

# Parental declaration form

## Early education funding for under twos, two, three and four year olds



### Part 1 – child details

|                          |                      |
|--------------------------|----------------------|
| Legal first name         | <input type="text"/> |
| Middle names (s)         | <input type="text"/> |
| Legal last name          | <input type="text"/> |
| Preferred last name      | <input type="text"/> |
| Address                  | <input type="text"/> |
| Post code                | <input type="text"/> |
| Date of birth DD/MM/YYYY | <input type="text"/> |

|                                        |                                        |
|----------------------------------------|----------------------------------------|
| Gender (male/female)                   | <input type="text"/>                   |
| Ethnicity (see codes below)            | <input type="text"/>                   |
| <b>AOTH</b> Any Other Asian Background | <b>WBRI</b> British                    |
| <b>BOTH</b> Any Other Black Background | <b>ASRO</b> Sri Lankan Other           |
| <b>OOTH</b> Any Other Ethnic Group     | <b>MWAS</b> White / Asian              |
| <b>ABAN</b> Bangladeshi                | <b>WIRI</b> Irish                      |
| <b>CHNE</b> Chinese                    | <b>BCRB</b> Black Caribbean            |
| <b>REFU</b> Refused                    | <b>MWBC</b> White / Black Caribbean    |
| <b>AIND</b> Indian                     | <b>WIRT</b> Traveller - Irish Heritage |
| <b>MWBA</b> White / Black African      | <b>BAFR</b> African                    |
| <b>WOTH</b> Any Other White Background | <b>NOBT</b> Information Not Obtained   |
| <b>APKN</b> Pakistani                  | <b>WROM</b> Roma / Roma Gypsy          |
| <b>MOTH</b> Any Other Mixed Background |                                        |

**Your child's eligibility – If your child is two years old and eligible for both the Early learning for 2 year olds and working families entitlements, you must use your 15 Early learning hours first.**

|                                                                                                 |
|-------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> Entitlement for Early learning for 2 year olds                         |
| <input type="checkbox"/> Working family entitlement for children from nine months to four years |
| <input type="checkbox"/> Universal entitlement for three and four year olds                     |
| Early learning for 2 year olds code <input type="text"/>                                        |
| Working family's eligibility code (11-digit number) <input type="text"/>                        |

### Parent/guardian details

|                                               |                      |
|-----------------------------------------------|----------------------|
| Full name                                     | <input type="text"/> |
| Date of Birth                                 | <input type="text"/> |
| National insurance number                     | <input type="text"/> |
| National Asylum Support Service (NASS) Number | <input type="text"/> |

### Part 2 – claim details

|                                                                       |                                                             |
|-----------------------------------------------------------------------|-------------------------------------------------------------|
| 1st Childcare Provider                                                | <input type="text"/>                                        |
| Number of Early learning for 2 year old funded hours claimed per week | <input type="text"/>                                        |
| Number of working families funded hours claimed per week              | <input type="text"/>                                        |
| Number of universal 3&4 year old funded hours claimed per week        | <input type="text"/>                                        |
| Term Time (38wks) <input type="text"/>                                | Stretched Place (no of weeks per year) <input type="text"/> |

|                                                                       |                                                             |
|-----------------------------------------------------------------------|-------------------------------------------------------------|
| 2nd Childcare Provider                                                | <input type="text"/>                                        |
| Number of Early learning for 2 year old funded hours claimed per week | <input type="text"/>                                        |
| Number of working families funded hours claimed per week              | <input type="text"/>                                        |
| Number of universal 3&4 year old funded hours claimed per week        | <input type="text"/>                                        |
| Term Time (38wks) <input type="text"/>                                | Stretched Place (no of weeks per year) <input type="text"/> |

**If your child has just transferred from another Provider and was accessing funded hours, please complete:**

|                                                                                       |                                                                                         |                                                             |
|---------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------|-------------------------------------------------------------|
| Childcare provider <input type="text"/>                                               | Term Time (38wks) <input type="text"/>                                                  | Stretched Place (no of weeks per year) <input type="text"/> |
| Number of funded Early Education hours claimed per week (max 15) <input type="text"/> | Number of Extended Early Education hours claimed per week (max 15) <input type="text"/> |                                                             |

### Part 3 – early years pupil premium (voluntary registration) – for all eligible children

**Q1** Adopted children, children subject to a special guardianship order or a child arrangement order. Has your child left local authority care through adoption, or subject to a residence order or special guardianship order?

☐ Yes ☐ No

(If yes, you will need to provide a copy of the relevant court order)

**Q2** Are you in receipt of Universal Credit?

Full eligibility criteria can be found at: [www.gov.uk/get-extra-early-years-funding](http://www.gov.uk/get-extra-early-years-funding)

☐ Yes ☐ No ☐ Parent does not wish to disclose

**Only complete this section if you have answered YES to Q2**

Please complete the following information for the main benefit holder so that we can check eligibility for EYPP.

