

Parent Declaration Form: Early Years, Disability Access and Free School Meal funding



Please use black ink and write in block capitals.

All three and four year olds are eligible for a funded early education place of 15 hours a week for 38 weeks per academic year (term time only) or the equivalent of 570 hours stretched over the whole year.

Some two year olds are eligible for 15 hours per week per academic year subject to certain criteria – see ‘**Parents Notes**’.

Some three and four year olds will be eligible for 30 hours per week funded early education place (term-time or equivalent stretched). This form collects information to assess which funding you are eligible for including Free School Meals, Pupil Premium and Disability Access Fund

Parent or Carer details: the person receiving the benefit must be listed.

Title:	Legal Forename:	Legal Family name:											
Previously known Family name:													
Address:													
		Postcode:											
Date of birth: / / (i.e. DD/MM/YYYY)	Telephone:												
Mobile phone number:		Are you a lone parent: Y/N											
Email address:													
National Insurance (NI) or National Asylum Support Service (NASS) number:													
<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>													
NI - 9 digits (2 letters, 6 numbers 1 letter). NASS - first 9 numbers only													
30 hours eligibility code (e.g. 50045678912):													
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24U eligibility code (for two year old funding):													
Relationship to child/ren named on this claim:													

If you have joint parental responsibility please complete the details below:

Title:	Legal Forename:	Legal Family name:									
Previously known Family name:											
Address:											
		Postcode:									
Date of birth: / / (i.e. 31/08/1970)	Tel/Mob:										
NI or NASS number:	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>										
Relationship to child/ren named on this claim:											

Legal Forename:				Legal Family name:			
Date of Birth: / / (i.e. DD/MM/YYYY)			Gender M <input type="checkbox"/> F <input type="checkbox"/>		Ethnicity code: (refer to parents notes)		
Address:							
Postcode:				Language spoken:			
Document proof of DOB (e.g. Birth Certificate, Passport)					Document recorded by (name of staff member)		Name: Date:
Additional information**:		DLA <input type="checkbox"/>	EHCP <input type="checkbox"/>	LAC <input type="checkbox"/>	Adopted <input type="checkbox"/>	Residence Order / Special Guardianship <input type="checkbox"/>	
** If you have ticked any of the above your Provider will ask you to produce evidence							
Main Provider/School:							
Proposed startdate:				Proposed hours per week:			
Please complete section below regarding hours per week including any other Providers/schools who may also be claiming funding.							

- You need to complete this Declaration Form for each setting / school your child attends for their early education entitlement in order to ensure that funding is paid fairly between them
- If your child attends more than 1 setting you can decide how to allocate your funded hours.
- If your child is in receipt of DLA one Provider may be eligible for Disability Access Fund – to help us allocate this please nominate your main Provider: _____

Setting / School Name(s)		Please enter total free entitlement hours attended per day					Total number of hours per week	Number of weeks per year (e.g. 38, 51)
		Mon	Tues	Wed	Thu	Fri		
A								
B								
C								
Total Daily Free Hours Attended								
Start Date/s								

If you are eligible for your extended free entitlement (additional 15 hours for 3 & 4 Year olds), please record these hours in the box below:

Setting / School Name(s)		Please enter total free entitlement hours attended per day					Total number of hours per week	Number of weeks per year (e.g. 38, 51)
		Mon	Tues	Wed	Thu	Fri		
A								
B								
C								
Total Daily Free Hours Attended								
Start Date/s								

Parent/Carer/Guardian with legal responsibility declaration

I am eligible for (Please refer to 'Parents Notes' and tick)

- ☐ 15 hours for two year olds (see note 1)
- ☐ 30 hours for three and four year old (see note 2)
- ☐ 15 hours for three and four year old (see note 3)
- ☐ Disability Access Fund i.e. in receipt of DLA (see note 4)
- ☐ Early Years Pupil Premium (see note 5)

I agree that the information given above is correct, and I give permission for Shropshire Council to check my eligibility status with the relevant benefit providers, and hold my details to make further checks including Early Years Pupil Premium, Disability Access Fund and Free School Meals. I agree to inform you immediately if my benefit stops or changes.

If eligible I agree to complete Shropshire Council registration form (two year olds only)

Autumn Term 2023

Parent Signed:	Date:
Childcare Provider Signed: Print Name:	Date:

Spring Term 2024

Parent Signed:	Date:
Childcare Provider Signed: Print Name:	Date:

Summer Term 2024

Parent Signed:	Date:
Childcare Provider Signed: Print Name:	Date:

Data privacy: The Data Protection Act 1998 puts in place certain safeguards regarding the use of personal data by organisations, including the Department for Education (DfE), local authorities and schools. The Act gives rights to those (known as data subjects) about whom data is held, such as pupils, their parents and teachers. This includes:

- the right to know the types of data being held;
- why it is being held; and
- to whom it may be communicated.

Should you have any concerns in relation to how your information or the information relating to your child/ren is being or will be used, please contact your provider or nef@shropshire.gov.uk

Retention: The declaration forms need to be retained by the provider for a minimum of 12 months after the child has left the setting.

Parent Notes:

Full details of all of the current Early Years Entitlements and the relevant eligibility criteria for each are available on the following website: www.childcarechoices.gov.uk

Note 1: To be eligible for 15 hours for my two-year-old I must be in receipt of an eligibility confirmation letter issued by my Local Authority.

Note 2: To be eligible for 30 hours for my three-or-four-year-old I must have confirmed my entitlement via the Childcare Choices website and be issued with the relevant Unique Reference Number (URN).

Note 3: All three-and-four-year-olds are entitled to 15 hours early education. If you are not entitled under note 1 or note 2 you can choose to pay for additional hours yourself and you may get support from the Government through Tax/Universal Credit or through Childcare Vouchers visit www.childcarechoices.gov.uk

Note 4: Childcare providers are able to claim additional funding for those children who are in receipt of Disability Living Allowance (DLA). You will be required to provide a copy of your up to date Disability Living Allowance award letter, in order for your childcare provider to claim this additional funding. DAF is paid to the child's setting as a fixed annual rate.

<https://www.gov.uk/disability-living-allowance-children/overview>

Note 5: Early Years Pupil Premium (EYPP) is an additional sum of money paid to childcare providers for children of families in receipt of certain benefits including:

- Income Support/ Income Based JSA, Income related ESA
- Child Tax Credit (but not Working TC) and combined income of less than £16,190
- Universal Credit
- The Guarantee element of State Pension Credit
- Support under Part VI of the Immigration and Asylum Act
- Child in receipt of DLA
- Child is Looked After, has left care through Adoption, Special Guardianship or Residence Order

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 childcare provider.

Child Ethnicity codes:

Ethnicity Category	Code	Ethnicity Category	Code
White –British	WBRI	Asian or Asian British - Pakistani	APKN
White – Irish	WIRI	Asian or Asian British - Bangladeshi	ABAN
Traveller of Irish Heritage	WIRT	Asian or Asian British - Any other Asian Background	AOTH
Gypsy / Roma	WROM	Black or Black British - Caribbean	BCRB
White - Any Other White Background	WOTH	Black or Black British - African	BAFR
Mixed - White and Black Caribbean	MWBC	Black or Black British - Any Other Black background	BOTH
Mixed - White and Black African	MWBA	Chinese	CHNE
Mixed - White and Asian	MWAS	Any Other Ethnic Group	OOTH
Mixed - Any Other Mixed background	MOTH	Refused	REFU
Asian or Asian British - Indian	AIND	Information Not Yet Obtained	NOBT