

## **Details for children claiming 30 hours childcare**

Signature:

Child's Name:		1		
		Date of		
D 1 / C N		Birth:		
Parent/Carer Name:		Setting		
		Name:		
Parent/Carer National		30 hours eligibi	lity	
Insurance Number:	code:		2012)	
		(e.g. 12345678	912)	
Declaration				
I agree that the information	tion I have provided can be	shared with the	Local Au	uthority and Department
_	access information from otl			
	ble this provider to claim f	•	•	•
Parent/Carer			Date:	
Signature:				
Details for children clair	ning 30 hours childcare			
Details for children clair Child's Name:	ning 30 hours childcare	Date of		
Child's Name:	ning 30 hours childcare	Birth:		
	ning 30 hours childcare	Birth: Setting		
Child's Name:	ming 30 hours childcare	Birth:		
Child's Name:	ning 30 hours childcare	Birth: Setting		
Child's Name:  Parent/Carer Name:  Parent/Carer National	ming 30 hours childcare	Birth: Setting Name:	lity	
Child's Name: Parent/Carer Name:	ming 30 hours childcare	Birth: Setting Name: 30 hours eligible code:		
Child's Name:  Parent/Carer Name:  Parent/Carer National	ming 30 hours childcare	Birth: Setting Name:		
Child's Name:  Parent/Carer Name:  Parent/Carer National	ming 30 hours childcare	Birth: Setting Name: 30 hours eligible code:		
Child's Name:  Parent/Carer Name:  Parent/Carer National Insurance Number:  Declaration	tion I have provided can be	Birth: Setting Name:  30 hours eligibicode: (e.g. 12345678	912)	uthority and Department
Child's Name:  Parent/Carer Name:  Parent/Carer National Insurance Number:  Declaration  I agree that the information		Birth: Setting Name:  30 hours eligible code: (e.g. 12345678)	January (1984)	
Child's Name:  Parent/Carer Name:  Parent/Carer National Insurance Number:  Declaration  I agree that the information for Education, who will a	tion I have provided can be	Birth: Setting Name:  30 hours eligible code: (e.g. 12345678)	Jocal Audepartm	ents to confirm my
Child's Name:  Parent/Carer Name:  Parent/Carer National Insurance Number:  Declaration  I agree that the informat for Education, who will a	tion I have provided can be	Birth: Setting Name:  30 hours eligible code: (e.g. 12345678)	Jocal Audepartm	ents to confirm my