



## Childcare entitlements parental declaration form

### Step 1: Your child's details- parents/carers to complete

|                                                                                                             |  |
|-------------------------------------------------------------------------------------------------------------|--|
| <b>Child's Forename(s):</b>                                                                                 |  |
| <b>Child's Surname(s):</b>                                                                                  |  |
| <b>Name by which the child is known (if different from above):</b>                                          |  |
| <b>Date of Birth:</b> You will need to show your childcare provider evidence of your child's date of birth. |  |
| <b>Sex:</b>                                                                                                 |  |
| <b>Child's first language:</b>                                                                              |  |
| <b>Address:</b>                                                                                             |  |
| <b>Child's Ethnicity- Please tick from the below options</b>                                                |  |

|                 |                          |                          |                          |                            |                          |
|-----------------|--------------------------|--------------------------|--------------------------|----------------------------|--------------------------|
| Bangladeshi     | <input type="checkbox"/> | Traveller/Irish Heritage | <input type="checkbox"/> | Any other Asian background | <input type="checkbox"/> |
| Black African   | <input type="checkbox"/> | White Asian              | <input type="checkbox"/> | Any other Black background | <input type="checkbox"/> |
| Black Caribbean | <input type="checkbox"/> | White/Black African      | <input type="checkbox"/> | Any other Mixed background | <input type="checkbox"/> |
| Chinese         | <input type="checkbox"/> | White/Black Caribbean    | <input type="checkbox"/> | Any other White background | <input type="checkbox"/> |
| Indian          | <input type="checkbox"/> | White British            | <input type="checkbox"/> | Any other Ethnic group     | <input type="checkbox"/> |
| Pakistani       | <input type="checkbox"/> | White Eastern European   | <input type="checkbox"/> | Information not obtained   | <input type="checkbox"/> |
| Roma/Roma Gypsy | <input type="checkbox"/> | White Irish              | <input type="checkbox"/> |                            |                          |

### Step 2: Your details-parents/carers to complete

| Parent / Carer/Guardian 1                                                        | Parent / Carer/Guardian 2                                                        |
|----------------------------------------------------------------------------------|----------------------------------------------------------------------------------|
| Forename:                                                                        | Forename:                                                                        |
| Surname:                                                                         | Surname:                                                                         |
| Date of Birth:                                                                   | Date of Birth:                                                                   |
| National Insurance number or Asylum Support Reference Number (previously NASS):  | National Insurance number or Asylum Support Reference Number (previously NASS):  |
| Parental responsibility Yes <input type="checkbox"/> No <input type="checkbox"/> | Parental responsibility Yes <input type="checkbox"/> No <input type="checkbox"/> |

## Step 3: Your child's eligibility- parents/carers to complete

To be completed with assistance from your chosen provider(s). Please tick from the **three** options below which entitlement you will be using. If your child is two years old and eligible for both entitlements, tick the box 'Entitlement for children from 2 years old receiving some additional forms of support' for the first 15 funded hours, then tick the working parent box for the second 15 hours, making sure to include both codes.

☐ **1. Entitlement for children from 2 years old in families receiving additional forms of support:**

- If parents/carers live in England and are in receipt of certain benefits,
- If a child is looked after by a local authority, has an EHC plan, gets Disability Living Allowance or has left care under an adoption order, special guardianship order or a child arrangements order.
- If parent/carers immigration status states 'no recourse to public fund's'. Must live in England and the family's household income must be no more than:  
£26,500 for families outside of London with one child  
£34,500 for families within London with one child  
£30,600 for families outside of London with two or more children  
£38,600 for families within London with two or more children  
You cannot have more than £16,000 in savings or investments.

