

# Parent Declaration for Early Education Funding (EEF)

All sections should be completed to claim Early Education Funding (EEF) for this child. This form is to be retained by the provider and should NOT be returned to Staffordshire County Council.

#### **Provider details**

#### Name of provider:

#### Address of provider (incl postcode):

| Childs details   |  |                 |                            |  |  |  |
|--|--|-----------------|----------------------------|--|--|--|
| Childs name:   |  |                 | DOB*:                      |  |  |  |
|  | *I have provided proof of my childs<br>DOB (i.e Birth cert. or other evidence) |                 |                            |  |  |  |
| Address (incl postcode):   |  |                 | Gender:                    |  |  |  |
|  |  |                 |                            |  |  |  |
| Ethnicity-tick one option (This is mandatory to generate information for the Early Years Census) |  |                 |                            |  |  |  |
| British  | Irish  | -               | White Eastern European     |  |  |  |
| Gypsy Roma   | Traveller of Iri   | ish Heritage    | White European             |  |  |  |
| Any other white background   | Chinese  |                 | Bangladeshi                |  |  |  |
| White & Black Caribbean  | White & Black  | African         | African                    |  |  |  |
| White & Asian  | Asian  |                 | Any other white background |  |  |  |
| Indian   | Any other Asia   | an background   | Pakistani                  |  |  |  |
| White & Indian   | White & Black  | Caribbean       | White & Pakistani          |  |  |  |
| Caribbean  | Black & any ot   | ther ethnic grp | Any other mixed background |  |  |  |
| Any other Black background   | Any Other eth  | nic background  | Not obtained               |  |  |  |
| Eligibility code for 15 funded hrs for 2   |  |                 |                            |  |  |  |
| year olds (Think2) (if applicable)   |  |                 |                            |  |  |  |
| 11 digit reference code for 30 funded  |  |                 |                            |  |  |  |
| hours (up to additional 15 hrs) (if applicable)  |  |                 |                            |  |  |  |

| Parents(s) details                 |                                       |  |  |  |
|------------------------------------|---------------------------------------|--|--|--|
| Parent 1                           | Parent 2 (if applicable)              |  |  |  |
| Full name                          | Full name                             |  |  |  |
| NINO (or NASS)                     | NINO (or NASS)                        |  |  |  |
| DOB                                | DOB                                   |  |  |  |
| Address<br>(if different to child) | Address<br>(if different to parent 1) |  |  |  |
| Tel no:                            | Tel no:                               |  |  |  |

## **Entitlement Guidelines**

- EEF hours can be claimed between 6am and 8pm
- Parents can access the funded entitlement at a maximum of 2 sites in any one day
- If applicable, parents must reconfirm their eligibility with HMRC every 3 months to access the Extended Hours entitlement for 3 and 4 year olds
- The Local Authority reserves the right to suspend funding if the provision does not meet the required quality as rated by Ofsted
- Depending on how many funded hours have been claimed in the previous two terms, the annual entitlement could be reached before the end of the third term in the year; check with your childcare provider.





# Additional Supplements

Some children are entitled to extra grants based on Government criterion. These grants go directly to the child's provider but can only be accessed if information required to check eligibility is shared.

**Disability Access Fund (DAF)** - Three and four year old children in receipt of Disability Living Allowance (DLA) and in receipt of EEF are eligible for DAF.

Is this child in receipt of DLA? Y / N - If 'Yes' the provider will need to apply online via the Early Years Portal and a copy of the child's most recent DLA award letter will need to accompany the application.

**Early Years Pupil Premium (EYPP) -** Some three and four year old children are entitled to a premium which the provider can use to support their learning and development (please discuss criterion with provider.) Details are required for the Council to conduct an eligibility check. (Please note-if the Council already has details on record this check may already have been undertaken).

# Signatures

# This form must be signed by parent/carer to give consent to share personal information in line with GDPR compliance and for the purpose of claiming EEF and other additional supplements. THIS IS NOT A CONTRACT.

I have read the Privacy Notice and understand that any information shared with Staffordshire County Council will be stored in accordance with Data Protection Legislation.

I certify that the information given on this form is accurate to the best of my knowledge.

I understand that if I give false information or fail to declare my full circumstances, Staffordshire County Council may withdraw the funding for my child and take criminal proceedings against me.

I understand that if my child does not consistently attend for the agreed amount of funded hours, the funding could be reduced or removed in full, meaning that I could incur childcare costs with my provider.

