



PARENTAL AGREEMENT: FREE EARLY EDUCATION FOR TWO, THREE AND FOUR YEAR OLDS

This agreement is for the Local Authority to determine funding to the named early years provider for free early education hours for the named child. A copy should be retained by the early years provider.

1. CHILDS DETAILS

I am applying for: 2 Year Old Entitlement [] 3&4 Year Old Entitlement []

Childs Legal Family Surname		Childs legal Forename(s)	
Name by which child is known (if different from above)			
Date of birth		Male/Female	
Address		Postcode	
Documentary Proof of Childs ID (e.g. passport/birth certificate) – copy retained		Document recorded by (name of staff member) and date recorded	

2. TWO YEAR OLD APPLICATIONS ONLY

I (parent) confirm that I have received confirmation that the above named child is eligible for a 2 year old funded place	
Please enter the eligibility code (e.g. TYOF 123456D)	

3. PARENT DETAILS: These details are required to determine eligibility for additional funding to support your child’s learning and development that may be provided to your chosen provider. This is called the Early Years Pupil Premium. For more information regarding how this funding is used please speak to your chosen provider.

Parent/Carer 1 with Parental responsibility			
Title (Mr/Mrs/Miss etc)		Forename	Surname
Relationship to child (Mother/ Father etc)		National Insurance Number (or NASS number)	
Contact Number		Date of Birth	

Parent/Carer 2 with Parental responsibility			
Title (Mr/Mrs/Miss etc)		Forename	Surname
Relationship to child (Mother/ Father etc)		National Insurance Number (or NASS number)	
Contact Number		Date of Birth	

4. ADDITIONAL DETAILS FOR 30 HOUR ENTITLEMENT

30 Hour Eligibility Code	
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5. PROVIDER AND ATTENDANCE DETAILS

You will need to complete this declaration form with each provider your child attends (if you are using more than one provider) for their early education entitlement, so that funding can be accurately paid between them. You cannot use more than two providers.

Provider Name		Free hours attended per day					Hours per week	Weeks per year
		Mon	Tues	Weds	Thurs	Fri		
A								
B								
Total Daily Hours attended								

6. DISABILITY ACCESS FUND

Three and four year old children who are in receipt of child Disability Living Allowance and are receiving the three and four year old free early education entitlement are eligible for the Disability Access Fund (DAF). DAF is paid to the child's early years provider as a fixed annual sum of £615 per eligible child to support their access, learning and development. You may be asked to provide evidence of your child's eligibility for Disability Living Allowance

Is your child eligible and in receipt of Child Disability Living Allowance? (please tick)	Yes		No	
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If your child is attending more than one provider for their free hours, please nominate the provider you wish to receive this funding (it can only be paid to one) :

Nominated Provider (name) _____

7. PARENTAL DECLARATION

- I confirm that the information I have provided is accurate and true
- I confirm to the terms and conditions set out in this document
- I authorise the providers named in this document to claim free entitlement funding, Early Years Pupil Premium or the Disability Access Fund on behalf of my child
- I understand that I cannot claim more than 570 hours per annum for 2 year old entitlement and/or the universal 15 hour 3&4 year old entitlement
- I understand that I cannot claim more than 1140 hours per annum if I am eligible for the 30 hour entitlement for 3&4 year olds. I further understand that my eligibility may change and should I become ineligible at any point in the year my entitlement would reduce to the universal 15 hour entitlement
- I accept that I may only change my chosen provider during a term in exceptional circumstances (moving area, safeguarding or other such issues etc). Should I wish to move for reasons other than exceptional circumstance I must give the provider 4 weeks' notice during which I cannot seek funding at an alternative provider unless the current provider agrees to waive this condition.
- I authorise Rochdale Council to share and exchange the information I have provided with your specified early years providers, other Local Authorities (if my address is outside Rochdale) and the Department for Education who may access information from other government departments to confirm eligibility for the funding streams detailed in this document
- I authorise Rochdale Council to use this information to check my child's continuing eligibility for Free School Meals (at statutory school age) and share this information with the school my child will attend and the Local Authorities Revenues and Benefits Service.
- I understand that all early years providers, local authorities and government departments are bound by the Data Protection Act and will not reveal information held on my child to a third party unless the law allows us to. For further information about how the LA or Department for Education store and use this information please go to the following websites;
- - <http://www.rochdale.gov.uk/council-and-democracy/data-protection-and-foi/data-protection-act.aspx>
 - <http://www.education.gov.uk/researchandstatistics/datadatam/privacynotices/a0064374/pn>
 - <http://www.education.gov.uk/researchandstatistics/datadatam/b00212337/datause>

If at any stage you wish to withdraw consent for the checks detailed above to be made please contact your child's early year's provider or school who must then inform the Local Authority of this.

Signed:	(Parent/Carer) Print name:	Date:
Signed	(for Provider) Print Name:	Date:

8. ETHNIC BACKGROUND

The Local Authority is required to compile statistics regarding take up of free entitlements by children/families from differing ethnic backgrounds. The information below will help us to do this.

BACKGROUND	ETHNICITY	CODE	Please tick
ASIAN OR BRITISH ASIAN	Indian	AIND	
	Pakistani	APKN	
	Bangladeshi	ABAN	
	Any other Asian background	AOTH	
BLACK OR BLACK CARIBBEAN	Caribbean	BCRB	
	African	BAFR	
	Any other Black background	BOTH	
MIXED	White and Black Caribbean	MWBC	
	White and Black African	MWBA	
	White and Asian	MWAS	
	Any other mixed background	MOTH	
OTHER	Chinese	CHNE	
	Any other ethnic background	OOTH	
WHITE	White British	WBRI	
	White Irish	WIRI	
	White Traveller of Irish Heritage	WIRT	
	White Gypsy/Roma	WROM	
	Any other white background	WOTH	
Childs spoken language (please write)			
I do not wish an ethnic background to be recorded			