


Childcare Grant
Application Form
2012/13
Estimated Costs

This form is also available at
www.direct.gov.uk/studentfinance

 SFEngland

 sf_england



Steps to getting a Childcare Grant (CCG) if you have dependent children in registered or approved childcare.

Step 1

You need to complete and return a Childcare Grant Application Form (CCG1).

Step 1

You **must** use a registered or approved childcare provider as detailed in the 'Childcare Grant and other support for full-time student parents in Higher Education 2012/13' booklet. If you have not yet found a childcare provider leave section 3 blank and still make your application. Do **not** complete this form if you or your husband, wife or partner are receiving the childcare element of the Working Tax Credit.

Step 2

We will assess your application to determine if you qualify for a Childcare Grant.

Step 2

Your application will be income assessed, based on details provided on your application for Student Finance Form. Your **estimated** costs will be used to work out your Childcare Grant payments until you provide details of the actual payments. You should **not** claim a Childcare Grant for a period that is supported by a free early learning place.

Step 3

You will receive a letter advising of any Childcare Grant awarded.

Step 3

Once we have assessed your estimates and your eligibility we will send you a letter confirming how much Childcare Grant you will receive. This letter also details any other student finance you may be entitled to.

Step 4

We will pay the 1st instalment of your grant direct to you.

Step 4

Childcare Grant payments are usually paid in three instalments at the start of each term. Your 1st instalment will be paid into your bank or building society account on the same day as any other student finance payments.

Step 5

You need to complete and return the first of the Childcare Costs Confirmation Forms (CCG2).

Step 5

At the end of your 1st period we will send you a Childcare Costs Confirmation Form (CCG2) to complete. This will let you and your childcare provider confirm what your **actual** costs were for the 1st period against what you estimated.

Step 6

We will reassess, if necessary, your Childcare Grant entitlement.

Step 6

Based on your **actual** costs we will reassess your entitlement and, if you have been overpaid or underpaid, will adjust your final entitlement accordingly.

Step 7

Steps 5 and 6 are repeated in the 2nd and 3rd periods.

Step 7

At the end of both period 2 and 3 we will ask you to complete a Childcare Costs Confirmation Form (CCG2) again as you did in period 1. This will help us ensure you have been paid the correct amount of Childcare Grant.



It is an offence to knowingly provide false information on this form.

Instructions

Before you fill in this form, make sure you have completed your main Application for Student Finance and sent all the evidence we need. You can only get Childcare Grant once you've done that.

- **Sections 1 and 2** must be completed by **you**.
- **Section 3** must be completed by all of **your childcare provider(s)**.
- **Answer all the questions.** If you leave any questions blank we will not be able to process your application for Childcare Grant. If a question does not apply to you, please enter 'None' or 'N/A' as the answer.
- If you want to provide further information for any section, please use the 'Additional notes' page at the back of this form.

How can I contact you?

- Visit www.direct.gov.uk/studentfinance
- Contact us on **0845 300 50 90** or by textphone on 0845 604 4434.

Personal details

Customer Reference Number

Forename(s)

Surname

Date of birth

Your full current home address
(**not** your university or college address)

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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<input type="text"/>										
Postcode	<input type="text"/>									

section 1 student's details

Do you, your husband, wife or partner receive, or expect to receive, the childcare element of Working Tax Credit during the academic year 2012/13?

Yes **No**

! If 'Yes', you cannot also receive Childcare Grant. However you can choose to receive Childcare Grant instead of the childcare element of Working Tax Credit if you wish.

a Childcare details

Please provide details of children who will be receiving registered or approved childcare during your academic year. You should only include childcare provided from the first day of your 2012/13 academic year.

Child's full name	Date of birth	Date childcare started in academic year 2012/13
Child 1	(DD MM YYYY)	(DD MM YYYY)
Child 2		
Child 3		
Child 4		
Child 5		

b Early Years Service

You may get a free place for a child from the Early Years Service within your local authority. Your application for Childcare Grant must not include costs for these early learning places.