Early Years Pupil Premium Funding (EYPP) will automatically be checked for any family receiving this criterion. Please see further details below

|                                                                      |  |
|----------------------------------------------------------------------|--|
| <b>Enter your 2-year-old funding code in format<br/>XX-XXXX-XXXX</b> |  |
|----------------------------------------------------------------------|--|

☐ **2. Working parent entitlement for children from 9 months old.**

Parents apply for a code via childcare choices before 31<sup>st</sup> March (for an April start), 31<sup>st</sup> August (for a September start), 31<sup>st</sup> December (for a January start).

|                                                                                                                                               |  |
|-----------------------------------------------------------------------------------------------------------------------------------------------|--|
| <b>Enter your working parent entitlement code in<br/>the format 50012345678 (11 digits). Codes could<br/>start in 114, 400, 401, 501, 502</b> |  |
|-----------------------------------------------------------------------------------------------------------------------------------------------|--|

☐ **3. Universal entitlement for 3- and 4-year-olds. No code needed.**

**Your provider could receive extra funding for your child if certain criteria are met, please opt in by ticking the below boxes if they apply :**

**The Disability Access Fund (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? Ticking yes will enable your chosen provider to receive the DAF.

☐ Yes ☐ No

|                                                                                                                                                              |                                                          |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------|
| Please select if you have given your provider an up-to-date copy of your child's most recent Disability Living Allowance letter.                             | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| If your child is splitting their free entitlement across two or more settings, please nominate the main setting where the local authority should pay the DAF |                                                          |

**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.

1. Are you in receipt of any of the following benefits, and if yes then please specify which

☐ Yes ☐ No

- ☐ [Income Support](#)
- ☐ Income-based [Jobseeker's Allowance](#)
- ☐ Income-related [Employment and Support Allowance](#)
- ☐ support under [part VI of the Immigration and Asylum Act 1999](#)
- ☐ the guaranteed element of [State Pension Credit](#)
- ☐ [Child Tax Credit](#), provided they are not also entitled to [Working Tax Credit](#) and have an annual gross income of no more than £16,190
- ☐ [Working Tax Credit](#) run-on, which is paid for 4 weeks after they stop qualifying for working tax credit
- ☐ [Universal Credit](#) (household income must be less than £7,400 a year after tax, not including any benefits - this is assessed on up to 3 of the parent's most recent universal credit assessment periods) - further guidance on checking eligibility is set out below

2. Is your child currently looked after by a local authority/have they ever been looked after by a local authority in England or Wales?

☐ Yes ☐ No

|                                                                                                                                                                                                                              |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| <b>EYPP can only be paid on the first 15 hours of funding. If your child is splitting their free entitlement across two or more settings, please nominate the main setting where the local authority should pay the EYPP</b> |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|

## Step 4: Setting and attendance details- parents/carers to complete

You need to agree and complete this declaration form with each setting your child attends for their funded 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. No session can be longer than 10 hours. To note: the maximum number of funded hours your child can receive is:

- 1) for 2-year-olds in families receiving additional forms of support: 15 hours a week for 38 weeks of the year = 570 hours. This can be combined with the below working parent entitlement to a maximum of 30 hours per week for 38 weeks of the year. You must apply for both types of funding codes.
- 2) for all 3 and 4YOs: 15 hours a week for 38 weeks of the year = 570 hours. This can be combined with the below working parent entitlement to a maximum of 30 hours per week for 38 weeks of the year. = 1140 hours.
- 3) for children aged from 9 months+ of eligible working parents: 30 hours a week for 38 weeks of the year = 1140 hours.

Please note some settings offer a 'stretched funding offer'. This means that the maximum amount of funding per year can be 'stretched' over more than 38 weeks. For example, if your child is offered funding for 50 weeks of the year and the maximum term time only funded hours your child can receive is 15 hours per week, then your total funded hours per week will be 11.4. The calculation for this would be 15 funded hours x 38 weeks = 570 hours per year, then 570 hours / 50 weeks = 11.4 funded hours per week.

