press 1  |
| Enter Child 1 #         | Enter assigned 2-digit child # (ex. 01)<br>Press Enter <b>(See * Note)</b> |
| APPROVED or DENIED      | Transaction Complete   |

| <b>CHECK OUT</b>        |  |
|-------------------------|--|
| <b>Terminal Display</b> | <b>Parent Action</b>   |
| SWIPE CARD to Begin     | Swipe card   |
| Please ENTER PIN        | Enter 4-digit PIN<br>Press Enter   |
| Attendance Type?        | Press 2  |
| Enter Child 1 #         | Enter assigned 2-digit child # (ex. 01)<br>Press Enter <b>(See * Note)</b> |
| APPROVED or DENIED      | Transaction Complete   |

| <b>PREVIOUS CHECK IN</b> |  |
|--------------------------|--|
| <b>Terminal Display</b>  | <b>Parent Action</b>   |
| SWIPE CARD to Begin      | Swipe card   |
| Please ENTER PIN         | Enter 4-digit PIN<br>Press Enter   |
| Attendance Type?         | Press 3 Prev Check In  |
| Date: MM/DD              | Enter MM/DD (01/05)<br>Press Enter   |
| Time: HH:MM              | Enter HH:MM (08:00)<br>Press Enter   |
| 1-AM / 2-PM              | Enter 1 for AM or 2 for PM   |
| Enter Child 1 #          | Enter assigned 2-digit child # (ex. 01)<br>Press Enter <b>(See * Note)</b> |
| APPROVED or DENIED       | Transaction Complete   |

| <b>PREVIOUS CHECK OUT</b> |  |
|---------------------------|--|
| <b>Terminal Display</b>   | <b>Parent Action</b>   |
| SWIPE CARD to Begin       | Swipe card   |
| Please ENTER PIN          | Enter 4-digit PIN<br>Press Enter   |
| Attendance Type?          | Press 4 Prev Check Out   |
| Date: MM/DD               | Enter MM/DD (01/05)<br>Press Enter   |
| Time: HH:MM               | Enter HH:MM (08:00)<br>Press Enter   |
| 1-AM / 2-PM               | Enter 1 for AM or 2 for PM   |
| Enter Child 1 #           | Enter assigned 2-digit child # (ex. 01)<br>Press Enter <b>(See * Note)</b> |
| APPROVED or DENIED        | Transaction Complete   |

**New Jersey Department of Human Services  
Division of Family Development (DFD)  
E-Child Care**



**New Jersey  
ECC Parent Helpline  
1-800-997-3333**

**IMPORTANT REMINDERS**

- \* *NOTE: If you are recording the same action for more than one child, key in the next assigned 2-digit child # and press Enter. When all children have been recorded, press Enter again.*
- \* *Do not leave your swipe card with a provider.*
- \* *If your card is lost, stolen or damaged, you must call the New Jersey ECC Parent Helpline for a replacement.*
- \* *You must use the New Jersey ECC system to report attendance.*

*Parent Helpline: 1-800-997-3333*

**E-CHILD CARE POINT OF SERVICE (POS) DEVICE QUICK REFERENCE GUIDE  
for the New Jersey e-Child Care System (New Jersey ECC)**

**This guide outlines the most common provider functions of the  
New Jersey ECC point of service (POS) device.  
The New Jersey ECC Provider User Manual provides more detailed information.**

**Provider Functions**

| <b>REPORTS</b>                   |                                   |
|----------------------------------|-----------------------------------|
| <b>Terminal Display</b>          | <b>Provider Action</b>            |
| SWIPE CARD to Begin              | Press F4                          |
| User Password:                   | Enter Password and press Enter    |
| Provider Options                 | Press 1 for Reports               |
| Reports                          | Select Report (see below)         |
| <b>DAILY ATTENDANCE REPORT</b>   |                                   |
| Reports                          | Press 1 for Daily Attendance      |
| Date: MM/DD                      | Enter Date (01/05)<br>Press Enter |
|                                  | Wait for report to print          |
| <b>SUMMARY ATTENDANCE REPORT</b> |                                   |
| Reports                          | Press 2 for Summary Attendance    |
| Date: MM/DD                      | Enter Date (01/05)<br>Press Enter |
|                                  | Wait for report to print          |
| <b>EXCEPTIONS REPORT</b>         |                                   |
| Reports                          | Press 3 for Exceptions            |
|                                  | Wait for report to print          |
| <b>CASE INQUIRY REPORT</b>       |                                   |
| Reports                          | Press 4 for Case Inquiry          |
| Enter Case #                     | Enter Case Number                 |
|                                  | Wait for report to print          |

| <b>VOID</b>  |   |
|--|---|
| <b>Terminal Display</b>                                    | <b>Provider Action</b>                                      |
| SWIPE CARD to Begin  | Press F4  |
| User Password:   | Enter Password and press Enter                              |
| Provider Options   | Press 2 for Void Transactions                               |
| Enter Tran #   | Enter Transaction Number<br>Press Enter<br>Wait for receipt |
| Printing Complete  |   |
| <b>All voids must be made during the back swipe period</b> |   |

| <b>STORE AND FORWARD (SAF)</b>                             |                                |
|--|--------------------------------|
| <b>Terminal Display</b>                                    | <b>Provider Action</b>         |
| SWIPE CARD to Begin  | Press F4                       |
| User Password:   | Enter Password and press Enter |
| Provider Options   | Press 3 for Send SAFs          |
| <b>All SAF should be sent within the backswipe period.</b> |                                |

**New Jersey Department of Human Services  
Division of Family Development (DFD)  
E-Child Care**



**New Jersey  
ECC Provider Helpline  
1-877-516-5776**