****

**Early Years Funding and Pupil Premium**

Parent/Carer Declaration – Summer 2024 (April-August)

**2-year-old entitlement** – including existing funded twos AND two-year-olds from working families from April 2024

**Universal entitlement** -All three- and four-year-olds are entitled; eligible date of birth is the only criterion

**Extended entitlement** – Three- and four-year-olds of working parents may be eligible (criteria apply)

Before completing this form, please make sure you have read the ***Information for parents Summer 2024*** Leaflet from your provider, or go to the Council webpages [www.cambridgeshire.gov.uk/eyf](http://www.cambridgeshire.gov.uk/eyf).

**Applying for Early Years Funding**

This form and proof of your child’s identity and age is a mandatory part of the process for claiming Early Years Funding. Your early years provider will be able to support you in your claim and in completing this form.

**Please note you must not change any of the wording or add your own logo to the parental declaration form.**

|  |  |  |  |
| --- | --- | --- | --- |
| Name of provider |  | Ofsted URN No |  |

**1) Child details**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Legal Forename in full (no nicknames or middle names) |  | | | Address and post code | | | | |
| Legal Surname |  | | |
| Name by which child is known if different to above |  | | | | Gender | Male / Female | | |
| Date of birth |  | Proof of identity (birth certificate, passport etc) | | | | | |  |
| National Insurance Number (*not required for universal hours*) |  | | 2yrs Authorisation Code | | | |  | |
|  |  | | Eligibility code (working parent entitlements) | | | |  | |

**Child’s ethnic group (please tick appropriate category from the choice below)**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| White British | **WBR** |  | White/Black Caribbean | **MWBC** |  | Indian | **AIND** |  |
| White Irish | **WIRI** |  | White/Black African | **MWBA** |  | Pakistani | **APKN** |  |
| Traveller of Irish Heritage | **WIRT** |  | White and Asian | **MWAS** |  | Bangladeshi | **ABAN** |  |
| Gypsy/Roma | **WROM** |  | Any other mixed background | **MOTH** |  | Any other Asian background | **AOTH** |  |
| Any other White background | **WOTH** |  | Black Caribbean | **BCRB** |  | Chinese | **CHNE** |  |
| Refuse to provide | **REFU** |  | Black African | **BAFR** |  | Any other background | **OOTH** |  |
| Info not obtained | **NOBT** |  | Any other Black background | **BOTH** |  |  |  |  |

**2) Siblings** if your family has other children who are 0-5 years old living in the home, please provide the name and date of birth below.

|  |
| --- |
|  |

**3) Parent Details**

The information in this section is needed to make eligibility or validation checks for extended entitlement, Early Years Pupil Premium, and/or Disability Access Funding. Completing this section and signing this form gives us permission to use your details to make these checks. Your personal information will be kept by your provider in accordance with their Data Protection policies.

**Extended/Expanded Entitlement (including new two-year-old working parent entitlement)** Checks are made against HMRC data throughout the year regarding your continued eligibility. You must reconfirm your details to HMRC every three months to confirm eligibility. If your eligibility lapses, only HMRC can reverse this decision.

**Disability Access Funding (DAF)** If your child is in receipt of Disability Living Allowance (DLA) please select Yes below. Let your provider have a copy of the letter confirming the child’s entitlement to DLA to access DAF. If your child is attending more than one provider, you will need to nominate only one setting where you wish the DAF to go. Your provider will give you information about the DAF.

|  |  |  |
| --- | --- | --- |
| Is your child in receipt of Disability Living Allowance? | Yes / No |  |
| If your child is eligible, who will be your Nominated Provider? |  | |

**Early Years Pupil Premium (EYPP)** Eligible children will be funded through the provider to support the learning and development needs of the child. If you qualify on an economic basis, information must be the eligible parent/carer’s details. **It is optional to provide this information as not required to receive funding**.

|  |  |  |
| --- | --- | --- |
| ***Economic Check details*** | **Parent/Carer Details Applicant 1** | **Parent/Carer Details Applicant 2** |
| Parent/carer’s title |  |  |
| Parent/carer’s full name |  |  |
| National Insurance or NASS No. |  |  |
| Parent/carer’s Date of Birth |  |  |
| Parent/carer’s telephone No. |  |  |
| Address including post code  (if different from child’s) |  |  |

