

Parental Agreement and Funding Claim Form

This form must be retained by the early years provider for 7 years after the last term of funding has been completed								
Funding Claim for: Under 2's (please tick)	s 2 Year	3	& 4 Ye	ar				
1: Child's Details – this section is mandatory apart from the child's middle name								
Childs Legal First Name	M	liddle Name/s						
Childs Legal Surname								
Date of Birth	G	ender	Male	☐ Fe	emale			
SEN Provision	SEN Provision None SEN Support EHC Plan (please tick)							
Ethnic Group								
Address		Postcode						
2: Document Check - this section is	mandatory; please ensure you red	cord the type of evid	dence se	een				
Type of Documentary Proof of DOB Evidence	Passport / Birth Certificate / Red Health Book	Date Document Recorded:						
Document Recorded by (Name of Staff Member):		Staff Signature						
3: Parent / Carer Details - must be	e completed for an EYPP application	on or for Working Pa	arent En	titleme	ent			
	Parent / Carer 1 Parent /			Carer 2 (Optional)				
Legal First Name:								
Legal Surname:								
Date of Birth:								
NI or NASS Number:								
4: Child's Eligibility – Please tick all entitlements that apply. If the child is two and eligible for both entitlements, you should use the 'Families in receipt of Additional Support' (FRAS) first.								
2 Year Funding for Families	s in Receipt of Additional Sup	pport (FRAS):						
Child Reference Number – from TMBC Letter								
Universal Entitlement for 3 & 4 Year Olds								
Universal Entitlement for 3 & 4 Year Olds								
☐ Working Parent Entitlement for children from 9 months to 4 years old:								
Eligibility Code – 11 digit code issued by HMRC Date Code Validated								
5: Disability Access Fund (DAF) - A copy of your child's DLA award is required								
DAF is used to help providers to make reasonable adjustments in their settings, either to support an individual child, or for the benefit of all children attending the setting.								
Is your child entitled to the Disability Living Allowance (DLA)? Ticking yes will enable your chosen provider to receive the DAF.								
6: Early Years Pupil Premium (EYPP)								
Early Years Pupil Premium (EYPP) is paid to childcare providers to provide extra support for your child. EYPP can be used to improve teaching and learning facilities and resources to impact positively on your child's progress and development. Ticking yes to the questions may enable your chosen provider to receive the EYPP.								
Your provider will discuss the eligibility criteria with you. If you feel you meet the criteria, do you wish to apply for EYPP for your child?								

Section 7, 7.1 and 7.2 - For Completion by the Childcare Provider

Please use all 3 sections of this form - once all 3 terms have been used **or** the child moves to a new age range, a new Parental Agreement and Funding Claim form must be completed and signed by the Parent / Carer / Guardian with legal responsibility

7: Provider and Attendance Details – all sections that apply are mandatory											
1st Term of Funding											
 You need to agree and complete this Declaration Form with each setting your child attends for their early education entitlement to ensure that funding is paid fairly to each of them. Your provider should help you to complete this section. Your child can attend a maximum of two settings in a single day and if your child attends more than one setting the local authority will distribute the funding appropriately between the settings. 											
Spring		Summer			Autı]	Year	20	
Funded Hours	S –				_	ded Hours	s –				
Start Date: Please enter t	he total free	entitlemen	t hours :	attended n	-	date:		Total			No.of
1 loade circuit	ino total free (Mon	Tues	Wed	Thurs	Fri	hours Weekly Charge		Funded Weeks this term	
Total funded ho	urs attended pe	r day								N/A	
Total extra (cha	geable) hours p	er day									
Grand total dai	ly hours attend	led									
My child is als	so attending	the followi	ng settir	ng for fund	led hou	ırs:		1			
Setting Name	:		Mon	Tues	Wed	Thurs	Fri	Tot	tal hours week	per	
									WOOK		
7.1: Provider and Attendance Details continued - all sections are mandatory 2nd Term of Funding											
If the funding attendance pattern as detailed in Section 7 remains the same, please complete this section for Term 2. If the funding attendance pattern has changed, please complete and sign the Parental Agreement and Funding Claim Form - Addendum											
Spring		Summer			Aut	umn]	Year	20	
Funded Hours	S -			Hours -			No. of funded				
Start Date: Weeks this Term: Name of Staff Member:											
Staff Signatur	·e:						Date	ə:			
7.2: Provider and Attendance Details continued - all sections are mandatory											
3rd Term of Funding											
If the funding attendance pattern as detailed in Section 7 remains the same, please complete this section for Term 3. If the funding attendance pattern has changed, please complete and sign the Parental Agreement and Funding Claim Form - Addendum											
Spring		Summer			Aut	umn			Year	20	
Funded Hours	5 -		Funded End dat	Hours -		<u>'</u>	_	. of fun	ded s Term:		
Name of Staff	Member:										
Staff Signatur	e:						Date	e:			

