

Early Years Pupil Premium for Part-time 3 and 4 Year Olds Registration Form

Name of school nursery pre-school or childminder

This form must be returned to your nursery provider and NOT Wakefield Council

Registering your child could provide up to an extra £456 for your early years provider (school, nursery, pre-school or childminder), to fund valuable support like extra staff training or resources to help raise the quality of your child's early education.

| rtaine or concor, narcery, pre c | oricol, or orinaminaci | | | | | | | | |
|----------------------------------|---------------------------------|--------------------------|--|--|--|--|--|--|--|
| | | | | | | | | | |
| About your child/children | | | | | | | | | |
| Child's Forename | orename Child's Surname Child's | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| Address Line 1 | | | | | | | | | |
| Address Line 2 | | | | | | | | | |
| Town | | | | | | | | | |
| Postcode | | | | | | | | | |
| | | | | | | | | | |
| To be completed by the School | Number of weeks in the term | Number of hours per week | | | | | | | |
| Parent/Guardian details | | | | | | | | | |
| Please tick if in receipt of any | Parent/Guardian 1 | Parent/Guardian 2 | | | | | | | |

| Please tick if in receipt of any of the benefits overleaf | Parent/Guardian 1 (eligible person / lead person in receipt of benefits) | | | | | | Parent/Guardian 2 (if applicable) | | | | | | | | | | | |
|---|--|--|--|--|--|--|--------------------------------------|--|--|--|--|--|--|--|--|---|--|--|
| Forename | | | | | | | | | | | | | | | | | | |
| Surname | | | | | | | | | | | | | | | | | | |
| Date of birth | | | | | | | | | | | | | | | | | | |
| National Insurance Number* | | | | | | | | | | | | | | | | | | |
| National Asylum Seeker Service (NASS) Number* | | | | | | | | | | | | | | | | • | | |
| Daytime telephone number | | | | | | | | | | | | | | | | | | |

^{*}Please complete either your National Insurance Number or National Asylum Seeker Service Number.

Data Protection Act 1998

Wakefield Council is collecting this data in order to meet its statutory responsibilities for the provision of education and care to children in accordance with the requirements of the Education Act 1996 and The School Standards and Framework Act 1998. On occasions this information will be shared with other departments within Wakefield Council to meet their statutory responsibilities. If you would like any further information regarding Wakefield Council data protection policy please refer to the Wakefield Council websit

Eligibility Criteria for Early Years Pupil Premium

Please indicate above which parent/guardian is in receipt of any of the benefits listed below:

- Income Support
- Income-based Jobseekers Allowance

Looked after by the local authority

Adopted from care

- Income-related Employment and Support Allowance
- Support under Part VI of the Immigration and Asylum Act 1999
- The guaranteed element of State Pension Credit
- Child Tax Credit (provided the family is not also entitled to Working Tax Credit and have an annual gross income of no more than £16,190)
- Working Tax Credit run-on (paid for 4 weeks after a family stops qualifying for Working Tax Credit

Please tick the appropriate box if any of the following applies to your child:

| Left care through a special guardianship arrangement |
|---|
| Left care and is subject to a child arrangement order |
| How the information in this form will be used |
| Wakefield Council will use the information provided above to check eligibility for the Early Years Pupil Premium. We will do this by checking 'out of work benefit data' provided by HMRC and DWP Once this is confirmed, we will decide how much money your child's early years provider wil receive. |
| Please complete the declaration below to give us consent to make this check. We will check eligibility when we receive this form and again after your child's fourth birthday. You are free to withdraw your consent so that your details are not used in future. Registering for Early Years Pupi Premium will not affect any of your benefits or your child's Free Entitlement. |
| Declaration |
| The information I have given on this form is complete and accurate. I understand that my personal information is kept safe and secure by my nursery provider and Wakefield Council, and measures are in place to prevent the loss, misuse or alteration of my personal information and will be used for Wakefield Council's purposes only. |
| I agree to Wakefield Council using this information to check eligibility for the Early Years Pupil Premium and to allow my child's early year's provider to claim the Early Years Pupil Premium for my child. |
| Signature of parent/guardian 1: Date: |
| Signature of parent/guardian 2: Date: Date: |

Thank you for completing this form and helping to make sure your child's early years provider is as well funded as possible. Please return this form to your Nursery Provider.