**PARENTAL AGREEMENT FOR THE PROVISION OF**

**EARLY EDUCATION FUNDING (EEF) for TWO, THREE & FOUR YEAR OLD CHILDREN**

1. **Childcare Provider Details**

|  |  |
| --- | --- |
| **Childcare Provider/School Name:** | Bowerham |

1. **Child Details**

|  |  |  |  |
| --- | --- | --- | --- |
| **Legal Family Surname:** | **Elbana** | **Legal Forename(s):** | Jude Husamaldean |
| **Name by which the child is known:**(if different from above):  |  |
| **Date of Birth:** | 03/08/2020 | **Male/Female** | **Male** |
| **Home Address:** | 29 Gerrad stLancaster | **Post Code:** | **LA1 5LZ** |
| **Documentary proof of DOB seen:** e.g. Birth Certificate/Passport | Birth Certificate | **Document recorded by:** (name of staff member) |  |
| **Date document recorded:**  |  | **Child ethnicity:** |  |

1. **EEF Placement Start Date …………………………………………………………………………….…………**
2. **Additional details for children claiming the extended 15 hours EEF places** **or 2 Year old funding:**

|  |  |
| --- | --- |
| **30 hours eligibility code:**e.g. 12345678912 – 11 digits |  |
| **Parent/Carer National Insurance Number:** |  |
| **2 Year old Voucher Code or eligibility reference number:** |  |

1. **Early Years Pupil Premium (EYPP) for Three and Four Year Old Children**

Some three and four year olds are entitled to EYPP which is paid to the childcare provider to enhance the quality of your child's early years' experience by improving the teaching and learning, facilities and resources, with the aim of impacting positively on your child's progress and development. For more information regarding EYPP 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 your eligibility.

|  |  |  |
| --- | --- | --- |
|  | **Parent/Carer 1:** | **Parent/Carer 2:** (optional) |
| **Legal Family Surname:** |  |  |
| **Legal Forename(s):** |  |  |
| **National Insurance Number or NASS Number:** |  |  |
| **Date of birth:** |  |  |

1. **Disability Access Fund (DAF)**

Three and four year old children who are in receipt of child Disability Living Allowance and taking up their EEF entitlements are eligible for the Disability Access Fund (DAF). DAF is paid to the childcare provider where the child attends as a fixed annual rate of £615 per eligible child per financial year.

I understand that the funding is a one-off lump sum payment and is not transferable if my child moves to a different provider part way through the financial year. Subsequent providers will not receive any funding if the DAF has already been paid in that financial year.

|  |  |
| --- | --- |
| **Is your child eligible and in receipt of Disability Living Allowance (DLA)**  | **NO** |
| **Date copy DLA letter kept on file:** |  |

If your child is splitting their EEF across two or more childcare providers, please nominate the main childcare provider/school where the Local Authority should pay the DAF.

|  |  |
| --- | --- |
| **Childcare Provider/School Name:** | **Ofsted registration/LCC School Number:** |
|  |  |

1. **Agreed EEF Entitlements**

|  |
| --- |
| **Universal Funded Hours**  |
| **Please enter total Universal EEF** **hours attended per day:**(cannot exceed 10 hours per day/15 hours per week) | **Total number of hours per week** | **Number of weeks per year** (e.g. 38, 45, 51) |
| **Mon** | **Tues** | **Wed** | **Thurs** | **Fri** | **Sat**  | **Sun** |
| **3** | **3** | **3** | **3** | **3** |  |  | **15** |  |
| **Total Annual Universal Hours Claimed (cannot exceed 570 per year)** |  |
| **Extended Funded Hours** |
| **Please enter total Extended EEF hours attended per day:**(cannot exceed 10 hours per day/15 hours per week) | **Total number of hours per week** | **Number of weeks per year** (e.g. 38, 45, 51) |
| **Mon** | **Tues** | **Wed** | **Thurs** | **Fri** | **Sat** | **Sun** |
|  |  |  |  |  |  |  |  |  |
| **Total Annual Extended Hours Claimed (cannot exceed 570)** |  |

