

# Parent Declaration Form – Early Years Funding Sept 2017 – March 2018

## 1. Child's Details (Please Print)

<b>2 Year Old Early Years Funding (Please tick)</b>		n/a		<b>3 &amp; 4 Year Old Early Years Funding (Please tick)</b>					
<b>Child's Legal Family Name</b>						<b>Child's Legal Forename(s)</b>			
<b>Name by which the child is known (if different from above)</b>									
<b>Date of Birth</b>						<b>Male / Female</b>			
<b>Address</b>					<b>Post Code</b>				
<b>Document of proof of DOB type (e.g. Birth Certificate, Passport)</b>						<b>Document recorded by (name of staff member)</b>			
						For office use only			
<b>Date document recorded (dd/mm/yyyy)</b>			For office use only			<b>Ethnic Code (see below information for codes to be used)</b>			
						For office use only			
White – British (WBRI)		Gypsy / Roma (WROM)		Indian (AIND)		Black – African (BAFR)		Information not yet obtained (NOBT)	
White – Irish (WIRI)		White and Black Caribbean (MWCA)		Pakistani (APKN)		Any other Black background(BOTH)		Any other mixed background (MOTH)	
White – Other (WOTH)		White and Black African (MWBA)		Bangladeshi (ABAN)		Chinese (CHNE)		Black Caribbean (BCRB)	
Traveller of Irish Heritage (WIRT)		White and Asian (MWAS)		Any other Asian background (AOTH)		Any other ethnic group (OOTH)		Refused (REFU)	

## 2. Additional details for eligible 3 & 4 year olds claiming 30 hours free childcare

<b>Parent / carer National Insurance Number</b>				<b>30 Hours eligibility code (e.g. 12345678912)</b>			
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## 3. Setting and attendance details (15 or 30 Hours for 2, 3 and 4 year olds)

- If a child is sharing their 'free' childcare across more than 1 provider, the parents / carers need to agree and complete this Declaration Form with each setting your child attends for their early education entitlement in order to ensure that funding is paid fairly between them.
- Your child can attend a maximum of two sites in a single day.

**Autumn Term 2017**

My child is attending **THIS** school / childcare provider:

Name of school / childcare provider		Please enter total free entitlement hours attended per day					Total number of hours per week	Number of weeks per year (e.g. 38, 45, 51)
		Mon	Tues	Wed	Thurs	Fri		
<b>Marine Park First School</b>	15 Hours (Eligible 2 year olds only)	n/a	n/a	n/a	n/a	n/a	n/a	n/a
	Universal 15 Hours (All 3 and 4 year olds)	3	3	3	3	3	15	38 (maximum)
	Additional 15 Hours* – only complete if your 3 / 4 year old child is eligible for the 30 Hours entitlement							

\*Please note: you will lose these hours, following a 'grace period', if you stop being eligible for the 30 Hours

My child is also attending the following **additional** childcare provider other than Marine Park First School

Name of additional childcare provider or school		Please enter total free entitlement hours attended per day					Total number of hours per week	Number of weeks per year (e.g. 38, 45, 51)
		Mon	Tues	Wed	Thurs	Fri		
<b>A</b>	15 Hours (Eligible 2 Year olds only)	n/a	n/a	n/a	n/a	n/a	n/a	n/a
	Universal 15 Hours (All 3 and 4 year olds)							
	Additional 15 Hours* – only complete if your 3 / 4 year old child is eligible for the 30 Hours entitlement							

\*Please note: you will lose these hours, following a 'grace period', if you stop being eligible for the 30 Hours

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		Mon	Tues	Wed	Thurs	Fri		
<b>B</b>	15 Hours (Eligible 2 Year olds only)	n/a	n/a	n/a	n/a	n/a	n/a	n/a
	Universal 15 Hours (All 3 and 4 year olds)							
	Additional 15 Hours* – only complete if your 3 / 4 year old child is eligible for the 30 Hours entitlement							

\*Please note: you will lose these hours, following a 'grace period', if you stop being eligible for the 30 Hours

## Spring Term 2018

My child is attending THIS school / childcare provider:

Name of school/ childcare provider		Please enter total free entitlement hours attended per day					Total number of hours per week	Number of weeks per year (e.g. 38, 45, 51)
		Mon	Tues	Wed	Thurs	Fri		
<b>Marine Park First School</b>	<b>15 Hours (Eligible 2 Year olds only)</b>	n/a	n/a	n/a	n/a	n/a	n/a	n/a
	<b>Universal 15 Hours (All 3 and 4 year olds)</b>	3	3	3	3	3	15	38 (maximum)
	<b>Additional 15 Hours*</b> – only complete if your 3 / 4 year old child is eligible for the 30 Hours entitlement							