Will any child mentioned in section 2a receive a free early learning place during the academic year 2012/13?

Yes No

If 'Yes', please give the name and address of the provider(s) below.

Name of provider	Address

c Childcare estimates

! Please enter each child's name and your childcare costs **per week** incurred during your university or college terms and holidays.

The earliest we can pay for your childcare costs is the start of your academic year. If you want to claim for the period between the first day of your academic year and the start of term 1 then please complete costs **per week** 'Before Term 1'.

Costs per week					
Name of child	Child 1	Child 2	Child 3	Child 4	Child 5
Before Term 1	£	£	£	£	£
Term 1	£	£	£	£	£
Holiday 1	£	£	£	£	£
Term 2	£	£	£	£	£
Holiday 2	£	£	£	£	£
Term 3	£	£	£	£	£
If you are in the final year of your course, we can only pay the childcare grant up until the last day of your final term.					
After Term 3	£	£	£	£	£

It is recommended that you take a note of the estimates provided as this information may be helpful when you complete your actual costs later in the year on the 'Childcare Costs Confirmation Form' (CCG2).

d Exceptions to childcare estimates

If you do not pay for childcare for a whole term or holiday period, or if your childcare costs are different in any week to those you have given in 2c, please provide details below.

Name of child	Weeks in which you do not pay childcare or in which you pay different amounts		Weekly childcare costs (£s)
	From (DD MM YYYY)	To (DD MM YYYY)	

Student declaration

Our Data Protection Statement sets out who will use the information provided on this form and what they will use it for. Before signing this form please read our statement online at www.direct.gov.uk/studentfinance-dataprotection. Alternatively, you can request a copy by writing to the Student Loans Company (SLC) at 100 Bothwell Street, Glasgow, G2 7JD or by calling us on 0845 300 5090.

- I confirm that to the best of my knowledge and belief, the information I have provided is true and complete. If it is not I understand I might be refused all financial support, or prosecuted and all my financial support withdrawn.

Your full name (in BLOCK CAPITALS)

Your signature

Date



Important information

Before asking all of your childcare provider(s) to complete section 3, you must ensure that each childcare provider is approved or registered as detailed in the 'Childcare Grant and other support for full-time student parents in Higher Education 2012/13' booklet.

To be completed by your first childcare provider

Childcare provider details

Name of childcare provider

Address

Postcode

Phone number

Childcare provider registration/approval details

Please tick the appropriate box and provide the details requested.

As a childcare provider in **England**, I am registered with Ofsted.

Registration number

Date of registration

D

D

/

M

M

/

Y

Y

Y

Y

As a childcare provider in **Wales**, I am registered with the Care and Social Services Inspectorate for Wales (CSSIW).

Registration number

Date of registration

D

D

/

M

M

/

Y

Y

Y

Y

As a childcare provider in **Northern Ireland**, I am registered with a Health and Social Services Trust.

Registration number

Date of registration

D

D

/

M

M

/

Y

Y

Y

Y

As a childcare provider in **Scotland**, I am registered with the Scottish Commission for the Regulation of Care.

Registration number

Date of registration

D

D

/

M

M

/

Y

Y

Y

Y

To be completed by your first childcare provider

I am approved by or registered with another organisation and I have given their details below.

Name and address of the organisation which granted approval or that you are registered with:

Name

Address

Phone number

Reference number

Date of approval or registration

Date approval or registration ends

Postcode									
D	D	/	M	M	/	Y	Y	Y	Y
D	D	/	M	M	/	Y	Y	Y	Y

Childcare provider declaration

I agree to provide childcare as shown in section 2 of this form and that this childcare has been approved by or registered with the organisation that I have indicated.

