ANNEX B

For Childcare requirements between:

8 January 2024 – 17 May 2024 for UG and PG Dip

8 January 2024 – 23 May 2024 for PGDE

8 January 2024 to 31 July 2024 for MSc students

Closing date for Annex B: 31 March 2024 at 5pm

\*MSc Students: 31 May 2024 at 5pm

|  |  |
| --- | --- |
| **Student Name:**Click or tap here to enter text. | **Student Registration Number:**enter text. |

* This Annex MUST be completed by your childcare provider (both sides).
* If you have more than one childcare provider, you must get each provider to fill in a separate Annex B.
* **Payments for this period will not be made prior to commencing your course.**

Childcare Provider, please provide the following information:

|  |
| --- |
| Name of Child/Children in your care: Click or tap here to enter text. |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Week Commencing** | **Cost per hour OR**  **per session**  **(half day/full day)** | **Number of hours**  **per session**  **per week** | **Total Cost**  **for week** | **Total cost for**  **this period** |
| **8 January** | **£** enter text. | enter text. | **£**enter text. | **£**  text. |
| **15 January** | **£**enter text. | enter text. | **£** enter text. |
| **22 January** | **£** enter text. | enter text. | **£** enter text. |
| **29 January** | **£** enter text. | enter text. | **£** enter text. |
| **5 February** | **£** enter text. | enter text. | **£** enter text. | **£** enter text. |
| **12 February** | **£** enter text. | enter text. | **£** enter text. |
| **19 February** | **£** enter text. | enter text. | **£** enter text. |
| **26 February** | **£** enter text. | enter text. | **£** enter text. |
| **4 March** | **£** enter text. | enter text. | **£** enter text. | **£** enter text. |
| **11 March** | **£** enter text. | enter text. | **£** enter text. |
| **18 March** | **£** enter text. | enter text. | **£** enter text. |
| **25 March** | **£** enter text. | enter text. | **£** enter text. |
| **1 April** | **£** enter text. | enter text. | **£** enter text. | **£** enter text. |
| **8 April** | **£** enter text. | enter text. | **£** enter text. |
| **15 April** | **£** enter text. | enter text. | **£** enter text. |
| **22 April** | **£** enter text. | enter text. | **£** enter text. |
| **29 April** | **£** enter text. | enter text. | **£** enter text. |
| **6 May** | **£** enter text. | enter text. | **£** enter text. | **£** enter text. |
| **13 May** | **£** enter text. | enter text. | **£** enter text. |
| **Management or Proprietor:**  **I confirm that the child/children noted above attend as detailed.**  **Name:** Click or tap here to enter text.  **Signature:** Click or tap here to enter text. **Date:** Click or tap to enter a date.  **Please ensure you have also signed the Declaration overleaf.** | | | | |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **For \*PGDE and MSc Students Only** | | | | |
| **Week Commencing** | **Cost per hour OR per session (half day/full day)** | **Number of hours per session per week** | **Total Cost for week** | **Total Cost for**  **this period** |
| **20 May** | **£** enter text. | enter text. | **£** enter text. | **£** enter text. |
| **27 May** | **£** enter text. | enter text. | **£** enter text. |
| **3 June** | **£** enter text. | enter text. | **£** enter text. | **£** enter text. |
| **10 June** | **£** enter text. | enter text. | **£** enter text. |
| **17 June** | **£** enter text. | enter text. | **£** enter text. |
| **24 June** | **£** enter text. | enter text. | **£** enter text. |
| **1 July** | **£** enter text. | enter text. | **£** enter text. | **£** enter text. |
| **8 July** | **£** enter text. | enter text. | **£** enter text. |
| **15 July** | **£** enter text. | enter text. | **£** enter text. |
| **22 July** | **£** enter text. | enter text. | **£** enter text. |
| **29 July** | **£** enter text. | enter text. | **£** enter text. |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Childcare Provider Declaration:**   * **If you have previously completed an Annex A for this child/children for childcare costs for Semester 1 (during the period August/September to December), please confirm the amount paid to you during this period: £** Click or tap here to enter text. * I confirm that I have agreed to provide childcare to the named child/children overleaf and I will advise you immediately of any change to this. * Please tick to confirm Government Funding has been deducted from costs for any 3- or 4-year-old child. If not, please attach details as to why it has not been deducted: * I understand payment of the award will go to the student and it is their responsibility to pay me.   **It would be helpful if you could keep a record of when the above child/ren are in your care and the cost of this care, as we will ask you for this information in the future.** | | | | |
| **Company Name:** Click or tap here to enter text. | | | | |
| **Address:** Click or tap here to enter text. | | | | |
| **Post Code** Click or tap here to enter text. | | | | |
| **Telephone Number:** Click or tap here to enter text. | | | | |
| **Email Address:** Click or tap here to enter text. | | | | |
| **My Care Inspectorate registration number is:** | C | S | Click or tap here to enter text.N |
| Provide an official stamp in the space indicated.  If you do not have an official stamp, please provide a  letter on headed paper confirming the company name and the child/ren  in your care. Tick here if you have provided a letter instead:  **Stamp**  If you are a private childminder, tick here to confirm you have  provided a letter confirming your name and the child/ren in your care:  ***Please ensure that you have checked and signed the attendance information overleaf.***  **Manager or Proprietor’s:**  **Name:** Click or tap here to enter text.  **Signature:** Click or tap here to enter text. **Date:** Click or tap to enter a date. | | | | |