FREE CHILDCARE FOR 2 YEAR OLDS

Experience new activities Learn through play Make new friends Prepare for nursery Have fun!

www.rotherham.gov.uk/earlyyears



UP TO I5 HOURS

A WEEK

IS MY CHILD ENTITLED TO A FREE PLACE?

We believe your child may be entitled to FREE childcare for 15 hours per week. You can claim if you receive one of the following:

- Income Support
- Income based Jobseekers Allowance
- Income related Employment and Support Allowance
- Child Tax Credit, provided you are not entitled to Working Tax Credit and have an annual income (as assessed by HM Revenue & Customs) that does not exceed £16,190
- Support under part VI of the Immigration and Asylum Act 1999
- The guarantee element of State Pension Credit
- Working Tax Credits <u>and</u> earn no more than £16,190 a year as a household
- Universal Credits <u>and</u> have a household annual income of less than £15,400 after tax
- your child has a current statement of special educational needs (SEN) or an education, health and care plan
- your child gets Disability Living Allowance
- your child has left care through special guardianship or an adoption or residency order

Children are also eligible if they are looked after by the council

WHEN IS MY CHILD ENTITLED TO A FREE PLACE?

If your childs 2nd birthday falls between:	He/she will become entitled to a free place from:
1 January to 31 March	the start of the summer term (after Easter)
1 April to 31 August	the start of the autumn term (early September)
1 September to 31 December	the start of the spring term (early January)

THERE ARE THREE WAYS TO APPLY

- 1. Contact the Families Information Service on 01709 822429 or freephone **0800 0730230**, for more information and to check your eligibility OR
- 2. Apply online at www.rotherhamfis.co.uk OR
- 3. Complete the simple form on the next page

APPLICATION FORM

Please complete (in block CAPITALS) the details below to find out if your child is eligible. Please only use full legal names when completing this form, including middle names.

APPLICANT'S DETAILS

Title:	Relationship to Child:								
First Name(s):									
Last Name:*									
Address:									
Post Code:	Email Address:								
Home Telephone:**	Mobile:**								
Date of Birth:*	National Insurance No:*								
	or NASS reference*								

HUSBAND/WIFE/PARTNER'S DETAILS

Title:	Relationship to Child:					
First Name(s):						
Last Name:*						
Date of Birth:*	National Insurance No:*					
	or NASS reference*					

CHILD'S DETAILS

First Name(s):	
Last Name:*	
Date of Birth:	Gender:

*It is essential that these fields are completed clearly and correctly.

** Please provide a contact telephone number in order for us to process your application promptly.

CHILDCARE DETAILS

Do you know which childcare provider you would like to use? Yes No		
If Yes , please tell us the name of the childcare		
If No , we will send you details of local childcare who can provide the free place.		

Are you registered with a Children's Centre?

Yes No

If not, we will use the information provided to register your details with your local children's centre so that you are kept up to date with activities and services available to you.

Is your child in receipt of Disability Living Allowance?	Yes No
Does your child have a current Statement of Special Educational Needs or Education, Health and Care Plan?	Yes No
Has your child recently left care through a Special Guardianship, Residency Order or Adoption?	Yes No

DECLARATION

I certify that the iformations given in this application is correct to the best of my knowledge and belief and that correspondence containing my name, address and child's name will be sent to the email address included on this application form. I understand that the council may check with the Department for Work and Pensions (DWP) and/ or Her Majesty's Revenue and Customs regarding my eligibility. We may need to use this information for enquiries under current Data Protection legislation. The information provided will also be used to target other early intervention support. Under the new General Data Protection Regulations individuals have a series of information rights. For details of these rights please see the RMBC Privacy Notice at **www.rotherham.gov.uk**

I agree that the childcare provider named on this form can be informed of my eligibility check outcome.

Signature:	Date:
(Applicant)	

Return completed form to Families Information Service, Wing A, First Floor, Riverside House, Main Street, Rotherham, S60 1AE

If you or someone you know needs help to understand or read this document, please contact us:Telephone:0800 0730230Email:fis@rotherham.gov.uk

Ak vy alebo niekto koho poznáte potrebuje pomoc pri pochopení alebo čítaní tohto dokumentu, prosím kontaktujte nás na vyššie uvedenom čísle alebo nám pošlite e-mail.

ئەگەر تۆ يان كەسىيىكى كە تۆ دەيناسىي پېيويسىتى بەيارمەتى ھەبېت بۆ ئەودى لەم بەلگەنامە يە تىبىگات يان بىخوينىنتەود، تىكايە پەيوەندىمان پېيوە بىكە لەسەر ئەو ژمارەيەي سەمرەوەدا يان بەھ ئىيمەيلە.

إذا كنت انت أواي شخص تعرفه بحاجة إلى مساعدة لفهم أوقراءة هذه الوثيقة، الرجاء الاتصال على الرقم اعلاه، أو مراسلتنا عبر البريد الإلكتروني

اگر آپ یا آپ کے جاننے والے کسی شخص کو اس دستاویز کو سمجھنے یا پڑھنے کیلئے مدد کی ضرورت ھے تو برائے مھربانی مندرجہ بالا نمبر پرھم سے رابطہ کریں یا ھمیں ای میل کریں۔

اگر جناب عالی یا شخص دیگری که شما اورا می شناسید برای خواندن یا فهمیدن این مدارک نیاز به کمک دارد لطفا با ما بوسیله شماره بالا یا ایمیل تماس حاصل فرمایید.