1. **Stretched/Banked Hours**

Where the childcare provider chooses to offer the ability for parents to stretch/bank hours to be used over other periods such as school holidays etc. these days/hours need to be agreed between parent and childcare provider and the following applies:-

* There is no transfer ofany stretched/banked EEF entitlement should the child move to a new childcare provider.
* There will be no charge to the parent if the childcare provider offers this flexibility option.
* The maximum EEF entitlement within any week, including the stretched/banked hours cannot exceed 15 universal hours per week and 15 extended hours per week.
* The maximum hours that can be claimed for my child/ren by the Provider in any term are as follows:
	+ Autumn – 210 universal, 210 extended
	+ Spring – 165 universal, 165 extended
	+ Summer 195 universal, 195 extended
1. **Additional Hours and Services**

The childcare provider can charge for meals and snacks as part of an EEF entitlement place and they can also charge for consumables such as nappies or sun cream and for services such as trips and yoga. These charges must be voluntary for the parent. Where parents are unable or unwilling to pay for meals and consumables, childcare providers who choose to offer the EEF entitlements are responsible for setting their own policy on how to respond, with options waiving or reducing the cost of meals and snacks or allowing parents to supply their own meals.

The childcare provider should ensure their invoices and receipts are clear, transparent and itemised, allowing parents to see that they have received their EEF entitlement completely free of charge and understand fees paid for additional hours. The provider will also ensure that receipts contain their full details so that they can be identified as coming from them.

The childcare provider cannot ask the parent to pay any fee associated with their child's EEF place other than a refundable deposit, required to initially secure the place.

1. **Grace Period of Entitlement for the Extended 15 hours**

For children whose parent ceases to meet the eligibility criteria for the extended 15 hours, the child's placement will continue to be funded for the extended 15 hours until the grace period end date as detailed below:-

|  |  |
| --- | --- |
| **Date Parent/Carer receives ineligible decision on reconfirmation:** | **Grace Period End date:** |
| I January – 10 February | 31 March |
| 11 February – 31 March | 31 August |
| 1 April – 26 May | 31 August |
| 27 May – 31 August | 31 December |
| 1 September – 21 October | 31 December |
| 22 October – 31 December | 31 March |

I understand that the extended 15 hours will not be funded beyond the grace period end date if I become ineligible or fail to reconfirm my details with Childcare Choices by the termly deadlines. If I fall back into eligibility during the grace period, I also understand that my child's extended 15 hours beyond the grace period are subject to availability.

1. **Notice Period and Transfer of Entitlement**

As the parent/carer/guardian of the above named child I understand that;

I shall be entitled to move my child from the above named childcare provider to a new childcare provider, providing I give at least [ ] **weeks written notice** of my intention.

Where the required written notice **has been given,** there **will be no transfer of** EEF entitlement for the current term to a new childcare provider. Funding will only be made available from the start of the next term.

1. **Accessing EEF Entitlement Across Multiple Childcare Providers**

A Parental Agreement must be completed at each childcare provider where your child claims their EEF entitlement. Your child can attend a maximum of two childcare sites in a single day. If your child attends more than one childcare provider, the EEF entitlement will be split between the childcare providers in line with the information recorded in each Parental Agreement.

**Does your child take up any EEF hours at any other childcare provider?** **NO**

If yes, please complete the following for the other providers that your child is accessing their EEF entitlement hours.

|  |  |  |
| --- | --- | --- |
| **Childcare Provider/School Name:** | **Universal 15 Hours** | **Extended 15 Hours**  |
| **Per Week** | **Per Year** | **Per Week** | **Per Year** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| **Total Hours Across All Other Providers**  |  |  |  |  |

**Note:** the total number of EEF hours in Section 7 and Section 12 cannot exceed a maximum of 570 universal hours and 570 extended hours per year.