***Other qualifying criteria for EYPP***

Please tick and complete if the child meets one of these criteria. Your provider may ask to see legal documentation so that they can obtain the funding for your child.

|  |  |
| --- | --- |
| * Currently in care, state which Local Authority 🡆 |  |
| * Previously in care in England or Wales | |
| * Has been adopted from care in England or Wales | |
| * Has left care under a special guardianship order or residence order in England or Wales | |

**4) Setting and attendance details** You will need to agree and complete a form with each setting your child attends. Your child may attend multiple providers but no more than a maximum of two sites in a day. Please refer to the table below to see the maximum hours that can be claimed in each funding period:

|  |  |  |
| --- | --- | --- |
|  | **Non-stretched** | **Stretched** |
| Autumn | 210 (14 weeks x max 15hours) | 182.4 (16 weeks x max 11.4 hours) |
| Spring | 165 (11 weeks x max 15 hours) | 148.2 hours (13 weeks x max 11.4 hours) |
| Summer | 195 (13 weeks x max 15 hours) | 239.4 hours (21 weeks x max 11.4 hours) |
| Total | **38 weeks @ 15 hours = 570 hours** | **50 weeks @ 11.4 hours = 570 hours** |

Please provide the number of hours you will claim as funded hours for *both* universal and extended entitlement with each childcare provision your child attends. You and your provider must note any changes you make to your claim/s throughout the year using the *Supplementary claim sheet* if more space is needed.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | This provision | 2nd additional provision | 3rd additional provision | Total hours (add all provisions) |
| **Summer** | | | | |
| Universal Hours |  |  |  |  |
| Extended Hours |  |  |  |  |

Provider 2 – name of provision

Provider 3 – name of provision

2nd Additional provision – name of setting

3rd Additional provision – name of setting

**5) Declaration**

In signing this form, I am confirming I have read the Information leaflet which gives details of the Early Years Funding for parents/carers. I agree with the conditions of the Early Years Funding and Pupil Premium and the use of my data. I understand that:

* my provider is not obliged to end the claim without reasonable notification and negotiation unless there are exceptional circumstances. Ask to see the Amendments Guidance for further information.
* my funded place may be withdrawn if my child does not attend regularly unless there are special circumstances, and these are agreed with the provider.
* **Data Protection**: We collect your details to process your application for Early Years Funding and to contact you about related EY funding issues and tasks in accordance with The Early Years Funding Agreement.

In addition, we can be required to share information with our partners, for example health organisations and Children and Families Centres, to improve the wellbeing of children in Cambridgeshire area as required by the Children Act 2004. Information shared between partner organisations is proportionate and only given when it is necessary to help those partner organisation services with their legal obligations.

We are required to provide statistical data to the Department for Education. We also use statistical data for our own internal research, statistical analysis, or statistical surveys to help manage our service provision, and also share data with academic institutions or independent researchers with a legitimate need for information for their research.

All Early Years Funding application data is stored securely and maintained in accordance with the Data Protection Act. Cambridgeshire online systems that are publicly available for entry of personal application data are regularly independently tested to assess risk of penetration and to guard against unauthorised entry for access to personal or any other data. This includes ensuring that the username and password access meets industry standards.

*Further information about how we collect and use data, and your rights around this, can be found on our Privacy page on our website:* [*www.cambridgeshire.gov.uk/privacy*](http://www.cambridgeshire.gov.uk/privacy) ***.*** *Our Data Protection Officer can be contacted via* [*data.protection@cambridgeshire.gov.uk*](mailto:data.protection@cambridgeshire.gov.uk)

I confirm that the information is true to the best of my knowledge. I understand that any false or incorrect information could lead to funding being withdrawn or reimbursed. Please be aware that to certify false information could be viewed as making a false claim.

Signature of Parent/carer with legal responsibility Date

Name (printed) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship to child

For provider use only

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Type of identity seen for child | |  | | | |
| Checked by whom? |  | | | Date seen |  |
| Legal Name of child as shown on document | | | Date of birth as shown on document | | |
| Notes | | | | | |