

CHANGES TO THE PARENT/ CARER DECLARATION FORM

The changes in the way the Early Years Entitlement can be delivered have meant that it is necessary to amend the Parent/Carer Declaration Forms.

Children can now take a '**Stretched offer**' beyond the traditional '**Standard offer**' of 38 weeks a year with providers who choose to offer **both** models of delivery. In order to ensure that children receive the **FREE** hours they are entitled to and that providers receive funding for the hours they deliver the stretched offer needs to be accurately logged.

The new Parent/ Carer Declaration form follows the format of the other forms relating to the Early Years Entitlement, the aim of this is to develop your familiarity in logging the typical information the Local Authority require from you.

Guidance to Completing the Parent/ Carer Declaration Form has been developed so any staff member can support a parent/ carer in completing one. Greater emphasis has been placed on what the provider and the parent/ carer needs to take responsibility for.

If you have any queries after viewing the guidance then please do not hesitate to contact the Early Years Entitlement Team

GUIDANCE TO COMPLETING THE PARENT/ CARER DECLARATION FORM

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EARLY YEARS ENTITLEMENT PARENT/ CARER DECLARATION

Please note:
 - This form must be completed in full for each child claiming the Early Years Entitlement.
 - Eligible birth dates fall between 01 Month Year - 31st Month Year. Proof of age must be supplied.

PART ONE – PROVIDER DETAILS				
NAME OF SETTING:				
FULL ADDRESS OF SETTING:				
POSTCODE:				
PART TWO – CHILD DETAILS				
FULL NAME:				
ADDRESS:				
POSTCODE:				
DATE OF BIRTH: MALE: <input type="checkbox"/> FEMALE: <input type="checkbox"/> (please tick)				
PART THREE – ATTENDANCE DETAILS				
DATE CHILD STARTED ACCESSING EYE AT THE SETTING: / /				
OPTION A	Standard Offer (delivery over 35 weeks per year)	Up to 15 hours per week	Total hours	
OPTION B	Stretched Offer (delivery over 47.5 weeks per year)	Up to 12 hours per week	Hours	Weeks
PART FOUR – CHILD ATTENDING MORE THAN ONE PROVIDER				
If YES, please complete the following: combined entitlement must not exceed 570 hours per year				
OPTION A	Standard Offer (delivery over 35 weeks per year)	Up to 15 hours per week	Total hours	
OPTION B	Stretched Offer (delivery over 47.5 weeks per year)	Up to 12 hours per week	Hours	Weeks
NAME OF OTHER PROVIDER:				
ADDRESS OF OTHER SETTING:				
POSTCODE:				
PART FIVE – PARENT/CARER CONFIRMATION				
I declare that the information above is to the best of my knowledge true and correct and I agree to indemnify the provider against any loss they might suffer as a result of any of the above information being incorrect.				
PARENT/CARER NAME:				
PARENT/CARER SIGNATURE: DATE: / /				

1. Provider and parent/ carer to check that the child's **birth date** falls between the **eligibility dates** and proof of age to be seen and logged by the provider.

3. Parent/ carer to complete in **full** their child's name, address, date of birth and sex.

5. Provider to agree with the parent/ carer the number of **FREE** hours the child will attend. This will **either** be Option **A** or Option **B**. Ensure for Option **B** that the **hours per week** are entered and in the **number of weeks** this applies for.

8. Provider to ensure parent/ carer has read and understood the declaration and has **named, signed** and **dated** the declaration.

9. Provider to ensure that **before** making your interim claim and final headcount that you revisit these details with parents/ carers and **amend** accordingly dating the amendment and obtaining parent/ carer initials in acknowledgement.

2. Provider name, address and postcode to be completed in **full**. A provider can complete this on a master copy and then photocopy.

4. Enter the date the child started accessing funding this term.

6. If child is accessing **FREE** hours with a second provider the parent/ carer and provider named in part one are to ensure that the combined total does not exceed 570 per academic year.

7. Parent/ carer to indicate **FREE** hours attended at the second provider and complete the second provider details in **full**.

NB: Failure to maintain accurate Parent/ Carer Declarations can result in funding for the named child being withheld.