\*Please note: you will lose these hours, following a grace period, if you stop being eligible for the 30 Hours

My child is also attending the following additional childcare provider other than Marine Park First School

Name of additional childcare provider or school		Please enter total free entitlement hours attended per day					Total number of hours per week	Number of weeks per year (e.g. 38, 45, 51)
		Mon	Tues	Wed	Thurs	Fri		
<b>A</b>	<b>15 Hours (Eligible 2 Year olds only)</b>	n/a	n/a	n/a	n/a	n/a	n/a	n/a
	<b>Universal 15 Hours (All 3 and 4 year olds)</b>							
	<b>Additional 15 Hours*</b> – only complete if your 3 / 4 year old child is eligible for the 30 Hours entitlement							

\*Please note: you will lose these hours, following a grace period, if you stop being eligible for the 30 Hours

My child is also attending the following additional childcare provider other than Marine Park First School

Name of additional childcare provider or school		Please enter total free entitlement hours attended per day					Total number of hours per week	Number of weeks per year (e.g. 38, 45, 51)
		Mon	Tues	Wed	Thurs	Fri		
<b>B</b>	<b>15 Hours (Eligible 2 Year olds only)</b>	n/a	n/a	n/a	n/a	n/a	n/a	n/a
	<b>Universal 15 Hours (All 3 and 4 year olds)</b>							
	<b>Additional 15 Hours*</b> – only complete if your 3 / 4 year old child is eligible for the 30 Hours entitlement							

\*Please note: you will lose these hours, following a grace period, if you stop being eligible for the 30 Hours

#### 4. Early Years Pupil Premium (EYPP) Registration Form – 3 & 4 year olds ONLY (Please Print)

The Early Years Pupil Premium (EYPP) is an additional sum of money paid to early education / childcare providers for children of families in receipt of certain benefits. This funding will be used to enhance the quality of their early years experience by improving the teaching and learning and facilities and resources with the aim of impacting positively on your child's progress and development. For more information please speak to your early education / childcare provider.

In order for the Local Authority to check eligibility and provide this additional funding to your child's setting, please provide your name, National Insurance number and date of birth below.

<b>Child's Full Name</b>	
<b>Parent/Carer Legal Surname</b> (as per Birth Certificate and Benefit Documents)	
<b>Parent/Carer Legal Forenames</b> (as per Birth Certificate and Benefit Documents)	
<b>Date of Birth (parent / carer)</b> (dd/mm/yyyy)	
<b>National Insurance Number / NASS Number</b>	

Three and four year olds who currently access free early education will attract EYPP funding if they meet at least one of the following from the criteria below:

<b>a. The child's parents are in receipt of one of the following benefits:</b>	<b>TICK</b>
Income Support	
Income-based Jobseeker's Allowance	
Income-based Employment and Support Allowance	
Support under part VI of the Immigration and Asylum Act 1999	
The guaranteed element of State Pension Credit	
Child Tax Credit (provided they're not also entitled to Working Tax Credit and have a annual gross income of no more that £16,190)	
Working Tax Credit run-on, which is paid for 4 weeks after they stop qualifying for Working Tax Credit	
Universal Credit	
<b>b. Looked After Children looked after for 1 day or more</b> (the Local Authority will identify any Looked After Children who are eligible for EYPP funding)	
<b>c. Children who have been adopted from care</b>	
<b>d. Children who have left care under special guardianship order or residence order</b>	

## 5. Disability Access Fund Declaration – 3 & 4 year olds ONLY

Three and four year old children who are in receipt of child Disability Living Allowance and are receiving the free entitlement are eligible from the Disability Access Fund (DAF). DAF is paid to the child's early years setting as a fixed annual rate of £615 per eligible child.

<b>Is your child eligible and in receipt of Disability Living Allowance (DLA)?</b>	YES	NO
<b>If your child is splitting their free entitlement across two or more providers please nominate the main setting where the local authority should pay the DAF</b>		

## 6. Declaration

I (PRINT Name) .....

of (PRINT Address) .....

confirm that the information I have provided above is accurate and true. I understand and agree to the conditions set out in this document and I authorise

PRINT Provider Name(s)..... to claim free entitlement funding as agreed above on behalf of my child.

In addition, I also agree that the information I have provided can be shared with the local authority and Department for Education, who will access information from other government departments to confirm my child's eligibility and enable this provider to claim Early Years Pupil Premium (EYPP) or Disability Access Fund (DAF) on behalf of my child.

Term	Parent / Guardian Signature	Date	Provider Signature	Date
Autumn Term Sept – Dec				
Spring Term Jan – Mar				