Disability Access Funding for Three and Four year olds
Application Form

Information and guidance for parents

Providers who offer Free Early Education and Care (FEEC) for three and four year old children can apply to Kirklees Council for Disability Access Funding (DAF) to support children with a disability to access the free entitlement. A lump sum payment of £615 is available each financial year to providers who have eligible funded children in receipt of Disability Living Allowance (DLA).

Please complete and sign page two of this form and return to your provider along with a copy of your child’s most recent Disability Living Allowance Letter confirmation. The childcare provider will then send the form and proof of eligibility to Kirklees Council.

- Payment of £615 will be made to the provider in the term your child accesses their free place.
- Children do not need to take up all of their entitlement to 570 hours to be eligible for DAF.
- Your child should be registered with the provider at Headcount/Census\(^2\) week to qualify for payment. Your provider will be able to tell you more about this.
- Payments will be made annually. If you move your child to another childcare provider during the year then the DAF funding is not transferable until the following year.
- DAF funding can only be paid to one provider annually therefore if your child accesses their free entitlement at more than one provider, you must nominate which provider receives the DAF funding.
- Any equipment or resources purchased using DAF funding will remain the property of the provider.
- Four year olds in reception class are not eligible for DAF funding.
- Where a child lives in Kirklees but attends a provider in a different local authority, the provider’s local authority is responsible for funding the DAF and eligibility checking.
- Where a child lives in another local authority but attends a provider located in Kirklees Council then Kirklees Council is responsible for funding the DAF and eligibility checking.

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\(^1\) 1 April to 31 March
\(^2\) Third Thursday in January, third Thursday in May, first Thursday in October
Application Form

Child’s legal first name: ____________________________
Child’s legal surname: ____________________________
Child’s date of birth: ____________________________
Child’s home address including postcode: ____________________________
Provider name you wish to receive the DAF funding: ____________________________
Child’s start date at provider: ____________________________

Data Protection Statement:
Kirklees Council will check your evidence from the Department for Work and Pensions (DWP) to confirm your eligibility. Kirklees Council may need to use your information details for enquiries made by third party organisations under the relevant data protection legislation (including but not limited to the Data Protection Act 2018) in respect of the prevention or detection of crime or the administration of justice.

If you would like further information about how Kirklees Council uses your information please visit www.kirklees.gov.uk/privacy
If you have any concerns or questions about how your personal information is handled, please contact the Data Protection Officer for Kirklees Council at DPO@kirklees.gov.uk or phone 01484 221000.

Parent consent and declaration: I declare that:
1. I am the parent/legal guardian of the child named on this form.
2. The above information relating to my child is accurate and I will notify the childcare provider of any changes.
3. I have given evidence to the provider that my child is in receipt of child Disability Living Allowance and I consent that this application form and evidence will be shared with designated officers at Kirklees Council.
4. I confirm that my child is in attendance and receiving Free Early Education and Care at the childcare provider named above.
5. I understand that if I move my child to another provider that the DAF funding is not transferable.

Full name of parent: __________________________________________________________

Signature of parent/legal guardian: ____________________________________________ Date: _____________

Provider declaration: I confirm that the child named on this application is in attendance and claiming their Free Early Education and Care funding at this provider.

Name of Provider: __________________________________________________________

Signature of Provider: _______________________________________________________ Date: _____________

Providers: please upload this form along with a copy of the DLA letter via the Free Early Education and Care Funding Document upload facility www.kirklees.gov.uk/feecupload or alternatively post to Kirklees Council, Free Early Education Funding Team, 1st Floor, Kirkgate Buildings, Byram Street, Huddersfield, HD1 1BY.
Schools and academies: send via AnyComms+ to Learning Service Early Years file type DAF applications.