

# HALESOWEN COLLEGE APPLICATION FOR CHILDCARE FUNDING

**2017/2018**

**IF YOU ARE UNDER THE AGE OF 20, CONTACT CARE TO LEARN**

Please complete this form clearly and accurately using BLOCK CAPITALS and BLACK INK

## PART 1 STUDENT DETAILS

Name of Student  Date of Birth

## PART 2 CHILDCARE PROVIDER DETAILS (The childcare provider should complete this section)

To receive funding, students must use Halesowen College Nursery if a space is available

Childcare Provider Name

Ofsted Registration Number

Address

Postcode

Name of Contact at Childcare Provider

Telephone  Email address

## PART 3 DETAILS OF CHILDREN

NAME OF CHILD	DATE OF BIRTH	AGE AS AT 31.8.17
<input style="width: 95%; height: 25px;" type="text"/>	<input style="width: 95%; height: 25px;" type="text"/>	<input style="width: 95%; height: 25px;" type="text"/>
<input style="width: 95%; height: 25px;" type="text"/>	<input style="width: 95%; height: 25px;" type="text"/>	<input style="width: 95%; height: 25px;" type="text"/>
<input style="width: 95%; height: 25px;" type="text"/>	<input style="width: 95%; height: 25px;" type="text"/>	<input style="width: 95%; height: 25px;" type="text"/>

I confirm that we are providing Childcare for the above named children covering the following times per week:

	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
Sessions in your care (please circle)	<input type="checkbox"/> AM <input type="checkbox"/> PM	<input type="checkbox"/> AM <input type="checkbox"/> PM	<input type="checkbox"/> AM <input type="checkbox"/> PM	<input type="checkbox"/> AM <input type="checkbox"/> PM	<input type="checkbox"/> AM <input type="checkbox"/> PM	<input type="checkbox"/> AM <input type="checkbox"/> PM
Total cost per day	£ <input style="width: 40px;" type="text"/>	£ <input style="width: 40px;" type="text"/>	£ <input style="width: 40px;" type="text"/>	£ <input style="width: 40px;" type="text"/>	£ <input style="width: 40px;" type="text"/>	£ <input style="width: 40px;" type="text"/>
Free hours (please tick where free hours are being used if applicable)	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>

**TOTAL COST PER WEEK TO PARENT**   
Please exclude any free hours in the total cost

# HALESOWEN COLLEGE

## APPLICATION FOR CHILDCARE FUNDING

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### PART 4 TERMS & CONDITIONS

Completing this application does not guarantee childcare funding. The student and childcare provider will receive a letter to confirm eligibility and any contribution.

Halesowen College is making a contribution towards childcare fees and this may not cover the cost in full. The childcare provider must recoup any shortfall from the parent.

Any funding will start from the date the completed application for financial support and for childcare was received and approved by Halesowen College.

Any payments will be made in arrears directly to the childcare provider via BACS within 30 days of receipt of an invoice.

Funding will be provided for timetabled hours only, until the student's published course end date. College holidays, bank holidays and any other college closures will not be funded. Retainer fees will not be funded.

The required level of attendance for students is 90% and funding may be revoked if attendance falls below this level. Students are then responsible for paying the outstanding fees to the provider.

If you are entitled to Government Funded Childcare Hours such as 15 free hours for 2-5 year olds, these MUST be used first for your College timetabled hours. The College will only support childcare costs where there are remaining fees to be paid. For example, if your College hours were 20 hours per week then the college funding would only support the additional 5 hours. This also applies if your child is eligible for free hours throughout the year.

If the student withdraws from their course or fails to attend regularly, the student will need to repay all funding awarded.

Any contribution will be capped at the rate charged by Halesowen College Nursery. If the child turns 2 in the academic year, the contribution we make will reduce. You will receive confirmation of this in writing.

Halesowen College will process the information you have provided in accordance with the Data Protection Act. The data will be processed for the purpose connected with the student's studies. The College will record and hold securely any information of a personal or sensitive nature.

Any additional funding for Childcare hours will not be paid. Any changes with hours, prices etc. should be communicated to the Student Hub.

The contract for childcare is between the nursery and the student; Halesowen College has no contractual relationship with or obligation to the Childcare Provider.

By signing this form, you confirm that you agree and understand the terms and conditions stated above and you confirm that all information given is correct.

Student's Signature	<input type="text"/>	Date	<input type="text"/>
Childcare Provider's Signature	<input type="text"/>	Date	<input type="text"/>

#### OFFICE USE ONLY

Childcare Provider Ofsted Registered  Student Eligible (20+ yrs)

Assessed by (print name)

Signed  Date

Value of Support Per Week £  Number of Weeks

Total Commitment £