

Parent Agreement Form – Funded Places (2-4yr olds)

To be completed by the parent/carer if the provider is claiming funding Early Years Free Entitlement for the child named below:

Section 1: Child Details	
Setting/Provider Name:	
Child's First Name(s):	
Child's Surname:	
Date of Birth:	
Gender:	<input type="checkbox"/> Male <input type="checkbox"/> Female
Ethnicity Code:	
Child's Full Address:	
Post Code:	
Date started at setting:	
Proof of child's identity and age provided by parent/carer <input type="checkbox"/>	

Section 2: Carer Details

Information in this section will be used by Haringey Council to check for eligibility to claim additional funding from central government. It will be not used for any other purpose, and will remain confidential.

Title	Parent/Carer Surname	Parent/Carer First Name	Date of Birth (DD/MM/YYYY)	National Insurance Number or NASS Reference Number										
Miss	Example - Happytown	Joan	07/04/1982	Z	F	3	9	2	1	6	8	A		

Note:

If a parent/carer has indicated that their child belongs to one of the following eligible groups, please tick the box below to confirm you have seen a copy of the paperwork:

- Has been adopted from care
- Has left care through special guardianship arrangement
- Has left care and is subject to a child arrangement order

Parent Agreement Form – Funded Places (2-4yr olds)

Section 3: Early Years Free Entitlement Details

This funding is for a maximum of 38 weeks a year only, and a maximum of 15hrs per week can be claimed over a minimum of 2days. Providers can agree with Parents/carers to stretch this offer over the year – but it's not mandatory. Complete the appropriate section for your circumstances below;

Part A - Claiming 15 hours per week of Early Years Free Entitlement

I confirm that my child is attending the childcare provider/setting named in **Section 1**, and receiving _____ (insert number of hours) hours per week of Early Years Free Entitlement.

Hours/Time	Monday	Tuesday	Wednesday	Thursday	Friday
Number of Hours					
Times of day					

I confirm my child does not have an Early Years Free Entitlement place with another PVI provider, school nursery or another provider in another Local Authority.

Signed: _____ (Parent/Carer)

Date:

Part B - Claiming 15 hours per week of Early Years Free Entitlement from another provider

I confirm that my child will also be receiving _____ hours (insert number of hours) of Early Years Free Entitlement at the provider/school below:

Hours/Time	Monday	Tuesday	Wednesday	Thursday	Friday
Number of Hours					
Times of day					

Provider Name: _____
Haringey _____

Local authority if not in

Provider Address:

Signed: _____ (Parent/Carer)

Date:

Funding period - Please tick the relevant box below and sign and date the term attending

Autumn Term

Parent Signature: _____

Date:

Parent Agreement Form – Funded Places (2-4yr olds)

Spring Term

Parent Signature: _____

Date:

Summer Term

Parent Signature: _____

Date:

Section 4: Guidance/Declaration for parents/carers

Please read and sign the terms and conditions below:

I agree to the following terms and conditions:

1. The information contained on this form is accurate and true and if any of the information changes I will inform the provider in writing
2. I understand that the provider will deliver my child the above agreed entitlement without any charge to me
3. I understand the provider will charge me for any additional services that my child uses beyond the funded entitlement e.g. extra hours
4. I understand that my child's attendance should be regular and that I will inform the provider of my child's absence if they are unwell
5. I understand that I will be required to give the appropriate notice to the provider of my intention to move my child to another setting or leave
6. I understand that my NI or NASS number will be checked against the national database to confirm eligibility for a two year old funded place and Early Years Pupil Premium Funding for a three and four year old child
7. I understand that my details will be held securely, in accordance with the principles of the Data Protection Act 1998.

Parent/Carer's Signature: _____

Date:

