

EARLY YEARS ENTITLEMENT (EYE2) NEW STARTER/PARENTAL DECLARATION FORM V2019_2

Setting Name:

This form is an agreement between the parent and Bath and North East Somerset Council for the Government's Early Years Entitlement to be paid as requested below to the setting stated above. If your child leaves this setting during the term, the setting is under no obligation to transfer funds to any other setting

1. Child information

Child's Legal Family Name:	Child's Legal Forename(s):	
Name by which the child is known (if different from above):		
Date of birth:	Gender:	Ethnicity code:
Full Address (including postcode):		
Provider signature to verify Birth evidence seen:		

Ethnicity Codes	
A1	White British
A2	White Irish
A3	White other – please specify
B1	Mixed White & Black Caribbean
B2	Mixed White & Black African
B3	Mixed White & Asian
B4	Mixed other – please specify
C1	Indian
C2	Pakistani
C3	Bangladeshi
C4	Asian other – please specify
D1	Caribbean
D2	African
D3	Black other – please specify
E1	Chinese
E2	South East Asian
F	Any other – please specify
G	Prefer not to say

Additional codes:	2 year		30 hr	
Additional information for 30 hr entitlement verification				
Parent NI No.		Please enter the details for the parent who applied for the funding		
Parent Surname				

2. Setting and attendance details

You need to complete and agree the following details with each provider your child attends for their entitlement of 15 hours or the extended entitlement. Your child can attend a maximum of two settings in a single day.

Funding start date:	
----------------------------	--

Setting Name:	Total hours attended (week)	Total hours claimed (week)	Total hours claimed (term)	AYR or TTO

Total funded hours claimed at <u>all providers</u> for the term:	
---	--

Max. total hours which can be claimed with all providers		
	TTO Uni (Ext)	AYR Uni (Ext)
Autumn 2019	210 (420)	192 (384)
Spring 2020	165 (330)	144 (288)
Summer 2020	195 (390)	234 (468)

3. Additional information attached

Please tick if you have attached the following application:

Early Years Pupil Premium Application (Appendix 1)

4. Data Privacy

We collect and use your personal data to support our statutory duty to: ensure sufficient, sustainable early years and childcare places, make available information, advice, support and training to support inclusive and high quality provision, to narrow the attainment gap, and to moderate and monitor the Early Years Foundation Stage

The Early Years Service privacy notice can be found on the following link:

<https://beta.bathnes.gov.uk/council-privacy-notice/early-years-service-privacy-notice>

5. Declarations

Your provider will be asked to share information about the progress of children in receipt of additional funding to show how this has made a positive difference.

I have been provided with a copy of the Department for Education's Privacy Notice outlining how the information collected on this form will be administered and shared. In addition the information that you have provided will be shared with your Children's Centre Early Childhood Team, and I have been provided with details about my local Children's Centre, how they use my information, and the services available to me.

If you wish to be registered with your local Children's Centre Early Childhood Team please cross this box.

You can opt in at any time by contacting the Local Authority at the address at the bottom of the page.

Parent/Guardian/Carer with legal responsibility		Childcare Provider	
Signed		Signed	
Print Name		Print Name	
Date		Date	



Setting Name:

Appendix 1

Early Years Pupil Premium Application Form

The Early Years Pupil Premium (EYPP) is an additional sum of money paid to childcare providers for children of families in receipt of certain benefits (please see list of eligible benefits on our website). This funding will be used to enhance the quality of their early years experience by improving the teaching and learning and facilities and resources, with the aim of impacting positively on your child's progress and development. For more information please speak to your childcare provider.

If you believe that your child may qualify for the EYPP, please provide the following information for the **main benefit holder** to enable the local authority to confirm eligibility:

Parent/Carer First Name		Parent/Carer Surname	
Parent/Carer Date of Birth		Parent/Carer National Insurance or NASS Number	
Child First Name		Child Surname	
Parent/Carer signature			