Sections for hours and weeks may need to be completed once parent and childcare provider have agreed the funded hours that will be claimed.

| AUTUMN TERM PERIOD (1 <sup>st</sup> September-31 <sup>st</sup> December)<br>14 weeks or Stretch 16 weeks |  |                          |                            |         |                   |
|--|--|--------------------------|----------------------------|---------|-------------------|
| Parent full name   |  |                          |                            |         |                   |
| Parent signature (or person with PR)   |  |                          |                            |         |                   |
| Date   |  |                          |                            |         |                   |
| Provider manager/staff full name   |  |                          |                            |         |                   |
| Provider manager/staff signature   |  |                          |                            |         |                   |
| Date   |  |                          |                            |         |                   |
| No. of Universal funded<br>hrs per week (max 15)?  |  |                          | o. of Extend<br>s per week |         |                   |
| No. of weeks the funded<br>hours are to be accessed<br>this term?  |  | St                       | retch or ter               | m time? |                   |
| Claiming EEF hours at<br>another provider? Y/N   |  | If Y name<br>of provider |                            |         |                   |
| Total number of universal hours claimed in autumn term   |  |                          |                            |         |                   |
| Total number of extended hours claimed in autumn term  |  |                          |                            |         |                   |
|  |  |                          |                            |         | <b>WINVESTORS</b> |





## SPRING TERM PERIOD (1<sup>st</sup> January-31<sup>st</sup> March) 11 weeks or Stretch 12 weeks

| 11 weeks or Stretch 12 weeks                                      |  |  |  |  |
|---|--|--|--|--|
| Parent full name  |  |  |  |  |
| Parent signature (or person with PR)                              |  |  |  |  |
| Date  |  |  |  |  |
| Provider manager/staff full name                                  |  |  |  |  |
| Provider manager/staff signature                                  |  |  |  |  |
| Date  |  |  |  |  |
| No. of Universal funded<br>hrs per week (max 15)?                 | No. of Extended funded<br>hrs per week (max 15)? |  |  |  |
| No. of weeks the funded<br>hours are to be accessed<br>this term? | Stretch or term time?                            |  |  |  |
| Claiming EEF hours at<br>another provider? Y/N                    | If Y name<br>of provider                         |  |  |  |
| Total number of universal hours claimed in spring term            |  |  |  |  |
| Total number of extended hours claimed in spring term             |  |  |  |  |

| SUMMER TERM PERIOD (1 <sup>st</sup> April-31 <sup>st</sup> August)<br>13 weeks or Stretch 20 weeks |  |  |  |  |
|--|--|--|--|--|
| Parent full name   |  |  |  |  |
| Parent signature (or person with PR)   |  |  |  |  |
| Date   |  |  |  |  |
| Provider manager/staff full name   |  |  |  |  |
| Provider manager/staff signature   |  |  |  |  |
| Date   |  |  |  |  |
| No. of Universal funded<br>hrs per week (max 15)?  | No. of Extended funded<br>hrs per week (max 15)? |  |  |  |
| No. of weeks the funded<br>hours are to be accessed<br>this term?                                  | Stretch or term time?                            |  |  |  |
| Claiming EEF hours at<br>another provider? Y/N   | If Y name<br>of provider                         |  |  |  |
| Total number of universal hours claimed in summer term   |  |  |  |  |
| Total number of extended hours claimed in summer term  |  |  |  |  |





# **Privacy Notice**

Information that you supply to your childcare provider will be shared with other organisations including Staffordshire County Council. The Local Authority will use the information you provide in order to:-

- Deliver our services and understand your needs
- Maintain and update your customer records or contact details
- Contact you where necessary in relation to the provision of this service
- Obtain your opinion and feedback about the services we provide
- · Ensure that we fulfil our legal obligations

Your information may also be shared with other Local Authorities, Childcare Providers and the Department for Education for audit funding requirements or where there is a legal basis to do so.\*

Information on how Staffordshire County Council process your information can be found here:-

https://www.staffordshire.gov.uk/Your-council-and-democracy/Request-andaccess-information/Your-personal-information/Overview.aspx

\*If your child stops attending and your provider cannot make contact with you, your information may be shared with the Health Visiting Service to ensure the wellbeing of your family.

## Your rights

Under the Data Protection legislation, you have a right to make a request for a copy of some or all of your personal information we hold about you. We want to make sure that your personal information is accurate and up to date. You may ask us to correct or remove information you think is inaccurate. Please help us to make sure that we have identified you correctly by letting us know when you change address or name and tell us if any of your information we hold is wrong.

Your data will be held and processed in line with Data Protection Legislation and General Data Protection Regulation. If you feel that your data is being handled incorrectly, you should speak to your childcare provider. If you are not satisfied with the response you receive, you can contact the Information Commissioners Office.

#### How to contact the Information Commissioners Office

Further information about Data Controller Registration (Notification) the Data Protection Principles and raising concerns\_about how information is handled is available from the Information Commissioners Office (ICO).

Contact details for the ICO are as follows:-

The Information Commissioner

Information Commissioner's Office

Wycliffe House, Water Lane,

Wilmslow, Cheshire, SK9 5AF

Telephone: 0303 123 1113 (local rate)

Internet: <u>www.ico.org.uk</u>

