

Parent/Carer Declaration – for use by Private, Voluntary and Independent childcare settings, including Childminders.

Parent/Carer, please complete this form if your school age child is:

- Attending at least one 4 hour session at a provider running a Holiday Activity and Food Programme during the Easter Holidays 2022, and
- eligible for Free School Meals under qualifying benefits (not universal infant school meals for YR, Y1 or Y2).

By completing and signing this declaration, you are consenting to your HAF provider to claim funding for your 4 hour sessions during the Easter Holidays 2022. A maximum of one 4 hour session per day will be funded and will include food, enriching activities, food and nutritional education, and other support such as signposting to other services.

Provider Name where child is attending HAF session during Easter holidays 2022	
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Child Legal First Name:			
Child Legal Surname:			
Date of Birth dd/mm/yyyy	Gender (please tick) ✓	M	F
Home Address:			
Home Postcode:			
School name where child on roll			
Year group in school (YR, 1-6)			
SEND additional information (tick if any of these apply)	Is child SEND? <input type="checkbox"/> Does child have an EHCP? <input type="checkbox"/> Will child have 1-2-1 worker at HAF session? <input type="checkbox"/>		
I confirm that I am entitled to a HAF funded place and can provide evidence to the HAF childcare provider (tick all that apply)	Child is already eligible for Free School Meals (not universal infant school meals), or		
	I am claiming one of the following qualifying benefits:		
	Universal Credit (annual net earned income of no more than £7,400).		
	Income Support		
	Income-based Jobseeker's Allowance (JSA)		
	Income-related Employment and Support Allowance (ESA)		
	Support under Part VI of the Immigration and Asylum Act 1999		
	The guaranteed element of Pension Credit		
	Child Tax Credit (with no Working Tax Credit) with an annual gross income of no more than £16,190		
Working Tax Credit run-on (paid for the four weeks after the person stops qualifying for Working Tax Credit)			

Parent/carers please sign this declaration in the boxes below:

I can confirm that I have read and understood the form and that the information I have provided above is accurate and true. I agree the named provider can claim HAF funding as agreed above on behalf of my child.

Tick which sessions your child will be attending during Easter holidays 2022		Week 1	Week 2	Week 3	Print Name
	Mon				Signature
	Tues			Total no. sessions claimed ↓	
	Weds				
	Thurs				Date of signing form
	Fri				
	Sat				
Sun					