Date Received:		

Childcare Bursary Form



Academic Year 2023/24

Please complete together with a 19+ Bursary Form <u>OR</u> an Advanced Learner Loan Bursary Form Written confirmation of costs from an OFSTED registered childcare provider MUST be supplied with this form along with appropriate evidence.									
SECTION 1 – PERSONAL D	<u>DETAILS</u>								
Your Surname				Your	Fore	ename			
Student ID Number									
SECTION 2 - COURSE INFORMATION — COURSE TIMETABLES WILL BE REQUIRED PRIOR TO PAYMENTS BEING AUTHORISED									SED
Course Title									
SECTION 3 - CHILD DETAILS AND CHILDCARE PROVIDER DETAILS (Please complete additional forms if required)									
Please tick which childcare	provisio	on you	will be using (please	e tick a	II tha	at app	ly)		
Little Explorers Day Nursery		-					-		
Chaffron Way Campus	,								
	· ·		Other OFSTED Regis	OFSTED Registered OFSTED Reg		OFSTED Regist	tered		
or Preschool	,		Childminder		Breakfast/After Scho				
0.1.00000							2.00		
Name of Child 1					Dat	te of B	irth	A 3 2	
Name of Child 1					Dai	te oi b	II UII	Age	
Name and Address of Child	lcare Pro	ovider						1	
ivanie and Address of Cinic	icare i i	viaci							
OFSTED Register Number									
						C D	·		
Name of Child 2				Date of Birth Age		Age			
Name and Address of Childcare Provider									
		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,							
OFSTED Register Number									
Name of Child 3			Date of Birth Age						
Name and Address of Child	lcare Dr	nvider						L	
Ivanie and Address of Cilio	icai e FIC	viuel							
OFSTED Register Number									

This form is for 19+ Bursary and Advanced Learner Loan Bursary applicants only. Students aged under 20 at the start of their course may be eligible for Care to Learn funding – please speak to the Bursary team for more details. These funds are discretionary and due to the limited nature of these fund, meeting the criteria <u>does not</u> guarantee funding. Funds are allocated on a first come first served basis.

	Please indicate childcare hours required						
Child 1	Monday	Tuesday	Wednesday	Thursday	Friday		
Nursery/Childminder							
Breakfast Club							
After School Club							
Child 2							
Nursery/Childminder							
Breakfast Club							
After School Club							
Child 3							
Nursery/Childminder							
Breakfast Club							
After School Club							
SECTION 4 – DECLARATION							
I confirm that the information given on this form and accompanying evidence is truthful and correct to the best of my knowledge. No false or incomplete information has been submitted and I have made the College aware of any part of my own or my household income. I understand that the College has the right to make an independent check of any evidence submitted and as such, action may be taken to recover funds and stop future payments in the event of any information I have given being proven to be incorrect or false. I agree that my attendance will remain at 90% or above overall (unless I experience exceptional circumstances) and that my conduct and progress on the course will be in line with College Policy. Where my attendance, conduct or progress is not up to this standard then I understand that the College may stop my payments. I agree that I will claim, and use Government funded free early years education and childcare where my child(ren) is eligible to receive such funding, prior to claiming for additional support from the Bursary Fund.							
Signature: I agree for the College to di	scuss my financial r	azymonts with m		Da	Please tick box		
parents/carers/guardians/g			у		riedse tick box		

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