1. **Declaration**

I confirm that the information I have provided above is accurate and true. I understand and agree to the conditions set in this document.

I authorise this childcare provider/school to claim Early Education Funding as agreed above on behalf of my child.

In addition I also understand and agree that:

- The information I have provided can be shared with Lancashire County Council (LCC) and Department for Education, who will access information from other government departments to confirm my child's eligibility and enable this childcare provider to claim Early Years Pupil Premium (EYPP) or Disability Access Fund (DAF) on behalf of my child.

- If I register my child at a childcare provider for 2 year old funding and my child is found not to be eligible, I understand that I will be liable for the full cost of the placement.

- For my child to receive the greatest benefit from the EEF entitlement, it is important my child's attendance is in line with the agreed hours detailed above. Whilst it is appreciated that absences may occur due to unforeseen circumstances, I understand that the childcare provider may report my child's absence, in accordance with the childcare provider's safeguarding policy.

|  |  |
| --- | --- |
| **Parent/Carer with legal responsibility** | **Childcare Provider** |
| **Name** | **Doaa Moustafa** |  |
| **Address Line 1** | **29** |  |
| **Address Line 1** | **Gerrard st** |  |
| **Address Line 1** | **Lancaster** |  |
| **Postcode** | **LA1 5LZ** |  |
| **Email Address** | **Dodo.banna2006@gmail.com** |  |
| **Telephone No** | **07741410181** |  |
| **Signature** | **D. Moustafa** |  |
| **Date**  | **27/6/20** |  |

1. **Data privacy**

The General Data Protection Regulations puts in place certain safeguards regarding the use of personal data by organisations, including the Department for Education (DfE), local authorities and schools. The Regulations give rights to those (known as data subjects) about whom data is held, 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 is being communicated

Appendix A

**Bowerham Primary & Nursery School**

**Booking Form**

Please complete the table below indicating which sessions you would like to book for your child. We will try our best to accommodate all sessions although this cannot be guaranteed.

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Session | Time | Cost per Session | Number of Hours | Mon | Tue | Wed | Thur | Fri | Total |
| Breakfast | 7.45am – 8.45am | £4 | 1 |  |  |  |  |  |  |
| AM Session | 8.45am – 11.45am | £12 | 3 |  |  |  |  |  |  |
| Lunch  | 11.45am – 12.15pm | £2 | 0.5 |  |  |  |  |  |  |
| PM Session | 12.15pm – 3.15pm | £12 | 3 |  |  |  |  |  |  |
| After School | 3.15pm – 5.45pm | £10 | 2.5 |  |  |  |  |  |  |

Total hours used at setting weekly \_\_\_\_\_\_\_\_\_\_ annually \_\_\_\_\_\_\_\_\_\_

Total hours used at alternative provider \_\_\_\_\_\_\_\_\_

Total hours banked \_\_\_\_\_\_\_\_\_

I confirm that I would like to book the above sessions for my child. I agree to pay in advance for any sessions over and above my free entitlement. I also agree to give a half term notice should I wish to change or cancel any of the above sessions.

Signed \_\_\_\_D Moustafa\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date \_\_\_\_\_\_27/6/20\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

For office use only

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Session | Time | Cost per Session | Number of Hours | Mon | Tue | Wed | Thur | Fri | Total |
| Breakfast | 7.45am – 8.45am | £4 | 1 |  |  |  |  |  |  |
| AM Session | 8.45am – 11.45am | £12 | 3 |  |  |  |  |  |  |
| Lunch  | 11.45am – 12.15pm | £2 | 0.5 |  |  |  |  |  |  |
| PM Session | 12.15pm – 3.15pm | £12 | 3 |  |  |  |  |  |  |
| After School | 3.15pm – 5.45pm | £10 | 2.5 |  |  |  |  |  |  |

Sessions confirmed to Parents \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­­­­­­­\_\_­­­

Total weekly session charges ­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_