Your child cannot attend more than 15 or 30 funded hours per week over fewer than 38 weeks of the year. However, a parent can choose a setting that is open for fewer than 38 weeks of the year and therefore receive 15 or 30 hours a week during fewer weeks. Please fill out the grid below and ask your provider to explain in more detail if you are unsure.

| Setting name:                                   | Mon | Tues | Wed | Thurs | Fri | Total no. of hours per week | Total weekly charge | No. of weeks per year (e.g. 38,45,51) |
|-------------------------------------------------|-----|------|-----|-------|-----|-----------------------------|---------------------|---------------------------------------|
| Total funded entitlement hours attended per day |     |      |     |       |     |                             | n/a                 |                                       |
| Total extra (chargeable) hours per day          |     |      |     |       |     |                             |                     |                                       |
| Total daily hours attended                      |     |      |     |       |     |                             |                     |                                       |

**To fill in if your child attends more than one setting:**

If your child is splitting their funded entitlement across more than one setting, please nominate their main setting where EYPP (if eligible) and DAF (if eligible) will be paid:

.....

**Total funded entitlement hours attended per day**

|               | Mon | Tues | Wed | Thurs | Fri | Total no. of hours per week |
|---------------|-----|------|-----|-------|-----|-----------------------------|
| Setting name: |     |      |     |       |     |                             |
| Setting name: |     |      |     |       |     |                             |

**Step 5 Provider to complete with parent:**

Additional charges: 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.

\*Providers can set out consumable charges on a weekly or monthly basis rather than breaking them down daily in the grid below. Please use box of extra space to show this

|                                                                  | Mon | Tues | Wed | Thurs | Fri | Total weekly charge |
|------------------------------------------------------------------|-----|------|-----|-------|-----|---------------------|
| Additional charges for consumables or additional charges per day |     |      |     |       |     |                     |

Provide details of the charges made for consumables, additional services and itemised details of what these charges relate to:



## Step 6: Parent/Carer/Guardian with legal responsibility declaration

Declaration: I (name of parent/carers/guardian) .....

of (address) .....

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/s)

.....

to claim early education funding as agreed above on behalf of my child. I understand that the data collected in this form will be shared with my chosen provider and local authority. I understand that if I have given any misleading information on this declaration or have claimed more than the allowed entitlement, I may be asked to reimburse the provider(s) or my child's place may be withdrawn.

| Parent/Carer/Guardian with legal responsibility | Childcare provider |
|-------------------------------------------------|--------------------|
| Signed:                                         | Signed:            |
| Print name:                                     | Print name:        |
| Date:                                           | Date:              |

Oxfordshire County Council is collecting your data for the purposes of checking your eligibility for the funded 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.

**Data Protection** 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, local authorities, schools and other early education providers. The Act gives rights to those about whom data is held (known as data subjects), 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 Oxfordshire County Council. 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/>

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## Provider Declaration – To be completed by the provider

This declaration is your evidence of a claim and must be retained for seven years to complete claim forms and for future reference, including auditing. Please note you may be asked by Oxfordshire County Council to produce evidence of a claim at any time.

It is a requirement of the EYFS for providers to 'enable a regular two-way flow of information with parents and/or carers, and between providers, if a child is attending more than one setting' (section 3.68 'Information and records'). By signing the below statement, you are agreeing to share information with the provider named by the parent, if the parent has indicated they wish to split funding.

When a child who is, or becomes, eligible for Early Education Funding registers with your setting, you must obtain proof of identity and age, and therefore eligibility. Please indicate documents seen by completing the relevant box below. Early Education Funding must be used strictly in accordance with the Early Education Funding Terms and Conditions.

Parents should only be asked to re-sign their parental declaration if the information on the current form changes. For example, if:

- they want to reduce the number of hours they take up
- change the days their child attends
- change which settings their child attends

|                                                                                           |                                            |                                   |                                |
|-------------------------------------------------------------------------------------------|--------------------------------------------|-----------------------------------|--------------------------------|
| <b>Documentary proof type</b>                                                             | Birth Certificate <input type="checkbox"/> | Passport <input type="checkbox"/> | Other <input type="checkbox"/> |
| <b>Name of staff member that has checked the proof:</b>                                   |                                            |                                   |                                |
| <b>Provider validated eligibility code within the portal before funded place offered?</b> | Yes <input type="checkbox"/>               | No <input type="checkbox"/>       |                                |

### Provider Declaration

|                    |  |
|--------------------|--|
| <b>Print name:</b> |  |
| <b>Signed:</b>     |  |
| <b>Job title:</b>  |  |
| <b>Date:</b>       |  |