8. Additional Charges - provider to complete									
Government funding is intended to deliver 15 or 30 hours a week of free, high quality, flexible early education and care. The 15 or 30 hours must be able to be accessed free of charge to parents; that is, there must not be any mandatory charges for parents in relation to the free hours.									
Government funding is not intended to cover the costs of meals, other consumables, additional hours or additional services. Providers can charge for consumables, meals and snacks, extra activities and additional hours provided they are not mandatory charges or a condition of accessing a place.									
The costs of chargeable extras should be published on provider websites or, where they do not have any website, on local authority Family Information Services. These should be clear, up-to-date and easily accessible to parents, to enable parents to make an informed choice of provider.									
Have any additional charges been coparent?	nfirmed in	writing to	the	Yes		No		N/A	
If you have answered No, please deta	il any add	itional cha	rges belov	w:					
	Mon	Tues	Wed	Thurs	Fri		Total W	eekly Cl	harge
Additional charges for consumables or additional charges per day									
Provide details of the charges made for consumables and additional services and itemised details of what these charges relate to:									

9: Data Privacy

The Data Protection Act 2018 (the Act) puts in place certain safeguards regarding the use of personal data by organisations, including the Department for Education (DfE), local authorities and schools and other early education providers. The Act gives rights to those about whom data is held (known as data subject), 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 disclosed

Should you have any concerns relating to how your information or the information relating to your child/ren is being or will be used, please contact your provider or Tameside MBC. Please note that information about whether a child is in receipt of Disability Living Allowance is, under the Act, Special Category Data, which should be handled appropriately.

Providers are asked to pay particular note to advice from the Information Commissioner's Office on holding personal data including sensitive personal data available at: https://ico.org.uk/for-organisations/uk-gdpr-guidance-and-resources/training-videos/handling-more-sensitive-information/

The TMBC Access Privacy notice can be located at TMBC Access Privacy Notice

10: Parent / Carer / Guardian with Legal Responsibility Declaration - this section is mandatory

Tameside MBC is collecting your data for the purposes of checking your eligibility for the free entitlements, Early Years Pupil Premium (EYPP) or Disability Access Fund (DAF), in accordance with its statutory functions under the Childcare Acts 2006 and 2016, and the School Standards and Framework Act 1998.

Declaration: I (insert Parent / Carer / Guardian full name):						
of the address given above in Section 1. 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:						
Name of provider:						
T 1 6 00 10 16 0 10 10 10 10 10 10 10 10 10 10 10 10 1						

To claim free entitlement funding as agreed above on behalf of my child and:

- I understand that the data collected in this form will be shared with my chosen provider and local authority. It
 may also be shared with the Department for Education, other Local Authorities (if my address is outside
 Tameside) and other government departments to confirm eligibility for the funding detailed in the document
 where applicable
- My provider has explained the free entitlement funding, and detailed any Additional Charges
- I understand that I cannot claim early Years Funding with a childminder who is related to my child
- I agree with the pattern of funded hours detailed in Section 7 of this form. My child will attend regularly throughout the term and will not be absent without good reason. I will notify my provider if my child is absent. If I want to alter my child's hours or pattern of attendance, I will check with my provider who will inform the Council where it affects the free entitlement funding
- I understand that my eligibility for Working Parents Entitlement may change, and should I become ineligible at any point in the year, my entitlement may be reduced to 15 hours or cease after the Grace Period where applicable.
- I understand that if I change provider within the term, the Free Entitlement Funding may not necessarily follow my child, and I agree to pay the fees with the new provider until the start of the next term
- The Council is under duty to protect the public funds it administers and will use the information you have provided on this form for the prevention and detection of fraud. We may share this information with other bodies responsible for auditing or administering public funds for these purposes. I understand that if I make a false or incorrect declaration on this form that leads to an overpayment or to a duplicate claim, I will be liable to return any overpayment of funded provision and any resulting administration or legal costs

Parent / Car	er / Guardian with legal responsibility	Childcare Provider		
Signed		Signed		
Print Name		Print Name		
Date		Date		

If at any stage you wish to withdraw consent for the eligibility checks detailed above, please contact your child's early years provider or school who must then inform Tameside MBC