**30 Hours Extended Entitlement – Consent Form**

Thank you for your enquiry about accessing your extended entitlement place at Bourne Abbey C of E Primary Academy

Before confirming the place, we must verify the eligibility code with Lincolnshire County Council.

Please complete and sign this form to confirm that you agree to the checks being made:

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| **Child’s Legal Name**: | Known as (if different fromlegal name): |
| **Child’s Date of Birth**: | **Parent/Carer 2** Name: |
| **Parent/Carer 1** Name**:** | **Parent/Carer 2**Contact No:Email address: |
| **Parent/Carer 1** National Insurance No: | **Parent/Carer 2**National Insurance No: |
| **Parent/Carer 1**Contact No:Email Address: | **30 hours eligibility code** (DERN). (*This is normally an* *11 digit code beginning* *with 500*): |

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I confirm the information above is correct. I consent to Bourne Abbey C of E Primary Academy using the information supplied above for the purposes of verifying my eligibility for the extended entitlement. I understand that the information will be held securely. When no longer required, it will be disposed of in a manner appropriate to its sensitivity. I also understand that if I am no longer eligible for the extended entitlement, I will have to pay for any additional hours booked in above the universal Early Years Entitlement.

Signature: …………………………………………………………………………………………. Date: ………………………………

Name: (please print): ………………………………………………………………………..

**15 Hours Funded Childcare for 2 Year olds – Consent Form**

Thank you for your enquiry about accessing your 15 hours funded childcare for 2 year olds at Bourne Abbey C of E Primary Academy

Before confirming the place, the eligibility code needs to be verified with Lincolnshire County Council. Please complete and sign this form to confirm that you agree to the checks being made:

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| Child’s Legal Name: | Known as (if different fromlegal name): |
| Child’s Date of Birth: | Parent/Carer 1 Name: |
| Parent/Carer 1National InsuranceNumber: | Parent/Carer 1 ContactNumber andEmail address: |
| Parent/Carer 2 Name: | Parent/Carer 2National InsuranceNumber: |
| Parent/Carer 2 Contact Number andEmail Address: | 15 hours funded childcare for 2 year olds eligibility code: |

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I confirm the information above is correct. I consent to Bourne Abbey C of E Primary Academy using the information supplied above for the purposes of verifying my eligibility for the 15 hours funded childcare for 2 year olds. I understand that the information will be held securely. When no longer required, it will be disposed of in a manner appropriate to its sensitivity. I also understand that if I am no longer eligible for the 15 hours funded childcare for 2 year olds, I will have to pay for any hours booked.

Signature:……………………………………………………………………………………………………. Date:…………………………………………………………..