### Parent/guardian details

|                                               |                      |
|-----------------------------------------------|----------------------|
| Full name                                     | <input type="text"/> |
| Date of Birth                                 | <input type="text"/> |
| National insurance number                     | <input type="text"/> |
| National Asylum Support Service (NASS) Number | <input type="text"/> |

## Part 4 – Disability Access Fund (DAF)

All funded children who are in receipt of Disability Living Allowance (DLA) and are accessing early education funding are eligible for DAF. DAF is paid to the child's setting as a fixed annual rate of £938 per eligible child.

☐

Please tick if your child is in receipt of Disability Living Allowance.

(If yes, you will need to provide a copy of the DLA award letter to your provider who will share with Portsmouth City Council to verify eligibility for the Disability Access Funding).

If your child is sharing their entitlement across two or more providers, please nominate the main setting where the local authority should pay the DAF.

Provider to contact the Local Authority to process the claim for Disability Access Funding

## Part 5 – parental consent and declaration (please read all information before signing)

I declare that:

- I am the parent/legal guardian of the child named on this form
- The above detailed information relating to my child is complete and accurate
- I have provided evidence of the identity and date of birth of my child and proof of address to the setting (i.e. copy of birth certificate, utility bill)
- I understand the criteria for my child to be eligible for Early Education funding, Disability Access Fund (DAF) and Early Years Pupil Premium (EYPP)
- I consent to the information I have provided being passed to Portsmouth City Council to enable entitlement to the EYPP and/ or working families entitlement and /or the two year old entitlement for families receiving additional support to be verified using the DFE online Eligibility Checking Service and shared with my provider.
- I consent to the information I have provided on DLA being passed to Portsmouth City Council to enable confirmation of DAF and shared with my provider
- I am not claiming more than the funded hours my child is entitled to.
- I understand that 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.
- I understand that my provider may charge a reasonable refundable deposit to secure my child's place where they are only taking their funded hours. This must be paid back to parents within a reasonable period after taking up their place (but can be retained if the child does not take up the place without sufficient notice).
- I understand that it is my responsibility to re-validate my working families eligibility code every three months
- I understand that I will be liable to repay, in full, any grant paid by the council if hours claimed exceed more than the maximum entitlement for the term, or I claim funded hours after my grace period ends.
- I must inform my Childcare Provider(s) of any changes to the provision my child takes
- I will give 4 weeks' written notice to my provider if I no longer require my early education funded hours
- I declare that whilst the notice period is in force my child will not access funded hours at another provision
- My child is not attending school in a Year R place
- I will re-sign this form each term and when there are any changes.

|                          |  |  |  |
|--------------------------|--|--|--|
| Funding Period:          |  |  |  |
| Print Parent/Carer Name: |  |  |  |
| Parent/Carer Signature:  |  |  |  |
| Provider Signature:      |  |  |  |
| Date:                    |  |  |  |

Portsmouth City Council is the Data Controller of any personal information you provide in connection with your application for funding. The information helps us to confirm your eligibility and will only be used to administer your application and for audit purposes. Portsmouth City Council will need to confirm your eligibility for Early Years Pupil Premium and/or working families expanded entitlement through the DFE online Eligibility Checking System.

- It will usually only be shared with your Early Years Setting but we may be required by law to disclose it to other Local Authority departments and third parties (such as the Police, Audit Commission, Department for Work and Pensions or Department for Education) for the purposes of preventing or detecting crime, fraud or apprehending or prosecuting offenders.
- The information you submitted about yourself as part of this application will be kept securely until the end of the current financial year and for a further 6 years after that.
- You have the right to request your information be deleted; however, this may affect your eligibility for the funding should it be awarded. Your child's details will be kept for as long as they are a 'pupil' within the Portsmouth Local Authority Area.
- For full details about how Portsmouth City Council collects and uses personal data and who to contact should you have any questions about the information we hold about you, please see the following links:

**Data Protection privacy notice** - [www.portsmouth.gov.uk/services/council-and-democracy/transparency/data-protection-privacy-notice](http://www.portsmouth.gov.uk/services/council-and-democracy/transparency/data-protection-privacy-notice)

**Freedom of Information** - [www.portsmouth.gov.uk/services/council-and-democracy/transparency/freedom-of-information](http://www.portsmouth.gov.uk/services/council-and-democracy/transparency/freedom-of-information)

**Pupil privacy notice** - [www.portsmouth.gov.uk/wp-content/uploads/2020/07/Privacy-Notice-Local-Authority-pupil.pdf](http://www.portsmouth.gov.uk/wp-content/uploads/2020/07/Privacy-Notice-Local-Authority-pupil.pdf)

**Cookie and privacy policy** - [www.portsmouth.gov.uk/services/council-and-democracy/policies-and-strategies/cookie-and-privacy-policy](http://www.portsmouth.gov.uk/services/council-and-democracy/policies-and-strategies/cookie-and-privacy-policy)