Your full name (in BLOCK CAPITALS)

Your signature

X

Date

D D / M M / Y Y Y Y

To be completed by your second childcare provider

Childcare provider details

Name of childcare provider

Address

Postcode

Phone number

Childcare provider registration/approval details

Please tick the appropriate box and provide the details requested.

As a childcare provider in **England**, I am registered with Ofsted.

Registration number

/

/

Date of registration

As a childcare provider in **Wales**, I am registered with the Care and Social Services Inspectorate for Wales (CSSIW).

Registration number

/

/

Date of registration

As a childcare provider in **Northern Ireland**, I am registered with a Health and Social Services Trust.

Registration number

/

/

Date of registration

As a childcare provider in **Scotland**, I am registered with the Scottish Commission for the Regulation of Care.

Registration number

/

/

Date of registration

SFE/CCG1/1213

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To be completed by your second childcare provider

I am approved by or registered with another organisation and I have given their details below.

Name and address of the organisation which granted approval or that you are registered with:

Name

Address

Postcode

Phone number

Reference number

Date of approval or registration

Date approval or registration ends

Childcare provider declaration

I agree to provide childcare as shown in section 2 of this form and that this childcare has been approved by or registered with the organisation that I have indicated.

Your full name (in BLOCK CAPITALS)

Your signature

Date

To be completed by your third childcare provider

Childcare provider details

Name of childcare provider

Address

[]	
[]	
Postcode	[]
[]	

Phone number

Childcare provider registration/approval details

Please tick the appropriate box and provide the details requested.

As a childcare provider in **England**, I am registered with Ofsted.

Registration number

[]	[]	[]	[]	[]	[]	[]	[]
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Date of registration

D	D	/	M	M	/	Y	Y	Y	Y
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As a childcare provider in **Wales**, I am registered with the Care and Social Services Inspectorate for Wales (CSSIW).

Registration number

[]	[]	[]	[]	[]	[]	[]	[]	[]	[]	[]	[]	[]	[]	[]	[]
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Date of registration

D	D	/	M	M	/	Y	Y	Y	Y
---	---	---	---	---	---	---	---	---	---

As a childcare provider in **Northern Ireland**, I am registered with a Health and Social Services Trust.

Registration number

[]	[]	[]	[]	[]	[]	[]	[]	[]	[]	[]	[]	[]	[]	[]	[]
-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----

Date of registration

D	D	/	M	M	/	Y	Y	Y	Y
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As a childcare provider in **Scotland**, I am registered with the Scottish Commission for the Regulation of Care.

Registration number

[]	[]	[]	[]	[]	[]	[]	[]
-----	-----	-----	-----	-----	-----	-----	-----

Date of registration

D	D	/	M	M	/	Y	Y	Y	Y
---	---	---	---	---	---	---	---	---	---

To be completed by your third childcare provider

I am approved by or registered with another organisation and I have given their details below.

Name and address of the organisation which granted approval or that you are registered with:

Name

Address

[Empty text box for Name]

Postcode [Empty text box]

Phone number

[Empty text box for Phone number]

Reference number

[Empty grid for Reference number]

Date of approval or registration

DD / MM / YYYY

Date approval or registration ends

DD / MM / YYYY

Childcare provider declaration

I agree to provide childcare as shown in section 2 of this form and that this childcare has been approved by or registered with the organisation that I have indicated.

Your full name (in BLOCK CAPITALS)

[Empty text box for full name]

Your signature

X [Empty text box for signature]

Date

DD / MM / YYYY



Additional notes

If you are providing extra information below please clearly mark what section and question number the information is relating to.



Student's checklist

Before returning this form, please make sure that you have done the following:

- Fully answered all the relevant questions.
- Signed and dated the Student declaration.
- Asked your childcare provider(s) to complete section 3 (if applicable).



Please remember to pay the correct postage.

Once you have completed this form, and signed and dated the declaration, please return it to us at:

**Student Finance England
PO Box 210
Darlington
DL1 9HJ**