Parent Authorisation Form



Early Education Entitlements Autumn 2025 - Summer 2026

This form collects information from parents/carers to assess and process Early Education Entitlement (EEE) hours, eligibility for Early Years Pupil Premium (EYPP) and eligibility for Disability Access Fund (DAF).

It is mandatory to complete a parent authorisation form for each setting your child attends for their EEE and thereafter complete a new form where there are changes to any details previously submitted. **This form must be completed, signed and returned to your childcare provider to confirm your entitlement access.**

If you wish to transfer your entitlement to a different childcare provider you must give four weeks' written notice to your existing provider. Your child will not be able to access their early education entitlement at a new provider until the week following the end of the four week notice period.

A false declaration may result in your early education entitlement being withdrawn.

Childcare Provider name:									
1. Child details									
Child's forename(s):									
Child's surname:									
Child's date of birth:				Sex:		Female / Male	!		
Address:					-		Post	tcode:	
Child's Ethnicity - Ma	ndatory (tick whi	ch one annlies)					-		
Any other Asian background	Any other Mixed Background	Black African	(Gypsy/Roma		Traveller of Irish Heritage	T	White & Asian	
Any other Black background	Any other White Background	Black Caribbean		Indian		White British		White & Black African	
Any other Ethnic background	Bangladeshi	Chinese		Pakistani		White Irish		White & Black Caribbean	
·	·	I would prefer	r not to	state my chil	d's eth	nnicity (refused)	•		
2. Early Years P for your child. EYPP i and development. Ir	s used to improve t	eaching and learning	faciliti	es and resou					
In receipt of benefits (please ensure parent									
The child has left car (Please supply docume	•	•	•	_	•				
The child has been in (Please supply docume	•	•		ovider to co	ntact	early years team	to clai	m)	

3.	. Entitlement and parent details Please tick which entitlement you will be u	sing. If your child is two years
	old and eligible for both entitlements, the maximum for each entitlement will be 15 hours give	ng a total of 30 hours.

Entitlement	Eligibi	lity									
Working parent entitlement for children	Enter the 11 digit code from HMRC here (required to access working family entitlement hours)										
from 9 months old											
Entitlement for children	Enter r	eferenc	e issue	d by Ac	hieving	for Ch	ildren (on conf	firmatio	n emai	I).
from 2 years in families											
receiving additional forms											
of support											
Universal Entitlement for											
3-4 year olds											

Details of parent/carer at child's main residence - required to access working entitlement hours and EYPP									
Forename: Surname:									
Date of birth (dd/mm/yyyy):			Nation	National Insurance or NASS Number:					
I consent for this data to be used to confirm eligibility for the following entitlements (please tick)									
EYPP		Working Family		Families in receipt of additional forms of support					

4. Setting and attendance details – Specify the actual hours per week /weeks per year you will be accessing early education entitlement at this setting. Each entitlement is available for a maximum 38 weeks of the year. Your provider should help you complete this section.

	Mon	Tue	Wed	Thurs	Fri	Total weekly hours	Total weekly charge	No weeks per year
Total entitlement hours attended per day								
Total extra (chargeable) hours per day							£	
Total daily hours attended								

Specify the total early education entitlement hours accessed at any other setting, including if within notice period to the provider named. Failure to do so may result in your entitlement being withdrawn.

Name of other provider	Total no of entitlement hours per week

delivering	our entitlement hours	nd (DAF) - If your child is currently in receipt of Disability Living Als can claim an Disability Access Fund (DAF). DAF can be claimed once in tiple providers within the 12 month period.	
		nt and nominate the above provider to claim the Disability Accesside's current DLA award to confirm eligibility	s Fund for my child. I
Parent's or ca	rer's signature:		
6. Parent	, carer or gua	rdian with legal responsibility declaration	
I understand the providers free I understand the will not be able It is my responsivalid Failure to To claim the ershared with me I confirm the in above in section Print name: Signature:	hat the named provide early education entitle hat four calendar weel e to access the entitler sibility to meet any cri renew the code within ntitlement funding as a y chosen provider, Ach	ducation entitlements at providers, in this or other Local Authorities, deer will deliver the agreed hours free of charge. I have been shown and usement offer, including any voluntary charges for additional hours or services in the desired will be applied from the date I give written notice to end or an ment hours at any other provider until the week following the end date iteria or actions required to ensure the working entitlement code issued in required timeframes will result in my working entitlement being with agreed above on behalf of my child. I understand that the data collected hieving for Children and the Department for Education. The in this form is true and accurate and I have read and understand the interior of the provider of	nderstand my vices mend the agreement. I of the notice period d by HMRC remains drawn d in this form will be
Provider Declar	aration : read stateme	ents below and sign agreement	
I have seen do	ocumentary proof of da	ate of birth to confirm child meets age requirements for early entitleme	ents claimed
I agree to deli	ver the early entitleme	ent as free hours, subject to the child being on roll and hours claimed ac	ccessible to the child
_		n details of my early entitlement offer, including clear details of any volue advised the parent/carer of my entitlement only place offer and how t	
I have checked	d the working family el	ligibility code supplied is valid for the place agreed and will advise parer	nt/carers if not
_		ent/carer has declared they have accessed the entitlement hours in tern of the Notification of Changes form to confirm remaining entitlement	n with another provide
In the event o	f any changes to the d	etails submitted on this form I will follow and action relevant AfC policy	and guidance
I understand i	f for any reason the ag	reed entitlement hours cannot be fulfilled a notice period does not app	oly
-	al input will be as decl	ared on this form & any SEN stage input to the portal, and if other than	No SEN this has been
Print name:		Job role:	

Data Privacy and Protection Information - The personal information we collect will be processed and stored in compliance with UK data protection law. For further details about how we use your personal information, please read the privacy notice:

www.achievingforchildren.org.uk/pages/privacy-and-data-protection www.achievingforchildren.org.uk/pages/privacy-and-data-protection/privacy-notices-list/early-years-service-privacy-notice-kingston-and-richmo

<u>www.acnievingrorcnildren.org.uk/pages/privacy-and-data-protection/privacy-notices-list/early-years-service-privacy-notice-kingston-and-richm</u>

Date:

Signature: